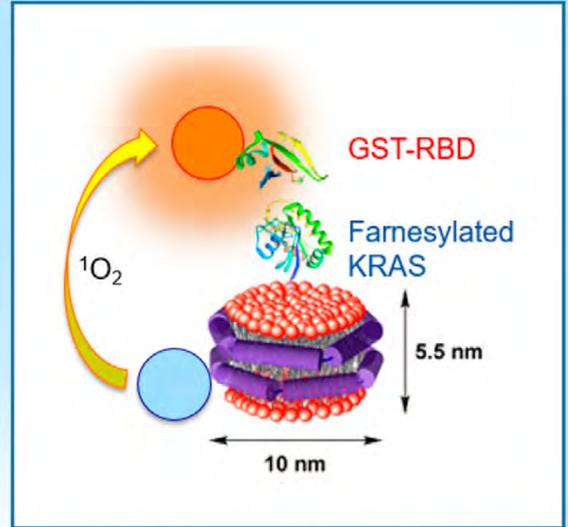


Screening for KRAS Inhibitors

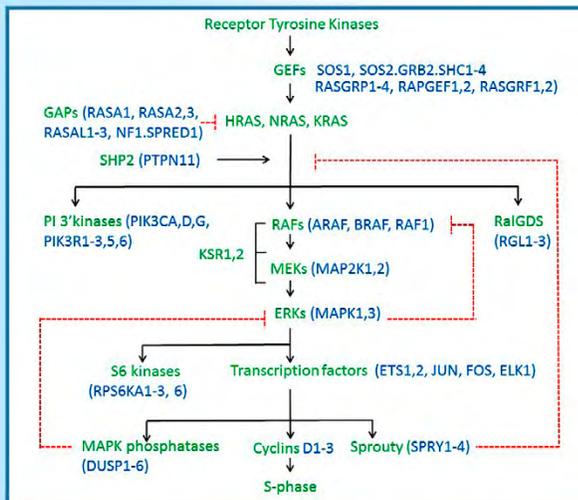


Fully Processed KRAS in Nanodiscs

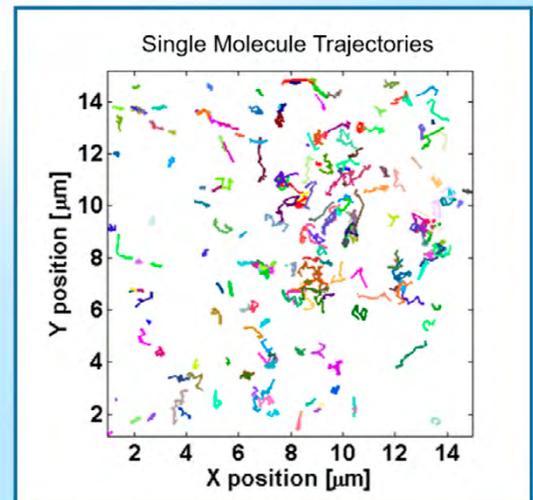
## Targeting RAS



Structural Analysis of RAS-Raf Complexes



The RAS Pathway (Simplified Version)



Tracking Single RAS Proteins in Live Cells

## The RAS Initiative

The RAS family of oncogenes were the first oncogenes identified in human cancer cell DNA in 1981. Since then, their role as major drivers of human cancer has been well established. Activating mutations in RAS genes, in particular KRAS, are observed in about 35 percent of lung adenocarcinomas and more than 90 percent of pancreatic cancers. RAS oncogenes also play important roles in many other cancers, including colorectal cancer, acute myeloid leukemia, and melanoma. In most cases, RAS mutations initiate cancer and are major drivers, thus establishing RAS proteins as valuable therapeutic targets. Most activating mutations occur at codons 12, 13, or 61<sup>1</sup>, all of which prevent inactivation by GTPase Activating Proteins, so that they remain in their active states persistently, driving abnormal cell proliferation, migration, and survival.<sup>2</sup>

Despite RAS' clear role in cancer, little progress has been made towards treating RAS-driven cancers. This is largely due to the fact that RAS proteins, unlike protein kinases, do not have active sites that are amenable to interaction with small molecule inhibitors.<sup>3</sup> Furthermore, RAS proteins are downstream of receptor tyrosine kinases (RTKs), and as a result, approved drugs targeting RTKs are ineffective in treating RAS-driven cancers. In addition, oncogenic RAS proteins activate pathways that confer "stem-like" properties on cancer cells, making them drug resistant with a high tumorigenic potential.<sup>4</sup> To date, most efforts to target RAS have involved indirect attack on kinases downstream of RAS that are thought to be essential for RAS activity, such as RAF, MEK, or ERK. However, as shown in the lower left panel, these pathways are very complicated, with significant redundancy and feedback. To date, drugs targeting this dynamic network have not been effective in treating RAS cancers, leaving patients with few good therapeutic options.

Recognizing these issues, Drs. Harold Varmus, the previous Director, NCI, and Doug Lowy, the current Acting Director, NCI, with input from the Frederick National Advisory Committee (FNLAC), launched the national NCI RAS Initiative in 2013 to explore innovative approaches of targeting mutant forms of RAS directly and treating RAS-driven cancers. A Hub and Spoke model was proposed, in which the RAS Initiative would be based at the Frederick National Laboratory for Cancer Research (FNLRCR), and would collaborate with an international network of RAS investigators, including academic, commercial, and biopharmaceutical partners. Three years later, the RAS Initiative is in full swing, with more than 50 researchers at the FNLRCR working as an integrated team to solve the RAS problem, with input from the RAS Initiative Working Group and in collaboration with multiple partners.

A major focus of the RAS Initiative is to solve structures of oncogenic KRAS proteins alone and in complex with their critical effectors and regulators. Solving these structures is expected to guide drug discovery efforts, either by exploiting new effector or regulator pockets using *in silico* computational methods, or by supporting traditional drug screening efforts and medicinal chemistry. The cover page central figure<sup>5</sup> illustrates a three-dimensional structure of oncogenic KRAS-GTP mutant (green) bound to the RAS-binding domain of RAF kinase (blue). The interface between these proteins is a potential target for intervention, as RAS-dependent activation of RAF kinase is a critical component of downstream signaling pathways that drive cancer. Another possible point of intervention is the site of GTP hydrolysis created by the binding of RAS proteins to GAPs. Normally, this interaction results in the hydrolysis of GTP by wild-type RAS, thus inactivating RAS signaling. In oncogenic RAS mutants, the GTPase machinery is defective, and RAS activity cannot be turned off. Compounds that restore GTP hydrolytic activity would inactivate oncogenic RAS proteins. Efforts to find such compounds will be greatly facilitated by defining structures of complexes formed between mutant RAS proteins and GAP. Some of these structures have now been solved, revealing new opportunities for therapy.

In addition to structure-based inhibitor drug design, the RAS Initiative is developing novel screens for detecting compounds that turn RAS off. Some of these screens are cell-based, some biochemical, and others are imaging-based techniques that detect dislocation of RAS from the plasma membrane. The upper left panel<sup>6</sup> shows results of a cell-based screen of small molecules with known molecular targets that selectively block oncogenic KRAS-G12D but do not affect wild-type HRAS cell proliferation. Each dot represents an 11-point IC50 determination for a specific compound. This screen was done in collaboration with the National Center for Advancing Translational Sciences (NCATS), and has been the basis of further collaborations with pharmaceutical partners.

The RAS Initiative also has been highly successful in the production of high-quality, fully processed KRAS protein, enabling additional biochemical screens as well as intense biophysical analysis of KRAS in synthetic membranes.<sup>7</sup> The upper right panel<sup>8</sup> illustrates a fully processed, farnesylated KRAS inserted into the surface of lipid nanodiscs and its interaction with glutathione-S-transferase (GST) tagged RAF binding domain (GST-RBD). This format is ideal for high-throughput biochemical screening, NMR analysis, and other biophysical methods to identify inhibitors of RAS:RAF effector interactions.

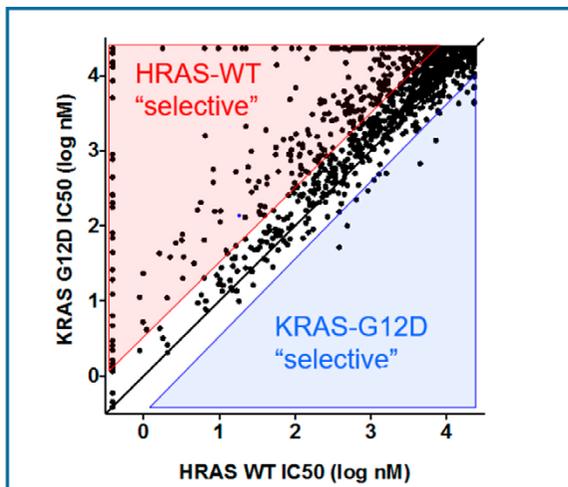
Image-based assays of RAS proteins also help us to understand how RAS inhibitors affect the protein's association with the plasma membrane. Investigators have been able to track fluorescent dye tagged RAS molecules in the membrane of living cells, as shown in the lower right panel.<sup>9</sup> Studies using single-molecule microscopy have revealed that RAS proteins exist in three major motility states (i.e., fast moving, intermediate, and slow moving) consistent with a model in which RAS proteins are mostly monomers, but enter different states when they engage signaling molecules. Using this system, the RAS investigators seek to learn how normal and oncogenic mutants are regulated, how they enter and exit signaling complexes, and how they are affected by therapeutic agents.

By using an integrated, team-based approach centered at the FNLCR, and in collaboration with an extensive network of laboratories in academia, the NCI, and industry, the RAS Initiative hopes to develop drug candidates that target RAS proteins directly, or block RAS activity in cancer cells. We expect that these candidates will advance quickly towards pre-clinical testing and that, in the not too distant future, therapies for this deadly group of RAS-driven cancers will be a reality.

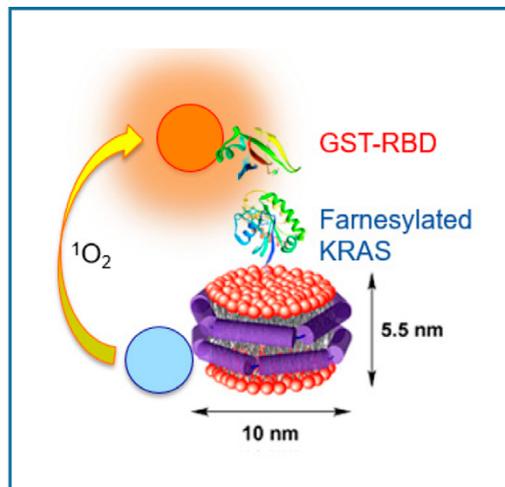
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9. Halo-tagged KRAS protein was expressed and tracked in living cells by Dr. Tommy Turbyville and colleagues at the FNLCR.

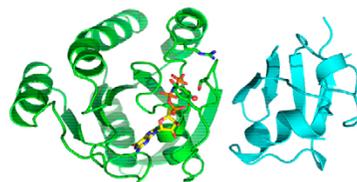


Screening for KRAS Inhibitors

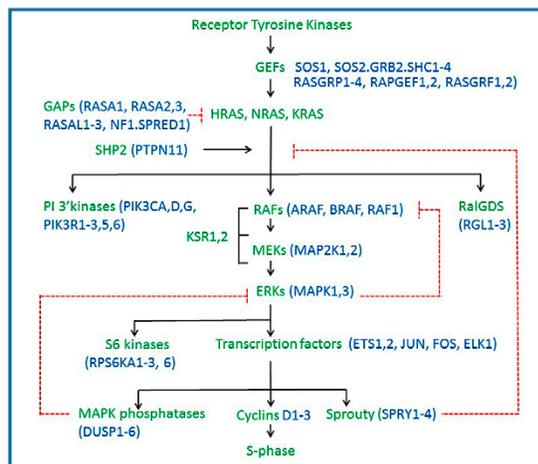


Fully Processed KRAS in Nanodiscs

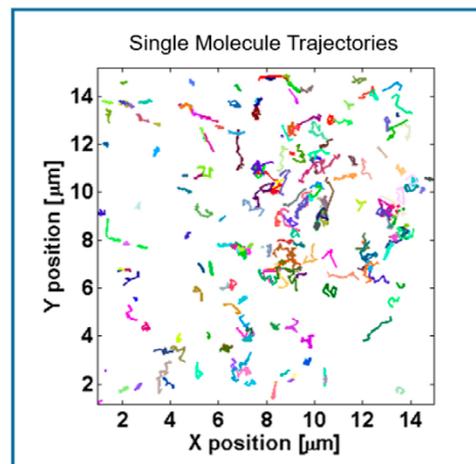
## Targeting RAS



Structural Analysis of RAS-Raf Complexes



The RAS Pathway (Simplified Version)



Tracking Single RAS Proteins in Live Cells

Images and narrative are the courtesy of Dr. Frank McCormick, Professor Emeritus, University of California, San Francisco Helen Diller Family Comprehensive Cancer Center.

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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 review of extramural research before funding and for conducting systematic surveillance of

that research after funding. The Division solicits 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 be evaluated based on their merit and promise. The peer review system is the keystone for ensuring that the best science is supported.

DEA coordinates the activities of: (1) the National Cancer Advisory Board (NCAB), which consists of members appointed by the President, conducts the second-level review of grants and cooperative agreements and advises the Director, NCI, 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 activities of the Frederick National Laboratory Advisory Committee (FNLAC), which reviews the state of research at the Frederick National Laboratory of Cancer Research (FNLRC); and (4) extramural training opportunities for NCI Program and Review staff.

As a Division, we evaluate the content of all extramural research funded by the NCI and annually track the NCI research portfolio of more than 8,000 research and training awards by using consistent budget-linked scientific information to provide

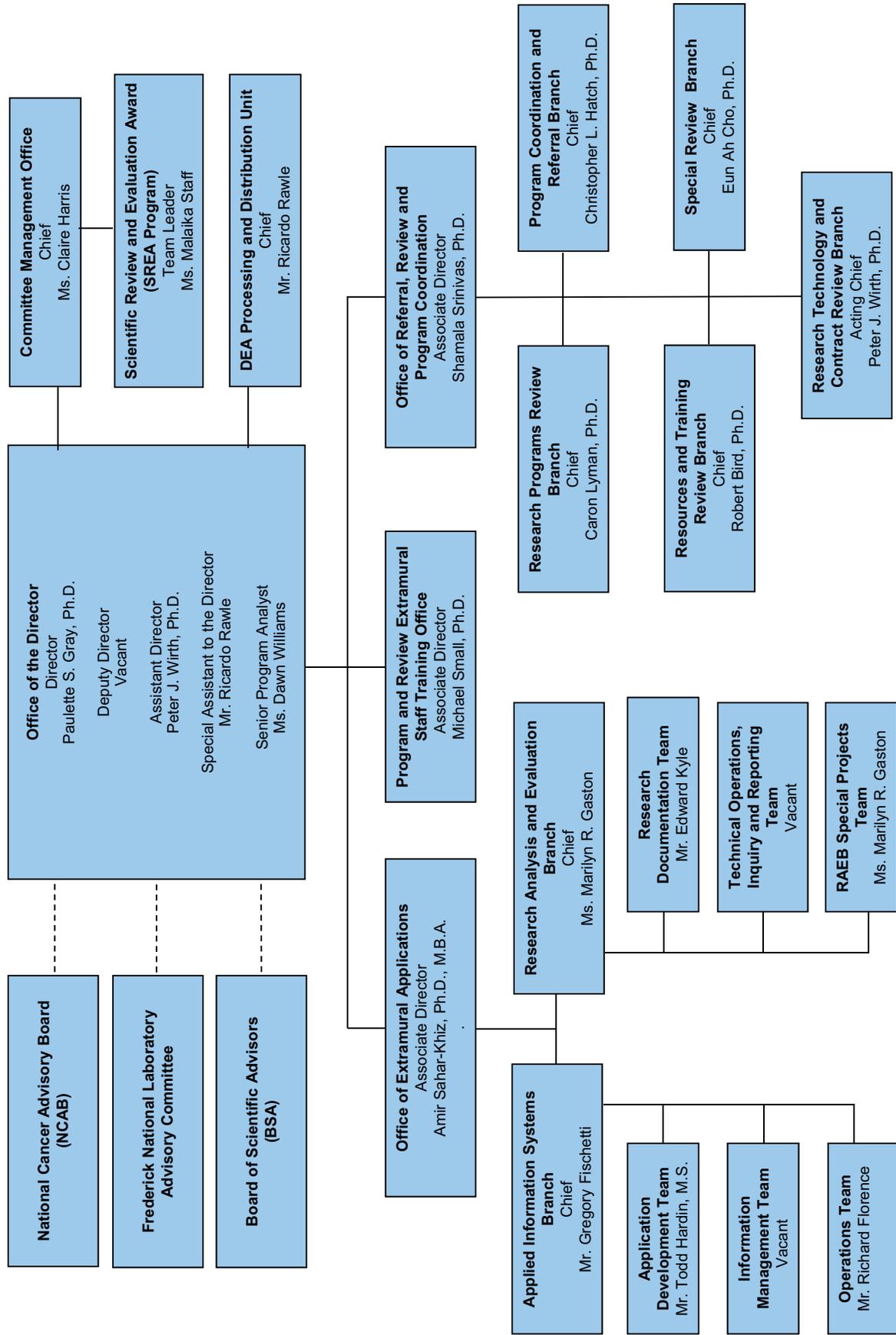
a basis for budget projections; maintain extensive records of this research and provide specialized analyses of the costs, goals, and accomplishments of the research; and serve as an NCI resource to others for reporting and dissemination of the NCI's research portfolio. DEA monitors budgetary limitations for grant applications; participates in establishing policies to expedite funding; and initiates and implements changes to applications, guidelines, and award processes. The Division also 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; and 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 research funding process and the role of DEA in support of NCI's mission. A comprehensive look at each of the major areas of responsibility within the Division is provided. The data presented cover Fiscal Year (FY) 2015 (1 October 2014 - 30 September 2015) 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. We sincerely want to thank the more than 2,400 researchers, clinicians, and advocates who gave unselfishly of their time in FY2015 and have contributed to the continuing success of NCI's peer review and advisory activities.

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 part of DEA's mission is to manage and coordinate the second level of grant review by the National Cancer Advisory Board (NCAB); concept review of all new and reissued Requests for Applications (RFAs) and Research and Development (R&D) Requests for Proposals (RFPs) by the Board of Scientific Advisors (BSA), and activities of the Frederick National Laboratory Advisory Committee (FNLAC), which reviews the state of research at the Frederick National Laboratory of Cancer Research (FNLRCR). The DEA also provides effective and timely coordination of program initiatives from the initial concept stage through publication of Requests of Applications (RFAs), Requests for Proposals (RFPs), Program Announcements (PAs), Notices, and finally the peer review of grant and cooperative agreement applications and contract proposals.

The **Committee Management Office** (CMO) provides oversight of all NCI-chartered advisory boards and committees, working groups, task forces, and chartered review groups. The CMO also serves as an NIH service center for the National Institutes of Health (NIH), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the NIH Council of Councils (CoC). 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: (1) coordination of the development and issuance of NCI program initiatives; (2) execution of grant receipt and referral; and (3) 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, PAs with Special Receipt (PARs), complex, multi-component grant and cooperative agreement initiatives, and R&D RFPs. The program coordination responsibilities of the DEA, in cooperation with NCI extramural program Divisions, Offices, and Centers, 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 program 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 for NCI grants, cooperative agreements, and contracts. In doing so, the Institute has the capability of responding expeditiously to congressional and other inquiries. 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 that all aspects are as clear and accessible as possible to NCI staff, advisory groups, and applicants. To facilitate this evaluation, 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 Web-based information system includes early notice of approved concepts, listings of active PAs and recently published RFAs, and policies related to the clearance of new program initiatives. This information is provided in both public accessible Internet (<http://deainfo.nci.nih.gov/funding.htm>) and NCI limited-access Intranet versions.

## 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. The DEA OD ensures that 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 that 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 FY2015, 23 applications with preliminary bars to award were received by the DEA. Through corrective action, working with the applicants and 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 FY2015, 11 cases of alleged research misconduct involving NCI funding were opened and under investigation by the Office of Research Integrity, HHS, and referred to the Director, DEA. Six cases were closed and one case was found to involve research misconduct. Cases found to involve research misconduct are published in the *Federal Register* and *DHHS Office of Research Integrity*.

### 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 Program, Review, and other extramural staff. 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; and (3) identifies and develops resources to facilitate individual learning and performance. Finally, PRESTO tracks the participation of extramural staff in NIH- and NCI-sponsored training activities as well as continuously evaluates the efficacy of these activities.

During FY2015, PRESTO activities included:

- Launch of a revamped PRESTO website providing an improved user interface with NIH and NCI training resources.
- A Project Management Series featuring project management professionals and addressing various issues of interest to NCI extramural staff.
- An Electronic Tools Workshop Series specifically designed for new Program Officials to enhance their knowledge and skills related to the use of QVR, Greensheets, Workbench, and other electronic systems.
- PRESTO-sponsored training focused on Administrative, Scientific, and Research Resource topics including Research Misconduct, Precision Medicine, and Biological & Biopharmaceutical Agent Development.

During FY2016, PRESTO will continue to offer a variety of training opportunities, with particular focus on new and emerging topics of broad interest to NCI extramural staff. PRESTO plans to conduct boot camps for newly hired Scientific Review Officers so as to provide them with the fundamentals of peer review. The NCI Scientific Review Officer Handbook also will be revised to increase its usability. Various information technology tools will be employed to enhance the effectiveness of PRESTO-sponsored training activities.

## 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, Notices, and associated guidelines 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, 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. PCRB verifies consistency with NIH-wide 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 FY2015, 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 issued by the NCI in FY2015, and **Table 4** lists PAs issued by other NIH ICs that the NCI has joined as a participating partner.

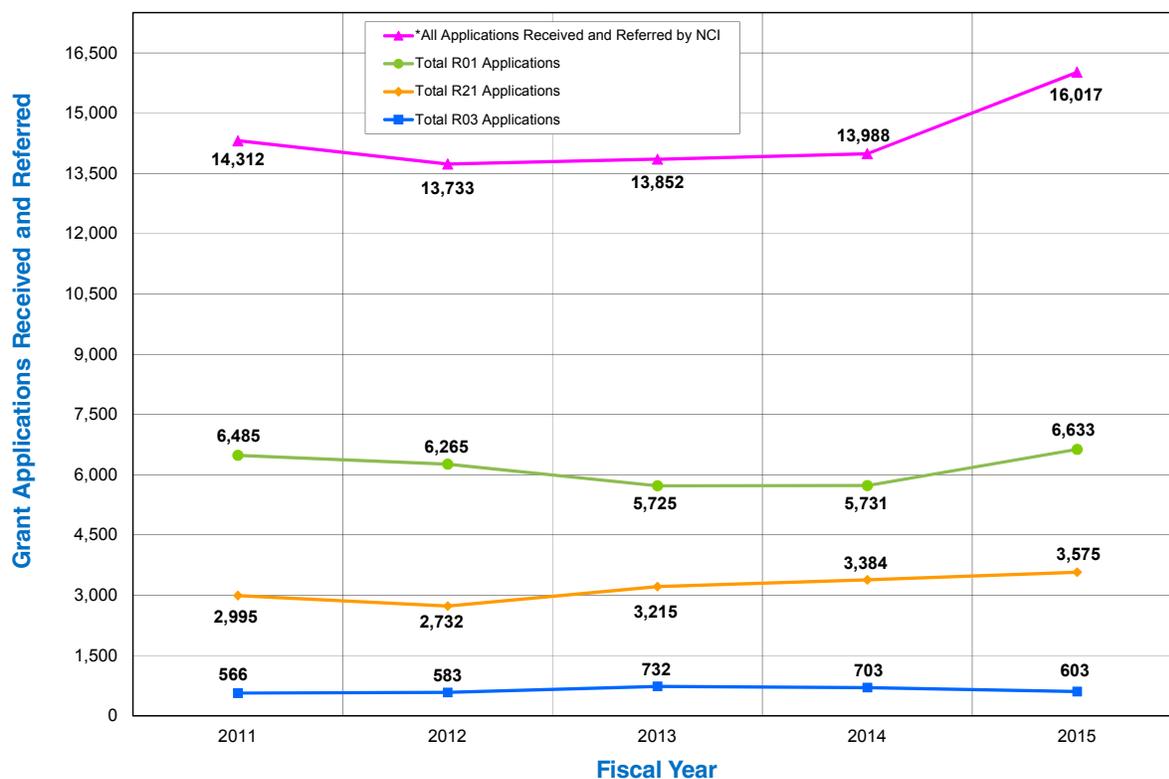
PCRB staff members continue to provide relevant information and timely updates to all NCI extramural staff members on activities and results related to the requirements for and uses of electronic grant applications. The Branch also serves as a direct source of guidance on this topic for program officials at the NCI and applicants in the extramural scientific community. Staff members in the Referral Office (RO) in PCRB collaborated with NCI information technology staff members and their contractors to successfully develop and deploy an improved Web-based Awaiting Receipt of Application (ARA) management system (permission for special application receipts), 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 Scientific Review Officers (SROs) in managing the reviews of 374 student loan repayment program (LRP) contract proposals in FY2015 (**Table 12**).

## Grant Referral: A First Point of Contact for NCI Grant Applicants and Receipt of Applications

In FY2015, a total of 16,017 grant and cooperative agreement applications were submitted to the NCI for funding with appropriated funds (see Figure 1 and Table 5). Applications encompassed 50 different types of award mechanisms (Appendix E), 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), 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 CSR, the NCI Referral Officers (ROs) in PCRB: (1) assign all incoming applications to one of the 50 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

**Figure 1. Receipt and Referral of NCI Grant Applications  
FY2011 – 2015**



\*Includes NCI Primary and Secondary applications received and referred.

ICs and even other HHS research funding agencies, such as the Agency 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 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. PCRB also is the information and coordinating center 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 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. If the Program agrees to accept the application, the Program must submit an Awaiting Receipt of Applications (ARA) form to CSR DRR. The ARA form also facilitates requests for assignments from ICs and other information that needs to be connected to a specific application. For additional guidance on this process, refer to NOT-OD-02-004 “Revised Policy on the Acceptance for Review of Unsolicited Applications That Request \$500,000 or More in Direct Costs.”

## Peer Review—The Next Step

Once an application is referred to the NCI and assigned to the appropriate program, the application must be reviewed. The high caliber of NCI-sponsored research is maintained through a rigorous peer review process in which established experts in the appropriate scientific fields review and evaluate 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 supports highly meritorious research that has the potential to make a significant contribution and impact in 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 (R&D) contracts also are subject 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 and regulation. The first level of review is managed by Scientific Review Officers (SROs) who serve as the Designated Federal Officer (DFO) and are conducted in either an NIH CSR study section, a chartered NCI Initial Review Group (IRG), or an NCI Special Emphasis Panel (SEP). The purpose of this initial review is to evaluate the scientific and technical merit, protection of human subjects, inclusion plans, animal welfare, and budget and/or administrative issues of the applications or cooperative agreements under review. The second level of review, which is not a re-review of scientific merit but a validation of the initial review and an evaluation of program relevance, is conducted by the National Cancer Advisory Board (NCAB).

Most investigators are familiar with the functions of an NIH CSR study section, which has the primary responsibility for the peer review of most investigator-initiated Research Program Grants (RPGs) (R01) and Fellowship (F) applications. What is less widely known, however, is that grant applications requesting more than 50 percent of

the NCI's overall extramural budget are reviewed by chartered NCI IRGs and SEPs that are conducted within the DEA. The locus of the peer review, whether by the CSR or the DEA, is usually determined by the type of grant mechanism of the application under review.

Although the NCI has no direct input into the selection of CSR study section reviewers, members of NCI IRGs and SEPs are selected by DEA review staff, with suggestions from NCI Program staff. NCI IRGs and SEPs provide advice on the scientific and technical merit of applications for research, research training, education, and career development; cooperative agreements; and contract proposals relating to scientific areas relevant to cancer.

All chartered NCI IRG Subcommittee members are approved by the Director, DEA, based on their knowledge and demonstrated expertise in various disciplines and fields related to cancer. The NCI currently 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. NCI IRG members are appointed for varying terms of service, which may be up to 6 years. DEA SEPs are selected *ad hoc* on a one-time, as-needed basis, to review specific grant and cooperative agreement applications received in response to RFAs, PAs, PARs, and other specialized applications, or R&D contract proposals received in response to RFPs.

The peer review of grant applications and contract proposals generally occurs in the fall, winter, and spring prior to the January, May, and October NCAB meetings, respectively. The membership of NCI-chartered subcommittees may be found in [Appendix C](#) and at <http://deainfo.nci.nih.gov/advisory/irg/irg.htm>, and information about NCI SEPs can be accessed at <http://deainfo.nci.nih.gov/advisory/sep/sep.htm>.

## Review Workload

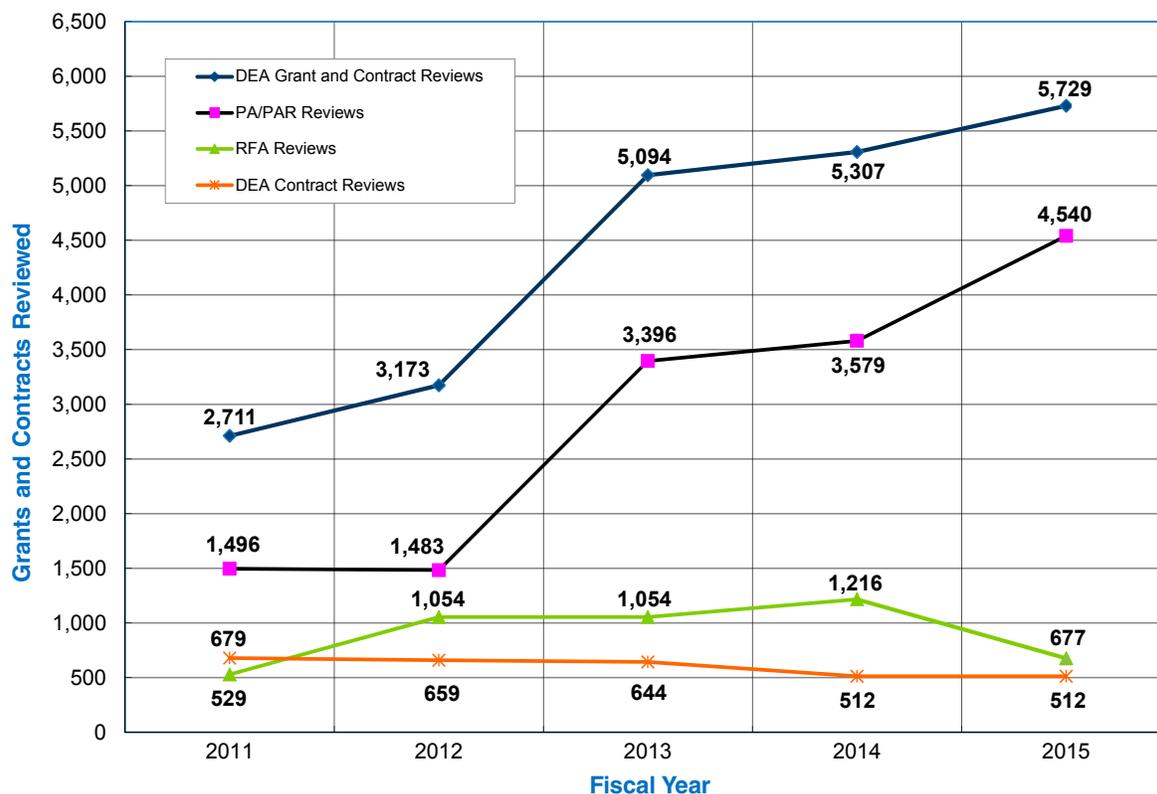
In FY2015, DEA organized, managed, and reported the review of a total of 5,217 research grant and cooperative agreement applications (Table 6) and 512 contract proposals (Table 12) assigned to the NCI for funding with appropriated dollars. The total number of grant applications, cooperative agreements, and contract proposals reviewed in FY2015 was 5,729 (Figure 2). In addition, the DEA conducted 15 Cancer Center site visits, 12 IRG Subcommittee review meetings, 157 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 2,400 peer reviewers served on the NCI DEA-managed IRG Subcommittees, SEPs, and workgroups in FY2015 (see Appendixes C and D). 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. 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 grant and cooperative applications or 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 are reviewed by SEPs as shown in Table 12.

**Figure 2. DEA Review Workload  
FY2011 – 2015**



The **Resources and Training Review Branch** (RTRB) is primarily responsible for the peer review of multicomponent (*aka* “complex”) Cancer Center Support as well as single component Training, Education, and Career Development grant applications (see [Table 6](#)). The RTRB also has responsibility for the management of the four NCI IRG Subcommittees (see [Appendix D](#)).

The **Research Programs Review Branch** (RPRB) has primary responsibility for review of unsolicited multicomponent Program Project (P01) and Specialized Programs of Research Excellence (SPORE) (P50) translational research applications focused on various disease sites.

The **Special Review Branch** (SRB) is primarily responsible for the management and peer review of grant applications submitted in response to NCI issued RFAs (e.g., NCI Provocative Questions) and PAs/PARs (e.g., NCI R03/R21) as well as other special initiatives.

The **Research Technology and Contract Review Branch** (RTCRB) is primarily responsible for the peer review of Small Business Innovation Research (SBIR)/Small Business Technology Transfer (STTR) grant applications and Special Topics proposals, technology-related applications, and R&D contract proposals submitted in response to Request for Proposals (RFPs). All review meetings managed by RPRB, SRB and RTCRB are conducted using SEPs.

The **Program Coordination and Referral Branch** (PCRB) is primarily responsible for the management and peer review of grant applications submitted in response to the NIH Parent Conference Grant R13 PA and assigned to the NCI as well as for the management and peer review of proposals submitted to the NIH Loan Repayment Program (LRP) (L30, L40) solicitation and assigned to the NCI.

### **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 D](#)).

The review of Cancer Center Support Grant (CCSG) applications involves a two-tier initial peer review process. Normally, the first tier of the review involves a site visit to the applicant institution by a non-FACA working group review panel. The 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, thereby enhancing the review process. 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 FY2014, new guidelines were implemented in which Cancer Centers may elect not to have a site visit. In this case, the review will be 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 FY2015, Subcommittee A reviewed 16 CCSG applications.

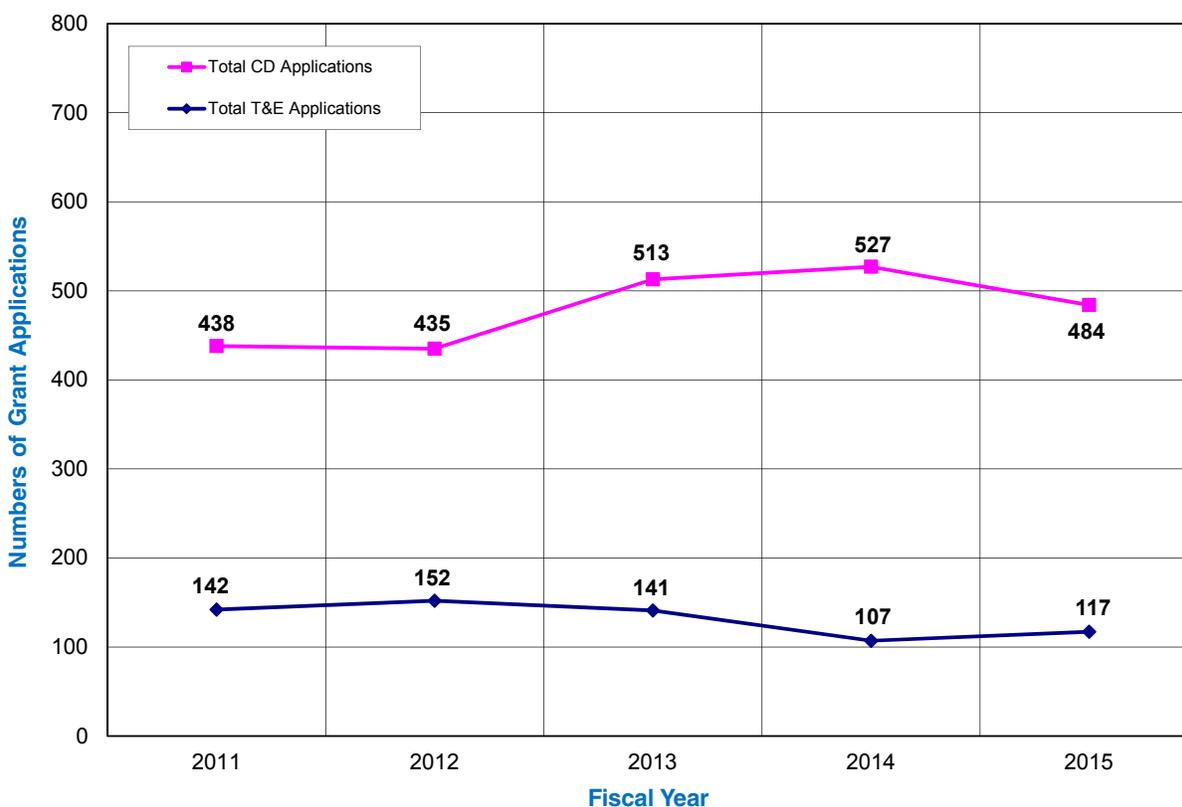
### **Training and Career Development**

Career Development and Training and Education grant applications are reviewed by IRG Subcommittees F, I, and J. The number of Career Development applications were fairly stable (435-438) in 2011/2012, increased to 527 in 2014, and decreased slightly to 484 in 2015. The number of Training and Education grant applications has remained fairly constant from 2011 (142) to 177 applications in 2015 ([Figure 3](#)).

### **NCI Community Oncology Research Program (NCORP)**

Late in 2012, the NCI initiated efforts to develop a national network of investigators, cancer care providers, academic institutions, and other health-related organizations for the conduct of multi-site cancer clinical trials and studies in diverse populations with the establishment of the

**Figure 3. Numbers of Career Development (CD) and Training and Education (T&E) Applications Reviewed FY2011 – 2015**



NCI Community Oncology Research Program (NCORP). NCORP integrated two prior networks: the NCI Community Clinical Oncology Program (Community Clinical Oncology Programs and Minority-Based CCOP, Research Bases), and NCI Community Cancer Centers Program (NCCCCP) for the conduct of clinical research in the community setting. The goal of NCORP is to facilitate the design and conduct of clinical trials to improve cancer prevention, cancer control, screening for early cancers, and post-treatment surveillance; and the delivery of cancer care and performance of comparative effectiveness research. In addition, NCORP seeks to facilitate access to treatment and imaging trials conducted by the National Clinical Trials Network (NCTN). In November 2013, three FOAs were issued soliciting cooperative agreement applications for NCORP Research Bases; Community Sites; and Minority/Underserved Community Sites.

### Other RTRB Activities

To assist reviewers in their participation for RTRB peer review, Reviewer Guides are maintained for

the different types of applications reviewed by the RTRB. Reviewer Guides were regularly updated for the newly reissued FOAs and for the electronic submission of grant applications. Reviewer Guides also contain general information on peer review and NIH policies regarding the use of human subjects in research, as well as specific instructions for each of the mechanisms to be reviewed. These mechanism-specific guides have been completed for all Training, Education, and Career Development and Cancer Center Support applications. This resource is especially helpful for IRG Subcommittee members who often participate in the review of single component Training, Education, and Career Development grant applications or multicomponent CCSG grant applications, each with their own specific review criteria.

### Research Programs Review Branch (RPRB)

#### Program Project (P01) Applications

A significant effort of RPRB during FY2015 was the review of unsolicited multicomponent Program

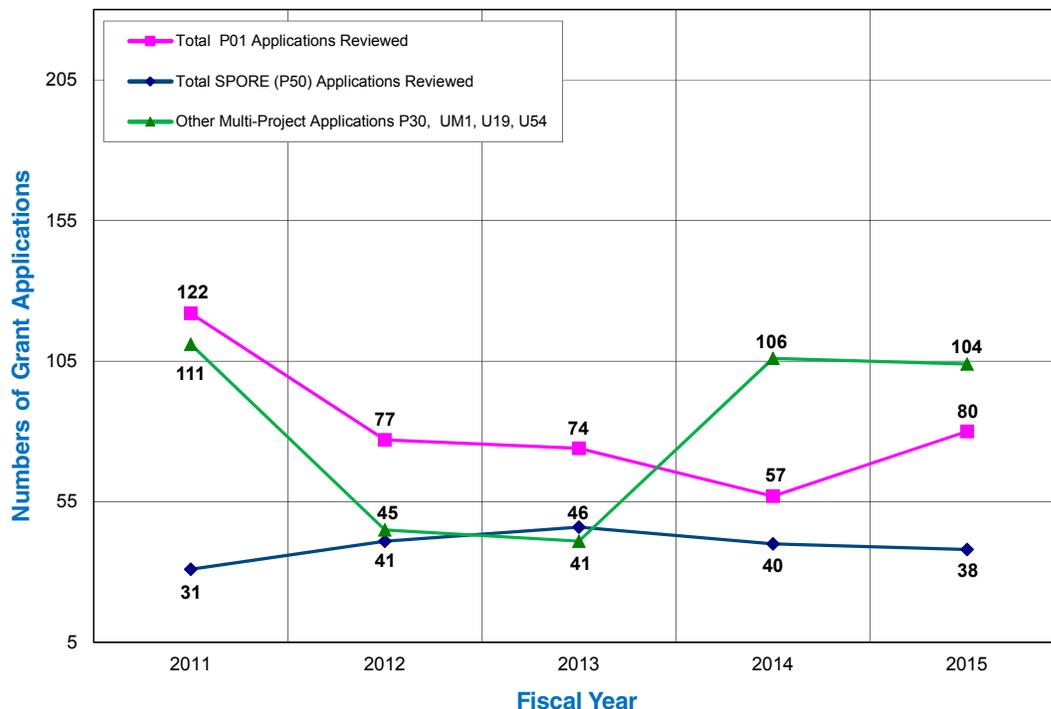
Project (P01) applications. P01 applications are typically reviewed using a one-tier, “paper only” review process. The applications are grouped based on their scientific focus and typically clustered into three to four groups of up to 10 applications in each group. The applications often represent a continuum of research from basic through translational to preclinical and clinical studies. All P01 review panels are constituted as SEPs, with reviewers recruited based on the scientific expertise needed for the applications being reviewed. The SEP review committees evaluate the technical and scientific merit of the individual projects and supporting core resource facilities, determine the level of program integration and leadership, and then assign an overall impact score to each application. During FY2015, RPRB managed the review of 80 new, renewal (competing), resubmitted (amended), and revised (competitive supplement) P01 applications (Figure 4 and Table 8). Forty-six (58%) of the applications proposed new multidisciplinary research programs, 25 (31%) of the applications were amended (Table 8), and 19 (24%) included multiple Principal Investigators (PIs). Thirty-six

(45%) of the 80 applications were referred to NCI’s Division of Cancer Treatment and Diagnosis (DCTD) (see Table 9). The 80 applications requested \$171,375,388 in total costs for the first year (see Table 9) and \$864,170,545 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, multidisciplinary, translational applications focus on research directly applicable to human disease in various organ sites. In FY2015, RPRB organized and managed six SEPs for the review of 39 SPORE applications (Figure 4). The applications addressed multiple organ sites, with the following distribution of applications: Breast (1); Endometrial (1); Gastrointestinal (1); Head and Neck (4); Kidney (3); Leukemia (1); Lymphoma (3); Lung (4); Mesothelioma (2); Myeloma (2); Ovarian (5); Pancreas (2); Prostate (4); Melanoma (1); Sarcoma (1); Neuroendocrine (1); Liver (1); Uterine (1); and RAS

**Figure 4. P01, SPORE, and Other Multi-Project Research Applications Reviewed FY2011 – 2015**



tumors (1). Overall, 24 (62%) of the 39 applications were submitted for new SPOREs, and 15 (38%) were renewal applications. The disease sites addressed in the SPORE applications vary from round to round. Ten applications addressing nine different disease sites were reviewed for the January 2015 NCAB cycle; 22 applications addressing 14 disease sites were reviewed for the May 2015 NCAB cycle, and seven applications addressing seven disease sites were reviewed for the October 2015 NCAB meeting. The applications requested \$88,047,460 in total costs for the first year of support and \$439,255,310 in total costs for 5 years.

### 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 RPRB routinely participate in these pre-submission conferences to assist the applicants in the application formatting requirements, the review process, the special review criteria, and the scoring paradigms for these applications. Additionally, RPRB manages the review of investigator-initiated R01 applications proposing multi-center clinical trials. Of the 21 applications reviewed in FY2015, 11 (52%) were referred to the Division of Cancer Prevention (DCP) and 7 (33%) were referred to the Division of Cancer Control and Population Sciences (DCCPS).

### 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 concepts by the NCI Scientific Program Leaders (SPL) and the Board of Scientific Advisors (BSA), Program staff prepares RFAs for publication in the *NIH Guide for Grants and Contracts*. DEA PCR staff, including SROs from the four NCI review branches, assist in critically reading the draft documents and in providing recommendations for clarity relative to application requirements and

review criteria. In an RFA, a specific, published dollar amount is set aside by the Institute, whereas for a PA/PAR, there is no dollar set-aside and no requirement for BSA review. **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 and reviewed by DEA. During FY2015, the SRB with the assistance of the three other DEA review branches (RPRB, RTCRB, and RTRB) reviewed a total of 5,207 applications received in response to 33 RFAs (**Table 10**) and 66 PAs/PARs (4,540 applications) (**Table 11**). The review of these applications was conducted by SEPs and involved the recruitment of scientists with the appropriate expertise for each review meetings.

### Research Answers to NCI's Provocative Questions (PQ)

Following input from the scientific community through focus groups, forums, and online postings, 28 perplexing scientific questions were identified and grouped, 4-6 questions each, into five thematic cancer areas: Cancer Prevention and Risk (Group A); Mechanisms of Tumor Development or Recurrence (Group B); Tumor Detection, Diagnosis, and Prognosis (Group C); Cancer Therapy and Outcomes (Group D); and Clinical Effectiveness (Group E). There were 80 R01 Research Project application and 58 R21 Exploratory/Developmental applications submitted in response to 10 RFAs (**Table 10**). Applications were peer reviewed in SEP review meetings to assess the scientific and technical merit and assign a final impact score to each application.

### Exploratory/Developmental Research

In FY2015, the DEA reviewed 2,490 R21 applications submitted for the NCI Omnibus Exploratory /Developmental Research Grant Program (**Table 11**). The applications are initially grouped based on their scientific focus and reviewed in 10 to 14 SEPs. The groupings varied depending on the number of applications received and the science proposed. The applications represent a continuum of research from basic

through translational to preclinical and clinical studies. The Omnibus applications were reviewed in a total of 40 SEPs over the three review cycles.

### **Small Grant Programs**

Several small grant (R03) PAR program initiatives in the areas of cancer epidemiology (PAR12-039), and NCI Omnibus R03 for cancer research (PAR14-007) stimulated increased interest in the applicant community. In FY2015, 547 applications were submitted and reviewed by the DEA in response to these initiatives.

### **Research Technology and Contract Review Branch (RTCRB)**

The RTCRB organizes and manages the peer review of SBIR/STTR applications and Special Topics, technology-related applications, and R&D contract proposals submitted in response to RFPs.

### **SBIR/STTR and Technology Research Applications**

The SBIR program supports Phase I feasibility applications (R43), Phase II applications (R44), and Fast-Track applications (R43/R44). In 2009, the first issued SBIR Phase II Bridge Award RFA was designed to “bridge the gap” between the end of the Phase II award and commercial development. That program continued in FY2015 with the review of 23 R44 SBIR Phase II Bridge Award applications. The majority of technology research initiatives use the R21 Exploratory/Developmental award mechanism and 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. The R33 mechanism is suitable for projects where “proof-of-principle” of the proposed technology or methodology already has been established and supportive preliminary data are available. Both of

these mechanisms are well suited for technology development. In 2015, 286 technology applications (**Figure 5**) for Exploratory/Developmental grants (R21) and Exploratory /Developmental Phase II grants (R33) were reviewed for the Innovative Molecular Analysis Technologies (IMAT) for Cancer Research program (RFA-CA14-003/CA15-002 [R21] and RFA- CA14-004/CA15-003[R33]) as well as the Innovative Technologies for Cancer-Relevant Biospecimen Science (RFA-CA14-005/CA15-004 [R21] and RFA-CA14-006/CA15-005 [R33]) (**Table 10**).

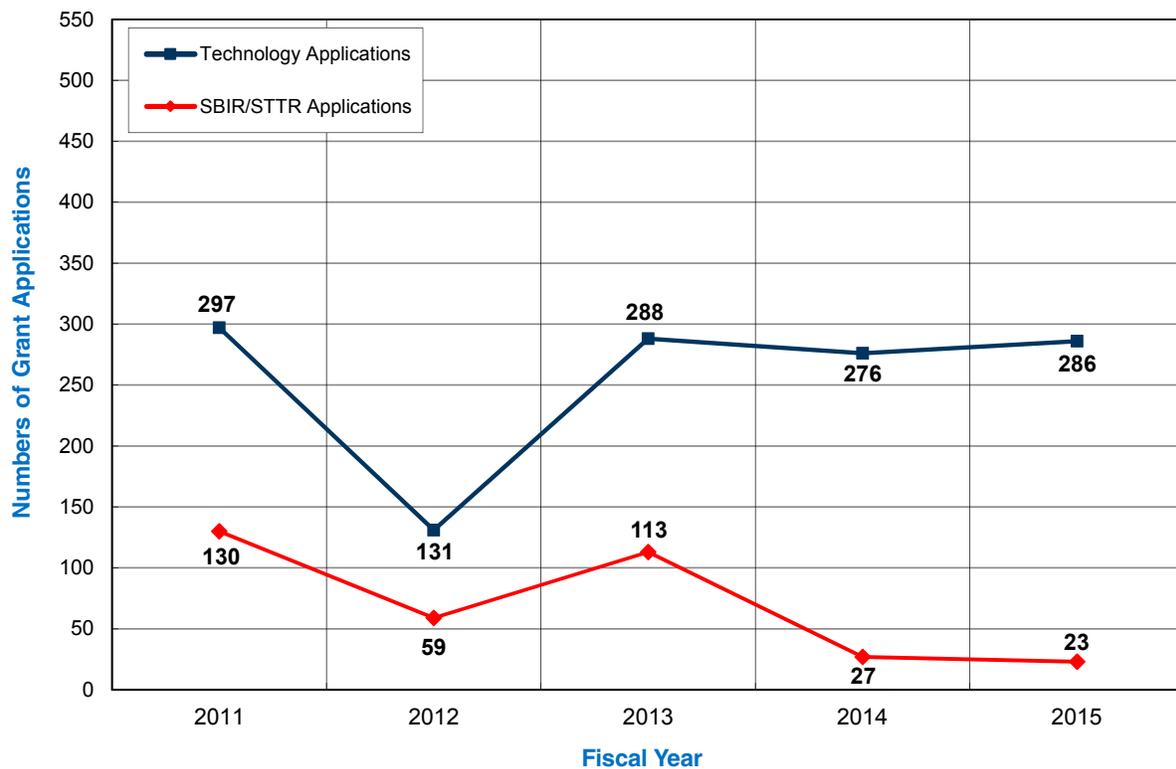
### **Research and Development (R&D) Contract Proposals**

In FY2015, RTCRB received and reviewed 512 contract proposals, including 372 Loan Repayment L30 and L40 proposals, in response to 23 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 RFP solicitation. Phase II SBIR proposals are submitted to Topics and are openly announced in a Broad Agency Agreement Announcement.

### **Other RTCRB Activities**

In FY2015, RTCRB participated in the critical reading and editing of pre-publication drafts for Funding Opportunity Announcements (PAs, PARs, RFAs) and research and development contract acquisition plans that are published as Requests for Proposals (RFPs), and were a part of presentations to prospective applicants during pre-application webinars and teleconferences. 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 (R21) Grant program, and the Small Grant (R03) program.

**Figure 5. Technology Initiatives Applications Reviewed\*  
FY2011 – 2015**



\*Withdrawn applications are not included.

## NCI Grant and RFA Funding

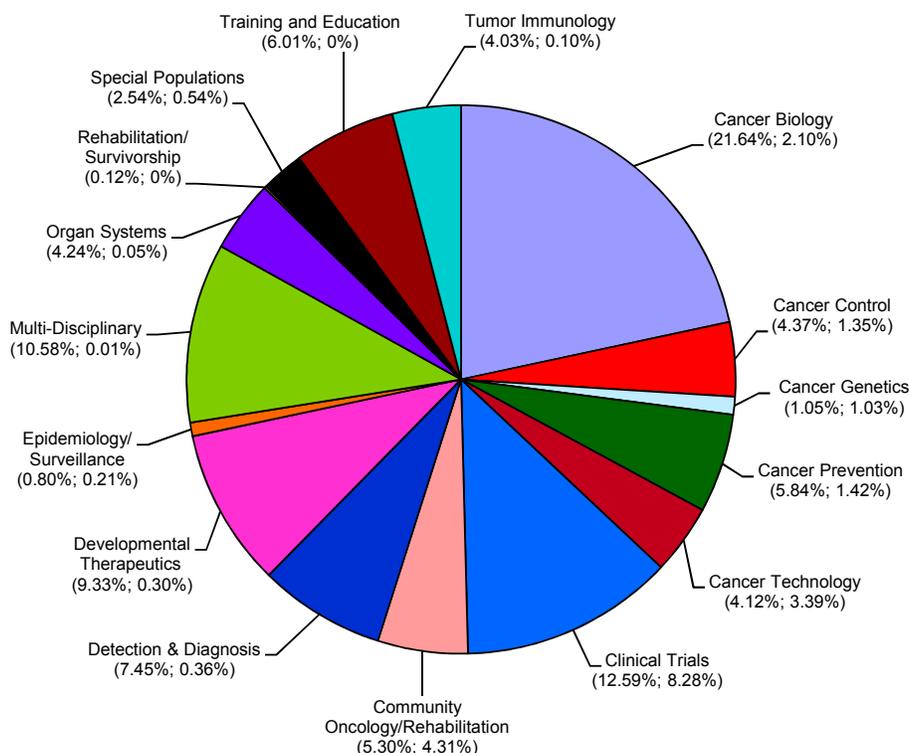
The Board of Scientific Advisors (BSA) is responsible for advising the NCI Director on the extramural program and the future direction and funding of each Division's extramural research. As such, the BSA provides concept review for NCI-sponsored RFAs. **Figures 6 and 7** show total NCI Grant and RFA funding according to scientific concept area in FY2014 and FY2015. **Figure 8** shows RFA concepts that the BSA approved from FY2012 through FY2015 according to the sponsoring NCI Division, Office, and Center.

**Table 13** presents a summary of total funding of NCI grant awards by mechanism for FY2015. In **Table 14**, a comparison is made of the average cost

and number of NCI R01, P01, R03, R13, R21, P30, P50, U01, U10/ U19, and U54 grants and cooperative agreements awarded in FY2011 through FY2015 according to the extramural Divisions, Offices, and Centers.

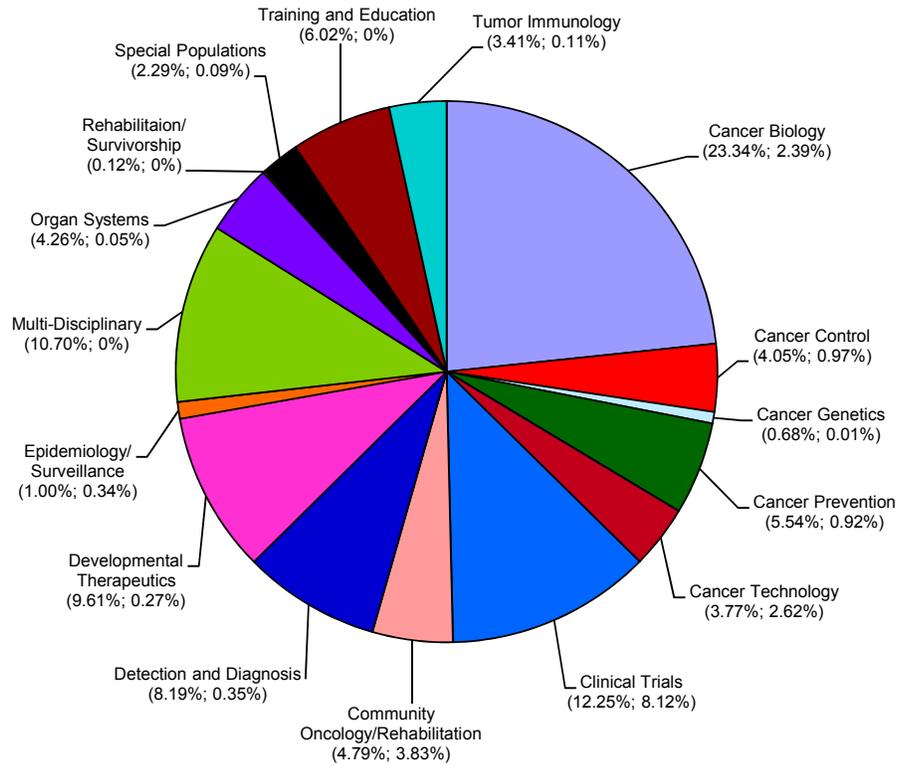
Trends in grant funding according to scientific discipline and organ site are provided in **Tables 15 and 16**. **Table 17** reports NCI's funding of foreign research grants in FY2015, and **Table 18** reports foreign components of U.S. domestic research grants in FY2015. **Note:** Some grant awards made during a fiscal year may have been for grant applications reviewed in a prior fiscal year.

**Figure 6. NCI Grant and RFA Funding Percentages by Concept Area FY2014**



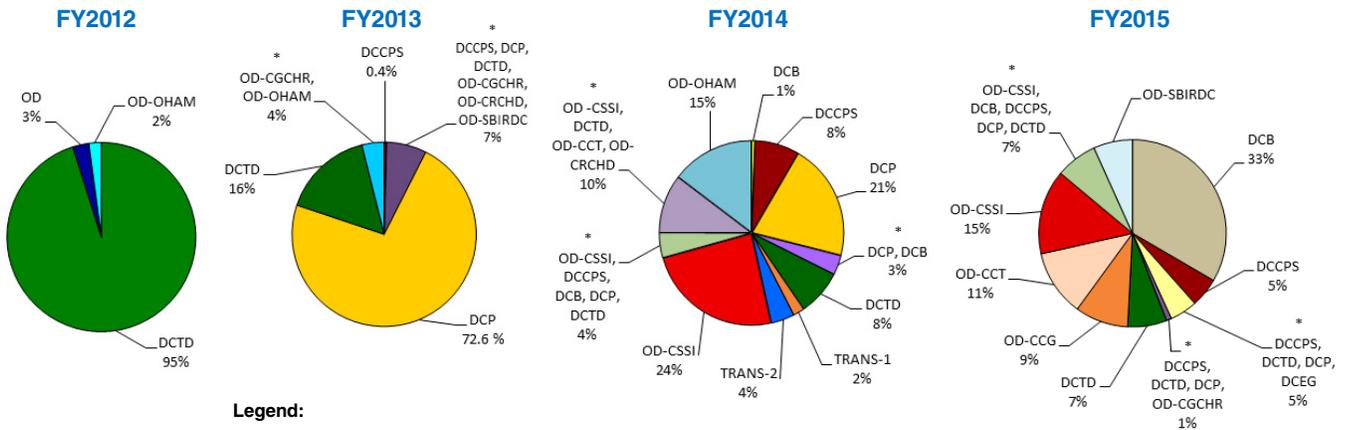
Percents represent Total Funding and RFA Funding for the Concept Area as a percentage of Total NCI Grants. Concept Area (% of Total Funding to Total NCI Grants; % of RFA Funding to Total NCI Grants)

**Figure 7. NCI Grant and RFA Funding Percentages by Concept Area FY2015**



Percents 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 Concepts by Division/Office/Center**



Legend:

DCB	Division of Cancer Biology
DCCPS	Division of Cancer Control and Population Sciences
DCP	Division of Cancer Prevention
DCEG	Division of Cancer Epidemiology and Genetics
DCTD	Division of Cancer Treatment and Diagnosis
OD	Office of the Director
OD-CCT	Office of the Director - Center for Cancer Training
OD-CGCHR	Office of the Director - Center for Global Cancer Health Research
OD-CRCHD	Office of the Director - Center to Reduce Cancer Health Disparities
OD-OHAM	Office of the Director - Office of HIV and AIDS Malignancy
OD-CSSI	Office of the Director - Center for Strategic Scientific Initiatives
OD-SBIRDC	Office of the Director - Small Business Innovation Research Development Center
TRANS-1	NCI (DCCPS, DCB), Trans-NIH
TRANS-2	NCI (DCCPS, DCP), Trans-NIH

\* Indicates co-funding among NCI Divisions/Offices/Centers.

## 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 and SEPs and by reimbursing them for their travel and other expenses (**Appendixes C and D**). 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 191 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. In FY2015, there were an additional 9 meetings held as compared to the 179 that were held in FY2014.

During FY2015, approximately 2,434 consultants were reimbursed honoraria and flat rate payment for serving at more than 188 peer review meetings (**Appendix D**). There were 3,740 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 with completing their Secure Payee

Registration System (SPRS) registration. Due to these proactive efforts by the SREA staff, only 9 out of the 3,740 instances of honoraria and flat rate payments to NCI peer review consultants were not paid out in FY2015.

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 FY2015, 80 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 90 hotel invoices and 60 consultant travel invoices were reviewed and submitted for payment in FY2015.

In terms of FACA and the Annual Report to GSA, SREA staff served on the Annual Comprehensive Review (ACR) Workgroup in the Office of Federal Advisory Committee Policy. The goal of the workgroup was to restructure the ACR instructions to help CMOs effectively prepare the required annual report, users, and minimize errors in reports that are sent to GSA. As a result, the Workgroup created ACR Instruction Manuals for each type of committee (i.e., NAC, PAC, BSC and Peer Review).

The SREA staff collaborates with the Associate Director, ORRPC, NCI DEA Branch Chiefs, CMO, and SROs 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 collaborates with the Program and Review Extramural Staff Training Office (PRESTO) staff to ensure the training needs of DEA review staff are met for all aspects of CMO and SREA activities. SREA created new

training materials and the following training sessions were conducted in FY2015:

- For all review staff – How to prepare the Official Meeting File for FACA NCI peer review meetings. Topics of discussion were:
  - Federal Advisory Committee Act (FACA)
  - U.S. General Services Administration (GSA) FACA Final Rule
  - List of NCI Initial Review Groups & Special Emphasis Panels
  - The documents required in an OMF
  - Collecting and retrieving the documents from peer review consultants
  - Submitting a completed file to CMO

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 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 ([Appendix C](#)). 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 NCAB, whose members are appointed by the 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 BSA, the body responsible for the oversight and concept review of the extramural programs and initiatives of the NCI, and FNLAC, which reviews research activities of the FNLCR. Under the various chartered committees, working groups are formed to address and make recommendations on important areas of cancer research related to basic research, clinical trials, diverse populations, cancer advocacy, treatment, cancer control, drug development, prevention, communication, education, and so on. As such, the DEA plays a major role in the development and issuance of PAs, PARs, and RFAs, the major extramural program initiatives used by the NCI to fund extramural research. The DEA Director serves as Executive Secretary to the NCAB and the BSA. (See [Appendices A](#) and [B](#) for highlights of the activities of these Boards in FY2015 and [Appendix C](#) 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 for 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 President, who by virtue of their training, experience, and background, 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 advocate. The Panel monitors the development and execution of the activities of the National Cancer Program and reports directly to the 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 science. The BSA, composed of distinguished scientists from outside the NCI and representatives from the advocacy community, advises the NCI leadership on the progress and future direction of the Institute's Extramural Research Program. The BSA evaluates NCI extramural programs and policies, and it 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 the NCI leadership on the progress and future direction of NCI's Intramural Research Program residing in the Center for Cancer Research (CCR) and the Division of Cancer Epidemiology and Genetics (DCEG). The two BSCs, composed of scientific experts from outside the NCI, evaluate the performance and productivity of NCI Intramural Principal Investigators and Staff Scientists through periodic site visits to the intramural laboratories and provide evaluation and advice on the course of research for each Laboratory and Branch.

**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 will provide 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 will advise on the appropriate magnitude for dedicated translational research priorities and recommend allocation of translational research operations across organizational units, programs, disease sites, populations, developmental pathways, and molecular mechanisms. This responsibility encompasses oversight of all clinical trials, both extramural and intramural. The Committee provides broad scientific and programmatic advice on the investment of taxpayer dollars in clinical trials and related science.

**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 facility 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. The FFRDC has been renamed as the Frederick National Laboratory for Cancer Research (FNLAC). FNLAC reviews new projects proposed to be performed at NCI-Frederick and advises the Director, NCI, and the Associate Director, NCI-Frederick, about the intrinsic merit of the projects and about whether they should be done at the Frederick facility.

**NCI Initial Review Groups (IRGs).** The NCI IRGs, composed of four active subcommittees, review grant applications for Cancer Centers, research projects, and Training, Education, and Career Development activities 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, contract proposals, 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.

## 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, Division of Extramural Activities (DEA), National Cancer Institute (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 Committee Management Office also is 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, National Institutes of Health 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.

CMO successfully manages 21 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 two 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 meetings each year. The office continues to manage 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 for the Office of the Director, NIH and NIAAA the Committee Management Office continued to provide exceptional service to these Client-Institutes on the management of their Federal advisory committees. CMO effectively managed a comprehensive ethics program in support of CoC. Ethics services include analysis and review of Special Government Employee OGE-450s and Foreign Activity Questionnaire of new CoC advisory committee members 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 FY2015 include the following:

- Provide extensive logistical support to the BSA/NCAB SPORE Working Group.
- Served on the NIH OFACP Ventures Proposal Team (CA, AI, HL, OD, Center for Complementary and Integrative Health) and were awarded \$100K (\$50K from the NIH OD and \$50K from CMS) to develop an electronic interface that allows data sharing with NIH's existing systems to reduce the administrative burden on new Special Government Employee (SGE) advisory board and committee members and improve overall programmatic effectiveness of the onboarding process. The current SGE appointment process requires a new member to receive a 94-page package and complete 14+ forms, which requires more than 3 hours to complete. Thus, making the process very cumbersome for a newly appointed member.
- Responded to several FOIA requests for SGE member personnel documents and provided justification to the NCI FOIA Officer

regarding the need to redact personal and confidential information. Cited past Department of Justice Court findings regarding redaction of certain pieces of confidential information.

- New members of the NCAB were appointed this past year. Staff worked quickly to ensure the members' HR paperwork was processed expeditiously so they could be fully appointed Special Government Employees at the following NCAB meeting.
- Provided information in an interview to a reporter from the *Pittsburgh Post-Gazette* on a new NCAB member's appointment to the NCAB.
- Researched several data requests and provided historical information to DEA regarding Board of Scientific Counselors and on pediatric oncologists who have served on the NCAB.
- Met with the NCI DEA Director and staff from the Oncology Nursing Society to discuss the function and membership of the NCAB regarding nursing nominees.
- CMO Staff were recognized by the NCI DEA Director for providing continuous outstanding support to the Division and the NCI on all aspects of NCI's Federal Advisory Committees.
- CMO staff received the NIH Merit Award Group Award titled, "National Cancer Advisory Board Virtual Meeting Technology Team."

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

1. Working Group Overview and Subcommittee Overview Training to newly assigned DFOs working with various subcommittees and working Groups of the NCAB, BSA, FNLAC, NCRA, CTAC and CoC.
  2. FACA Training to new NCRA Designated Federal Official.
- Oversaw travel authorizations and vouchering of more than 200 SGE travel instances, many of which are complex and require negotiating with the board member.
  - The Committee Management IMPAC II Module is an integral part of the day to day activities in the management of advisory committees. As such, CMO continues to evaluate the current database system and provide feedback to the Committee Management Users Group Representative on potential modifications to the Module.
  - Responded to requests from senior NCI and Client staff on various non-FACA meetings and working group concerns.

## Portfolio Tracking and Analysis

The DEA's **Research Analysis and Evaluation Branch** (RAEB) is the officially designated contact for scientific information on NCI-supported research. The NCI needs to collect and maintain consistent budget-linked scientific information across all of its scientific programs to analyze the Institute's research funding portfolio, make budget projections, and disseminate information about cancer. The DEA conducts analyses to project future NCI research expenditures and to provide budget justifications to 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, Congress, and the public. A critical characteristic of these data is comparability from one fiscal year to the next.

Trends in funding from FY2011 through FY2015 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 Congress.

In FY2015, the RAEB provided numerous portfolio analyses, for example:

- The Leukemia & Lymphoma Society, National Office: Data on the percentage of

NCI Basic and Translational research funding out of the NCI total grants funding, FY2015.

- NCI Office of the Director: Funding trends on health disparities/underserved populations in relation to certain sites, specifically breast, colon, prostate, liver, uterus, multiple myeloma, kidney, stomach, and pancreas, FY2015.
- NCI Office of Budget and Finance: AIDS relevant research funding, FY2015; success rates for AIDS relevant grants, FY2015.
- NCI Program Directors: FY2015 grant information, including cardiotoxicity, health disparities, nutrition, physical activity survivorship and DCIS.
- Office of Government and Congressional Relations: Figures showing success rate trends for stomach cancer applications, FY2010 – FY2015; success rates for R01, RPG stomach cancer applications, FY2015.
- NCI Center for Global Health: Information on foreign grants, contracts, and foreign countries collaborating on research with U.S. institutions, FY2015.
- Supported the International Cancer Research Partners (ICRP), a group of international cancer funding organizations, by coding NCI extramural projects and cancer grants funded by other NIH institutes to the Common Scientific Outline (CSO) and by participating in the ICRP.
- Continued coordination with the NCI Office of Budget and Finance (OBF) to update and align budget reporting categories.
- Chaired the NCI Accrual Working Group for biennial reporting of NCI compliance with Congressional Health Disparities reporting requirements.
- Served as NCI subject matter expert on the NIH Inclusion Operating Procedures Working Group and its Policy subgroup.
- Served as DEA representative to the NCI Communications Committee.
- Served as DEA representative to the NCI Planning and Evaluation SIG.

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

In FY2015, the NCI allocated \$15.7 million to support 45 grants and contracts received by 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 14 grants and 3 contracts adding up \$9 million. R01s were the most common mechanisms funded with 19 grants receiving \$5.7 million. Disease areas receiving the most NCI funding to foreign institutions were Not Site Specific (\$4.7 million), Breast (\$2.9 million), and Leukemia (\$1.3 million).

### FY2015 Funding of Foreign Institutions

(See [Table 17](#) for more information.)

Country	Grants & Contracts #	Funding \$
Canada	17	9,003,270
United Kingdom	6	1,963,515
France	7	1,683,147
Australia	2	1,029,771
Israel	3	781,844
South Africa	3	360,119
Japan	1	291,030
Belgium	1	287,531
Germany	1	224,100
Switzerland	1	50,690
Italy	1	24,000
Hong Kong	2	12,600
<b>Totals</b>	<b>45</b>	<b>15,711,617</b>

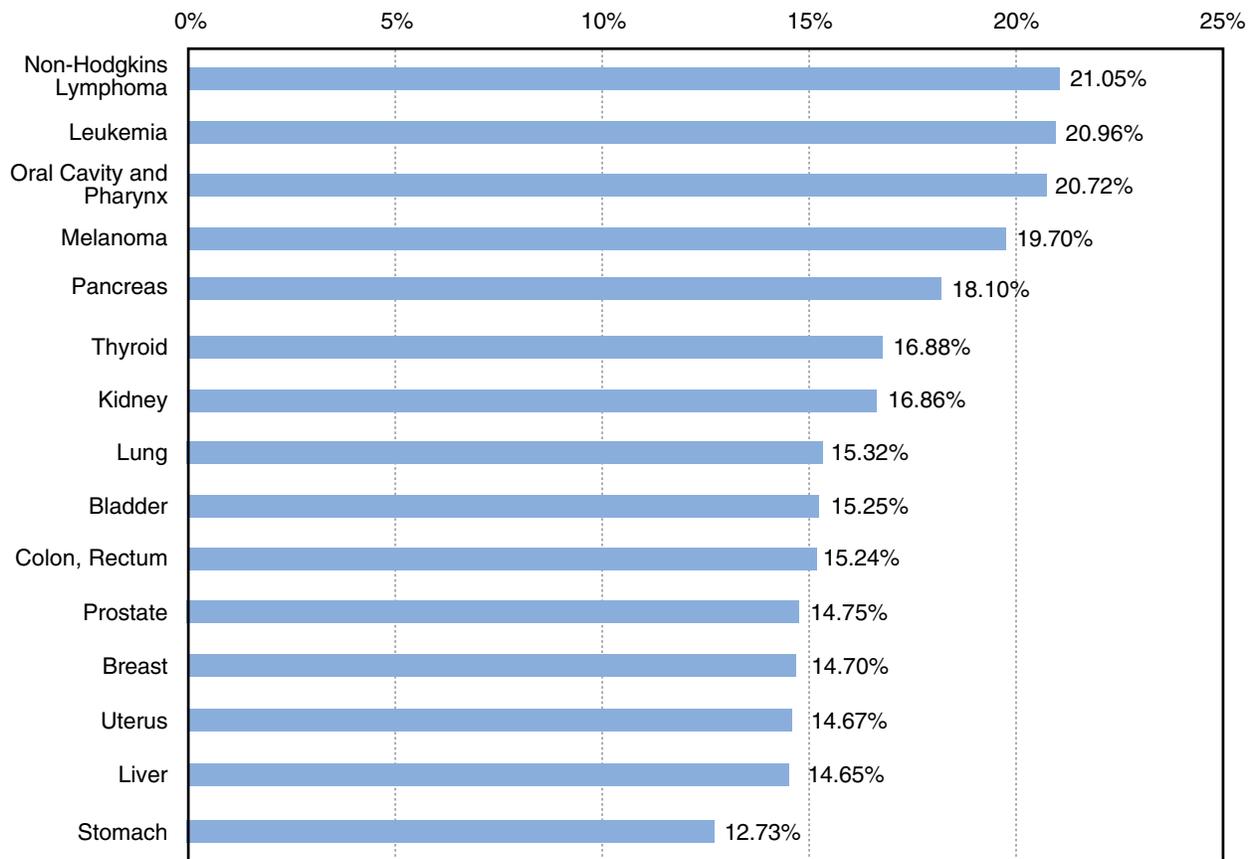
In FY2015, the NCI supported 272 U.S. domestic grants with 462 foreign components. These grants are listed in [Table 18](#) by country, mechanism, and number of grants. Because many grants have multiple foreign contributors, the total count is greater than the total number of grants. Institutions in Canada (63 grants), the United Kingdom (46 grants), Australia (28 grants), China (28 grants), and Germany (28 grants) were the NCI's most frequent collaborators. R01 is the most common funding mechanism used for collaborations, with 248 grants, followed by U24 (57 grants), and U01 (50 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 FY2015 success rates for high incidence cancers ([Figure 9](#)) and for selected Special Interest Categories (SIC) ([Figure 10](#)). The highest incidence cancer rankings are from the SEER rank of top 15 cancer sites, 2004-2008, age-adjusted incidence for all races and sexes. Success rates were calculated by dividing the total number of newly funded applications in 2015 (Type 1 and 2 grants) for that research category (SIC or Organ Site) by the total number of applications for that research category (see [Figures 9](#) and [10](#)).

**Figure 9. FY2015 Success Rates for Applications in High Incidence Cancers\***

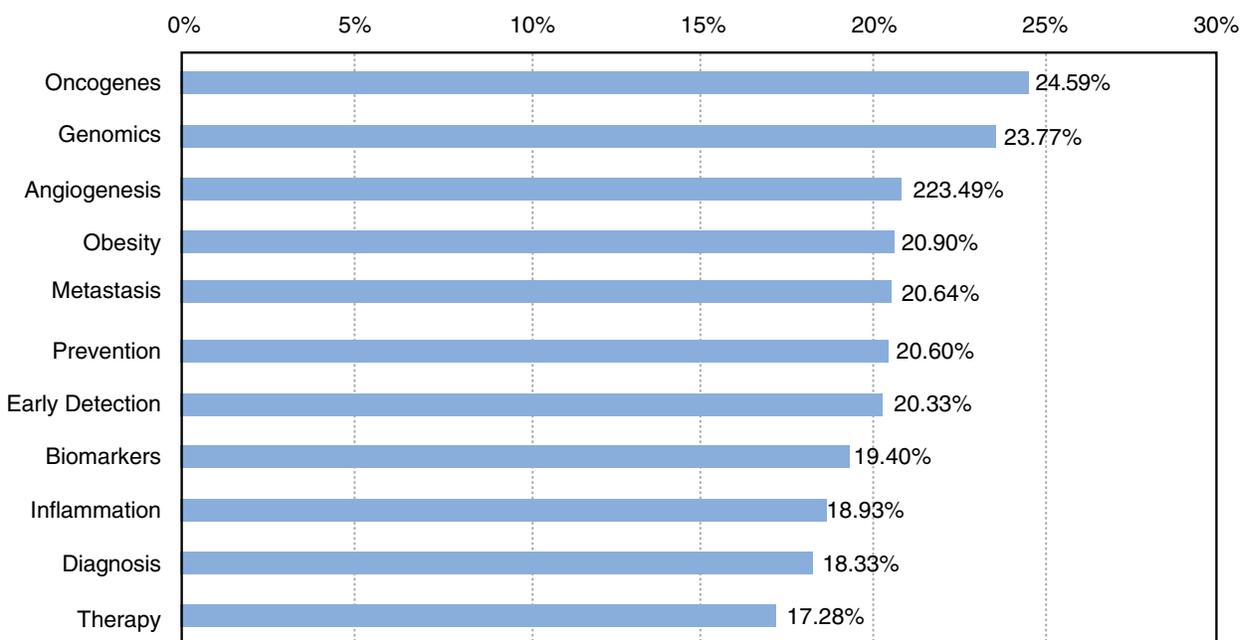
Sorted by Success Rate



Selected Oncology Sites	SEER Rank*	Types 1 & 2 Funded in 2015 for This Site	Total Applications Received in 2015 for This Site	2015 Success Rate for This Site	Total Funding for Types 1 & 2 in 2015 for This Site
Non-Hodgkins Lymphoma	7	76	361	21.05%	\$22,536,238
Leukemia	10	136	649	20.96%	\$44,806,090
Oral cavity & pharynx	13	23	111	20.72%	\$6,058,403
Melanoma	6	106	538	19.70%	\$26,410,051
Pancreas	11	133	735	18.10%	\$34,717,320
Thyroid	12	13	77	16.88%	\$3,106,032
Kidney	8	29	172	16.86%	\$7,840,671
Lung	3	187	1221	15.32%	\$59,271,798
Bladder	5	18	118	15.25%	\$3,746,975
Colon, Rectum	4	128	840	15.24%	\$39,321,234
Prostate	1	151	1,024	14.75%	\$51,642,510
Breast	2	374	2,544	14.70%	\$119,384,669
Uterus	9	11	75	14.67%	\$1,728,225
Liver	15	58	396	14.65%	\$19,335,701
Stomach	14	7	55	12.73%	\$2,312,711

\*SEER rank of top 15 cancer sites 2004-2008 age-adjusted incidence for all races and sexes.

**Figure 10. FY2015 Success Rates for Applications in Selected Special Interest Categories (SIC)**  
Sorted by Success Rate



Special Interest Category	Types 1 & 2 Funded in 2015 for This SIC	Total Applications Received in 2015 for This SIC	2015 Success Rate for This SIC	Total Funding for Types 1 & 2 in 2015 for This SIC
Oncogene	342	1,391	24.59%	\$90,544,641
Genomics	260	1,094	23.77%	\$85,014,638
Angiogenesis	74	315	23.49%	\$14,429,468
Obesity	56	268	20.90%	\$12,344,049
Metastasis	383	1,856	20.64%	\$92,968,726
Prevention	173	840	20.60%	\$63,995,692
Early Detection	161	792	20.33%	\$60,070,843
Biomarkers	363	1,871	19.40%	\$101,363,542
Inflammation	110	581	18.93%	\$25,797,902
Diagnosis	361	1,969	18.33%	\$141,139,474
Therapy	973	5,631	17.28%	\$347,902,189

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 various DEA servers; provides help desk support; provides oversight of hardware and connectivity; 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 computer-related training, as needed. Specific projects utilizing the technologies and services provided by the AISB are described under the appropriate functions of the DEA throughout this report.

For FY2015, specific AISB accomplishments are highlighted below.

### System Administration and Desktop Support

**Security Assurance Support for DEAIS and FLARE** – performed DEAIS Security and Assurance review and realignment to 800-53 R4; FLARE independent review and annual filing, including item-by-item controls update; and the following documentation for both DEAIS and FLARE: Contingency Plan, CP Testing, CP Training; Configuration Management Policy; Audit Policy and Procedures; Risk Assessment; Annual Assessment; System Security Plan; and, E-Authentication/FIPS-199. Also, upgraded a third of DEA desktops from Dell 760-90 to 9020 models.

### Application Development Projects

- Concept to Awards Tracking System – major revisions made to administrative view and completed workflow to accommodate PCRB annual PA review.
- NGRAD – Alpha release included refinement of workflow and major revisions to lead user interface; development of training materials for user groups.
- CMO Reporting Tools – major overhaul of the application; organized user/programmer forums to develop improvements; conducted internal and user testing, refinement, and release.
- Staff Listing – development to adjust the administrative module for more effective use and accurate data representation with the integration of the NED – real-time notification of changes and module to manually adjust inclusion/exclusion.
- FOA – revision to search criteria for more granular data retrieval.
- DPDU – coordinated revision of application and API to accommodate new FedEx international shipping requirements.
- Board Presentations – new module to capture, organize, and afford users access to presentation materials of past NCI advisory board meetings.
- Initiated development of an application to generate SBIR meeting rosters.
- The following application infrastructure upgrades were completed for DEAIS: Oracle database instances 12c; Oracle Java JDK; Apache HTTPD and Tomcat; OpenSSL; eRA-SSL authentication; Lucene search; and Standard GUI for Web components.
- Transitioned user authentication from NCI LDAP to NIH AD using proxy servers, which established document management services with eRA and the IMPACII data center.

## User Training

- Presented and participated in brown bag forums for DEA on IT trends, government policies and new technologies.
- Led training for NCI Office of Training and Education on technological aspects of scientific presentation.
- Conducted training and support for NHLBI and NIAAA in the use of the DEAIS RevPrep application.
- WebEx Presentations – Led the transitioning of DEA/AISB telecommunication towards a Cisco WebEx platform.

## DEA Website Development

- Collaborated with PRESTO on a redesign and introduction of new features for their intranet website.

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

### FLARE Project

#### *SQL and PL/SQL Development and Testing*

- Developed and implemented PL/SQL API for FLARE data management, which included: analyzed and documented existing processes; established formal business rules where necessary; and creating and testing PL/SQL packages for transaction management, logging, and system maintenance.
- Created and implemented SQL\*Plus scripts and Excel macros for manually created reports: AIDS Report; BAD Codes Reports; ICRP Report; Women's Health Report; Coding Activity Report; and Science Area Summaries.
- Created and implemented scripts for manual FLARE data exchange operations (IRDB download and IZE upload); analyzed existing procedures; extracted business rules;

developed scripts to facilitate data exchange; added supporting scripts to execute download as a batch operation; and added log analysis for rudimentary error checks.

### *Database Operations*

- Established a procedure to deploy reports to the NCI IZE database.
- Coordinated Oracle upgrade to 12c, which included: prepared documentation and fallback plan; and updated the download scripts and Java code to support 12c.
- Created a process for creating and sharing database links among FLARE database schemas.
- Initiated support for QlikView development — for use as a reporting system in 2016; and FLARE Indexing (new UI) development — to replace existing FLARE application in 2016.
- Upgraded Dev, Test, and Prod database to Oracle 12c (installed Oracle software, created and configured the database, loaded data and tested).

### RAEB Online

- Application development, which included: minor changes and fixes; implemented NCI-only authentication; and performed dependency updates.
- Presented application demos at the DEA Brown Bag and the NCI SPL.

### AISB Staff Involvement

Represented the needs and concerns of DEA staff through active participation in the following groups: Frederick Security Team, CBIIT Process Improvement Team, NCI Computer Upgrade Project – Technology Refresh Program, NIH Mobile Device Policy Team, NCI Conference Room Special Interest Group (SIG), Service Now SIG, NCI Division IT Contacts Meeting, Science Management Workspace (SMW), DEA Brown Bag seminars, International Cancer Research Portfolio

(ICRP) Data Meetings, NCI BAD codes (Basic and Applied) Working Group, NCI Coding QA/QC Team, NIH eRA Technical Users Group (eTUG), and the Shady Grove IT and Server Consolidation Planning Team.

Arranged for equipment trials with outside vendors for testing new products and services for use in DEA (i.e., touch screen Blackberry phones, Windows tablets, 4th generation iPads, docking stations for laptops, etc.). The Windows tablet evaluation led to the MS Surface Tablet as NCI's supported tablet. Worked with CBIIT staff on testing the

Windows 10 platform, and with NCI specialists in improving the usability of the iPads in replacing paper documents during advisory board meetings. Participated with CBIIT in piloting new Office 365 software for DEA.

Established areas of improvement in IT collaboration with the NCI's installation of the CBIIT liaison position, which resulted in improved working relationships between DEA and several CBIIT Operation Teams who support Server Management, Equipment Imaging, Service Now Team, etc.

# Organizational Structure of the Division of Extramural Activities

## Office of the Director

- Directs and administers the operations of the Division, including those activities relating to grant review and administration, contract review, referral and program coordination of FOAs, and Advisory Committee and Board activities.
- Directly coordinates and manages the NCAB and the BSA.
- 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.
- Implements NCI policies regarding extramural research integrity.
- 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 gender, minority, and children.
- Serves as the NCI Research Integrity Office.
- Coordinates, develops, and implements extramural policy.

**Paulette Gray, Ph.D.** ..... **Director**  
**Vacant** ..... **Deputy Director**  
**Peter Wirth, Ph.D.** ..... **Assistant Director**  
**Dawn William** ..... **Senior Program Analyst**  
**Kathy Tiong** ..... **Program Analyst**  
**Judi Ziegler** ..... **Secretary**

## 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 book and orientation documents, and annual reports. In conjunction with the establishment of this unit, the number of DEA Purchase Cards was reduced from 15 to 6. This change has minimized hoarding of office supplies and overall reduction in dollar costs associated with the use of DEA Purchase Cards.

**Ricardo Rawle** ..... **Special Assistant to the Director**  
**Clara Murphy** ..... **Program Specialist**  
**Adrian Bishop** ..... **Staff Assistant**  
**Sanjeeb Choudhry** ..... **Staff Assistant**  
**Robert Kruth** ..... **Staff Assistant**

## Committee Management Office, 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, the NIH, and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) to ensure that appropriate policies and procedures are in place to conduct the designated mission of each committee.
- 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; 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, HHS, and NIH; provides logistical support for NCAB, FNLAC, and BSA meetings, subcommittees, and work groups; and facilitates NCAB and BSA committee-related travel.
- Researches and evaluates conflict of interest 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.

<b>Claire Harris</b> .....	<b>Committee Management Officer</b>
<b>Janet Craigie*</b> .....	<b>Deputy Committee Management Officer</b>
<b>Joy Wiszneaukas†</b> .....	<b>Deputy Committee Management Officer</b>
<b>Natasha Copeland</b> .....	<b>Senior Committee Management Specialist</b>
<b>Malaika Staff</b> .....	<b>Senior Committee Management Specialist</b>
<b>Etsegenet Abebe</b> .....	<b>Committee Management Specialist</b>
<b>Darnetta King</b> .....	<b>Committee Management Specialist</b>
<b>Alonda Lord</b> .....	<b>Committee Management Specialist</b>
<b>Rosalind Niamke</b> .....	<b>Committee Management Specialist</b>
<b>Danny Prince II‡</b> .....	<b>Committee Management Specialist</b>

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\*Moved to PRESTO April 2015.

†Joined in April 2015.

‡Moved to SRB in September 2015.

## Program and Review Extramural Staff Training Office

- 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**

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\*Joined April 2015.

## Office of Referral, Review, and Program Coordination

- 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** ..... **Program Specialist**

## 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 the SROs and other support staff for the 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.

<b>Eun Ah Cho, Ph. D. ....</b>	<b>Chief</b>
<b>Dona Love, Ph.D.* ....</b>	<b>Scientific Review Officer</b>
<b>Cliff Schweinfest, Ph.D. ....</b>	<b>Scientific Review Officer</b>
<b>Viatcheslav Soldatenkov, Ph.D. ....</b>	<b>Scientific Review Officer</b>
<b>Yisong Wang, Ph.D.† ....</b>	<b>Scientific Review Officer</b>
<b>Thomas Winters, Ph.D. ....</b>	<b>Scientific Review Officer</b>
<b>Zhiqiang Zou, Ph.D. ....</b>	<b>Scientific Review Officer</b>
<b>Thu Nguyen .....</b>	<b>Program Analyst</b>
<b>Tonya Miller .....</b>	<b>Lead Staff Assistant</b>
<b>Imela Gradington-Jones.....</b>	<b>Staff Assistant</b>
<b>Nakessha Mendez Modeste‡ .....</b>	<b>Staff Assistant</b>
<b>Micah Traurig§.....</b>	<b>Staff Assistant</b>

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\*Joined in December 2014.

†Joined in February 2015.

‡Left in January 2015.

§ Joined in August 2015.

## 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 the SROs and other support staff for the 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.

<b>Peter J. Wirth, Ph. D.*</b> .....	<b>Acting Chief</b>
<b>Thomas Vollberg, Ph. D.†</b> .....	<b>Chief</b>
<b>Kenneth Bielat, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Donald Coppock, Ph.D.‡</b> .....	<b>Scientific Review Officer</b>
<b>Jeffrey DeClue, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Reed Graves, Ph.D.§</b> .....	<b>Scientific Review Officer</b>
<b>Nicholas Kenney, Ph.D.**</b> .....	<b>Scientific Review Officer</b>
<b>Gerard Lacourciere, Ph.D.††</b> .....	<b>Scientific Review Officer</b>
<b>Gerald Lovinger, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Ellen Schwartz, D.Ed.‡‡</b> .....	<b>Scientific Review Officer</b>
<b>Paul Gallourakis</b> .....	<b>Program Analyst</b>
<b>Donnell Wilson§§</b> .....	<b>Lead Staff Assistant</b>
<b>Alisha Craig</b> .....	<b>Staff Assistant</b>
<b>Hanh “Julie” Hoang</b> .....	<b>Staff Assistant</b>
<b>Lauren McLaughlin</b> .....	<b>Staff Assistant</b>
<b>Kimberly Millner</b> .....	<b>Staff Assistant</b>

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\*Joined in July 2015.

†Left in July 2015.

‡Left in April 2015.

§Joined in March 2015.

\*\* Joined in January 2015.

††Joined in March 2015.

‡‡Left February 2015.

§§Moved to RTRB in November 2014.

## Program Coordination and Referral Branch

- 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 on Grants.gov, which is a Federal-wide online portal for electronic submission of grant applications.
- Coordinates the development and periodic revision of referral (i.e., application assignment) guidelines within the NCI for both external and internal use.
- Coordinates the development of shared (referral) interest statements with other NIH Institutes and Centers (ICs) so that grant applications of possible or real mutual interest can be properly assigned for receipt, review, and/or funding.
- Serves as the liaison to the Center for Scientific Review (CSR), NIH, to ensure the appropriate referrals (i.e., assignments) of grant applications to the Institute and the transfers of grant applications between the NCI and other NIH ICs.
- Refers new (Type 1) applications to the appropriate cancer activity area(s) according to the NCI Internal Referral Guidelines that define the program interests of each of the 53 cancer activity areas (which typically represent program branches in the NCI extramural divisions).
- Semi-automatically refers resubmission (A1) and renewal (Type 2) applications to the cancer activity area that accepted the previously submitted application (with quality control measures performed to ensure the accuracy of referrals).
- Coordinates requests from Program staff for application status changes (including corrections of application assignments and numbers, which is done in collaboration with NCI Program staff, CSR referral staff, and referral staff of other ICs and agencies) and for acceptance of grant assignments.
- 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.
- Works with NCI Program and Review staff and with NIH referral liaisons to address unresolved referral and review issues with the CSR and other NIH ICs.
- Receives Letters of Intent (LOI) from applicants (Principal Investigators) intending to submit large budget grants (including, but not limited to, program projects and cooperative agreements for clinical trials).
- Coordinates approvals (and disapprovals) of the NCI to sponsor the submission of individual conference (R13) grant applications.
- Serves as the primary point of contact and provides assistance at the NCI for applicants who want to apply for an Academic Research Enhancement Award (i.e., the NIH R15 AREA grant mechanism).
- Processes and tracks requests for submissions of large-budget grant applications that allow them to be received at the NIH, peer reviewed, and possibly awarded by the NCI.
- Maintains database records of prospective large-budget grant and conference grant applications for each council round.
- 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.
- Assists the extramural community in navigating the NIH and NCI Web pages to help users obtain current information, forms, and guidelines.

## Organizational Structure of the Division of Extramural Activities

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- Directs applicants to the appropriate SROs and Program Officers for information regarding the status of the review and award of their grant applications.
- Tracks and analyzes trends of CSR referral to study sections and resultant review outcomes.
- Provides data and data analyses on funding opportunities and on the receipt and referral of grant applications to NCI senior staff members and committees.

**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**  
**Dianne Johnson\* ..... Staff Assistant**

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\*Left in June 2015.

## Research Programs Review Branch

- Plans, coordinates, and manages the scientific merit 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.

<b>Caron A. Lyman, Ph.D.</b> .....	<b>Chief</b>
<b>Shakeel Ahmad, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Caterina Bianco Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Majed Hamawy, Ph.D., M.B.A.</b> .....	<b>Scientific Review Officer</b>
<b>Wlodek Lopaczynski, M.D., Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>David Ransom, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Delia Tang, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Charles Choi</b> .....	<b>Program Analyst</b>
<b>Deneen Mattocks</b> .....	<b>Lead Staff Assistant</b>
<b>Shannon Harley</b> .....	<b>Staff Assistant</b>
<b>Kenneth Nock</b> .....	<b>Staff Assistant</b>

## Resources and Training Review Branch

- 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.

<b>Robert E. Bird, Ph.D.</b> .....	<b>Chief</b>
<b>Ilda Melo, Ph.D.*</b> .....	<b>Scientific Review Officer</b>
<b>Timothy Meeker, M.D.</b> .....	<b>Scientific Review Officer</b>
<b>Sergei Radaev, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Adriana Stoica, Ph.D.</b> .....	<b>Scientific Review Officer</b>
<b>Sheila Hester</b> .....	<b>Program Specialist</b>
<b>Gelia Holloway</b> .....	<b>Lead Staff Assistant</b>
<b>Linda Edwards</b> .....	<b>Staff Assistant</b>
<b>Leslie Kinney</b> .....	<b>Staff Assistant</b>
<b>Bridgette Wilson</b> .....	<b>Staff Assistant</b>

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\*Left in June 2015.

## 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 Rhoderick..... Program 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 to 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.

**Edward Kyle..... Lead Biologist/Team Leader**  
**Beth Buschling ..... Biologist**  
**Me Hei ..... Health Specialist**  
**Bernard Whitfield ..... Biologist**  
**Tyrone Wilson..... Biologist**

## 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 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 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.

**Vacant** ..... **Lead Biologist/Team Leader**  
**William Clark, M.S.** ..... **Biologist**  
**Clarissa Douglas**..... **Program Specialist**  
**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.
- Serves as the focal point for the Division in the development, deployment, and application of specialized software and databases required for the conduct of review, referral, coding, advisory, and other extramural applications.
- 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 Internet and Intranet applications.
- Establishes, administers, and monitors commercial support contracts to provide design, production, and maintenance for microcomputer equipment and information storage and retrieval systems that are not covered by CBIIT.
- Formulates DEA-specific office automation policy.
- Provides staff/lead users with technical support and training for DEA IT applications.
- Coordinates general user support and training with NCI and NIH services.
- Provides Division-specific applications of video teleconferencing and audiovisual services in support of review and Board activities.
- Provides management with recommendations for establishing and implementing policies for conducting Division computer-assisted presentations, as necessary.
- Reviews user-created applications and recommends and/or designs changes to improve efficiency and effectiveness.

**Gregory Fischetti**..... **Chief**

### Application Development Team

- Analyzes and coordinates life-cycle software development for the Division.
- Develops and designs applications to support the Division's business processes, including user guides.
- Coordinates security assessment and authorization for the Division's general support system applications.
- Develops, administers, and monitors contracts for acquisition, support, and maintenance of database 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 sites and pages, and identifies documents to be placed on the NCI website to make Division information more accessible to the public.
- Coordinates security assessment and authorization for systems and applications developed and implemented for the Research Analysis and Evaluation Branch (RAEB).
- Develops new Web-based software applications that will enhance the productivity and efficiency of extramural processes within the DEA and the distribution of Division information throughout the NCI.
- Coordinates application development and supports the RAEB in the areas of scientific coding and analysis.
- Administers and implements purchasing for the Division’s computer hardware/software, maintenance, and supplies.
- Establishes partnerships and ongoing communications with staff and external customers to foster openness and collaboration in accomplishing the information initiatives of the Division.
- Works with DEA staff to ensure the current utility and linkages of documents placed on the Web.

**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 application, database, and Web servers.
- Oversees and provides guidance for IT security policies and regulations.
- Coordinates and implements the Division’s security assessment and authorization policies for the server environment.
- Manages the software application environment for development, testing, and production.
- Coordinates network connectivity for the Division with CBIIT.
- Provides user and technical support and training for desktop and laptop computers, office automation products, and applications.
- Plans and recommends purchases of all IT-related equipment for the Division.
- Maintains an accountable IT equipment inventory for the Division.
- Develops and maintains policies for the use of office automation technology.

**Richard Florence..... Team Leader**  
**Roderick James ..... Information Technology Specialist**  
**Raymond Vidal ..... Information Technology Specialist**

**Table 1a. Requests for Applications (RFAs) Published by the NCI in FY2015**  
Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
11/6/2014	CA14-014	U01	The Early Detection Research Network: Biomarker Developmental Laboratories	DCP
	CA14-015		The Early Detection Research Network: Clinical Validation Centers	
	CA14-016	U24	The Early Detection Research Network: Biomarker Reference Laboratories	
	CA14-017	U01	The Early Detection Research Network: Data Management and Coordinating Center	
11/24/2014	CA15-001	UH2, UH3	Cancer Detection, Diagnosis, and Treatment Technologies for Global Health	CGH
1/8/2015	CA15-002	R21	Innovative Molecular Analysis Technologies for Cancer Research	CSSI
	CA15-003	R33	Advanced Development and Validation of Emerging Molecular Analysis Technologies for Cancer Research	
	CA15-004	R21	Innovative Technologies for Cancer-Relevant Biospecimen Science	
	CA15-005	R33	Advanced Development and Validation of Emerging Technologies for Cancer-Relevant Biospecimen Science	
2/23/2015	CA15-006	UH2	Big Data to Knowledge (BD2K) Advancing Biomedical Science Using Crowdsourcing and Interactive Digital Media	DCB
3/13/2015	CA15-010	R44	SBIR Phase IIB Bridge Awards to Accelerate the Development of Cancer Therapeutics, Imaging Technologies, Interventional Devices, Diagnostics and Prognostics Toward Commercialization	SBIRDC
3/23/2015	CA15-501	UM1	Limited Competition: Revisions to Add Phase 2 Clinical Trials Program to Experimental Therapeutics Clinical Trials Network (ETCTN)	DCTD
3/27/2015	CA15-008	R01	Research Answers to NCI's Provocative Questions	ALL DIVISIONS
	CA15-009	R21		
5/14/2015	CA15-012	R01	Provocative Questions (PQ) Initiative; Cancer with an Underlying HIV Infection	ALL DIVISIONS
	CA15-013	R21	Provocative Questions in Cancer with an Underlying HIV Infection	ALL DIVISIONS
6/5/2015	CA15-011	R01	Smoking Cessation within the Context of Lung Cancer Screening	DCCPS
7/23/2015	CA15-017	U01	Big Data to Knowledge (BD2K) Development of Software Tools and Methods for Biomedical Big Data in Targeted Areas of High Need	DCB
9/2/2015	CA15-014	U54	Research Centers for Cancer Systems Biology Consortium	
	CA15-015	U24	Coordinating Center for Cancer Systems Biology Consortium	
9/14/2015	CA15-502	U24	Limited Competition: Childhood Cancer Survivor Study	DCTD
	CA15-007	P20	Planning for Regional Centers of Research Excellence in Non-communicable Diseases in Low and Middle Income Countries	OD

Source: Office of Referral, Review and Program Coordination.

**Table 1b. Requests for Applications (RFAs) Published by the NCI in FY2015**  
Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
ALL DIVISIONS	CA15-008	R01	Research Answers to NCI's Provocative Questions	3/27/2015
	CA15-009	R21		
	CA15-012	R01	Provocative Questions (PQ) Initiative; Cancer with an Underlying HIV Infection	5/14/2015
	CA15-013	R21	Provocative Questions in Cancer with an Underlying HIV Infection	
CGH	CA15-001	UH2, UH3	Cancer Detection, Diagnosis, and Treatment Technologies for Global Health	11/24/2014
CSSI	CA15-002	R21	Innovative Molecular Analysis Technologies for Cancer Research	1/8/2015
	CA15-003	R33	Advanced Development and Validation of Emerging Molecular Analysis Technologies for Cancer Research	
	CA15-004	R21	Innovative Technologies for Cancer-Relevant Biospecimen Science	
	CA15-005	R33	Advanced Development and Validation of Emerging Technologies for Cancer-Relevant Biospecimen Science	
DCB	CA15-006	UH2	Big Data to Knowledge (BD2K) Advancing Biomedical Science Using Crowdsourcing and Interactive Digital Media	2/23/2015
	CA15-017	U01	Big Data to Knowledge (BD2K) Development of Software Tools and Methods for Biomedical Big Data in Targeted Areas of High Need	7/23/2015
	CA15-014	U54	Research Centers for Cancer Systems Biology Consortium	9/2/2015
	CA15-015	U24	Coordinating Center for Cancer Systems Biology Consortium	
DCCPS	CA15-011	R01	Smoking Cessation within the Context of Lung Cancer Screening	6/5/2015
DCP	CA14-014	U01	The Early Detection Research Network: Biomarker Developmental Laboratories	11/6/2014
	CA14-015	U01	The Early Detection Research Network: Clinical Validation Centers	
	CA14-016	U24	The Early Detection Research Network: Biomarker Reference Laboratories	
	CA14-017	U01	The Early Detection Research Network: Data Management and Coordinating Center	
DCTD	CA15-501	UM1	Limited Competition: Revisions to Add Phase 2 Clinical Trials Program to Experimental Therapeutics Clinical Trials Network (ETCTN)	3/23/2015
	CA15-502	U24	Limited Competition: Childhood Cancer Survivor Study	9/14/2015
OD	CA15-007	P20	Planning for Regional Centers of Research Excellence in Non-communicable Diseases in Low and Middle Income Countries	9/14/2015
SBIRDC	CA15-010	R44	SBIR Phase IIB Bridge Awards to Accelerate the Development of Cancer Therapeutics, Imaging Technologies, Interventional Devices, Diagnostics and Prognostics Toward Commercialization	3/13/2015

Source: Office of Referral, Review and Program Coordination.

**Table 2. NCI Participation in Trans-NIH Requests for Applications (RFAs) in FY2015**

*Sorted by Date of Publication*

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
10/17/2014	DK14-027	U01	Consortium for the Study of Chronic Pancreatitis, Diabetes and Pancreatic Cancer Clinical Centers (CSCPDPCCs)	DCP	NIH
	DK14-028		Consortium for the Study of Chronic Pancreatitis, Diabetes and Pancreatic Cancer Coordination and Data Management Center (CSCPDPCC-CDMC)		
11/3/2014	ES14-011	U01	Coordinating Center for the Breast Cancer and the Environment Research Program	DCCPS	NIH
	ES14-012		Environmental Influences during Windows of Susceptibility in Breast Cancer Risk		
11/26/2014	LM15-001	R25	NIH Big Data to Knowledge (BD2K) Initiative Research Education: Massive Open Online Course (MOOC) on Data Management for Biomedical Big Data	CCT	NIH
	LM15-002		NIH Big Data to Knowledge (BD2K) Initiative Research Education: Open Educational Resources for Sharing, Annotating and Curating Biomedical Big Data		
12/18/2014	OD15-002	R01	Empirical Research on Ethical Issues Related to Central IRBs and Consent for Research Using Clinical Records and Data	DCCPS	NIH
12/19/2014	ES15-004	U24	Biomedical Data Science Training Coordination Center	ALL DIVISIONS	NIH
12/23/2014	RM14-030	U54	Nuclear Organization and Function Interdisciplinary Consortium (NOFIC)	DCB	NIH-RM
1/8/2015	RM14-017	U24	NIH Science of Behavior Change Resource and Coordinating Center	ALL DIVISIONS	NIH-RM
1/8/2015	RM14-018	UH2, UH3	Science of Behavior Change: Assay Development and Validation for Interpersonal and Social Processes Targets	DCCPS	NIH-RM
	RM14-019		Science of Behavior Change: Assay Development and Validation for Stress Reactivity and Stress Resilience Targets		
	RM14-020		Science of Behavior Change: Assay Development and Validation for Self-Regulation Targets		
1/12/2015	MD15-005	R25	NIH Big Data to Knowledge (BD2K) Enhancing Diversity in Biomedical Data Science	CCT	NIH
1/21/2015	RM15-001	U01	Metabolomics Core for the Undiagnosed Diseases Network (UDN)	ALL DIVISIONS	NIH-RM
2/4/2015	DA15-014	U24	Adolescent Brain Cognitive Development (ABCD) Study – Coordinating Center	DCCPS	NIH
	DA15-015	U01	Adolescent Brain Cognitive Development (ABCD) Study – Research Project Sites		
	DA15-016	U24	Adolescent Brain Cognitive Development (ABCD) Study – Data Analysis and Informatics Center		
4/10/2015	AI15-017	U01	Limited Competition: International epidemiology Databases to Evaluate AIDS (IeDEA)	OHAM	

*continued*

Source: Office of Referral, Review and Program Coordination.

**Table 2 (cont'd). NCI Participation in Trans-NIH Requests for Applications (RFAs) in FY2015**

*Sorted by Date of Publication*

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
4/16/2015	RM15-004	R21	Undiagnosed Diseases Gene Function Research	ALL DIVISIONS	NIH-RM
4/23/2015	OD15-004	R03	Tobacco Regulatory Science Small Grant Program for New Investigators	DCCPS	NIH
5/14/2015	AG16-013	R21	Development of Measures of Fatigability in Older Adults	DCCPS	NIH
6/1/2015	RM15-005	R01	NIH Transformative Research Awards	ALL DIVISIONS	NIH-RM
7/14/2015	RM15-007	U01	Facile Methods and Technologies for Synthesis of Biomedically Relevant Carbohydrates	DCP	NIH-RM
	RM15-008	R21	Novel and Innovative Tools to Facilitate Identification, Tracking, Manipulation, and Analysis of Glycans and their Functions		
	RM15-009	U01			
8/21/2015	OD15-005	R01	Chemistry, Toxicology, and Addiction Research on Waterpipe Tobacco	DCCPS	NIH
8/24/2015	OD15-006		Abuse Liability Associated with Reduced Nicotine Content Tobacco Products		
9/14/2015	HD16-021	R01	Multidisciplinary Approaches for Developmental Research with Individuals with DSD	OHAM	NIH
	HD16-022	R03			
	HD16-023	R21			

Source: Office of Referral, Review and Program Coordination.

**Table 3a. Program Announcements (PAs) Published by the NCI in FY2015**  
Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
10/10/2014	PA15-009	R21	Spatial Uncertainty: Data, Modeling, and Communication	DCCPS
	PA15-010	R01		
	PA15-011	R03		
10/21/2014	PAR15-021	U01	Physical Sciences-Oncology Network (PS-ON): Physical Sciences-Oncology Projects (PS-OP)	DCB
10/28/2014	PAR15-023	P01	National Cancer Institute Program Project Applications	ALL DIVISIONS
11/14/2014	PAR15-033	K07	Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award	CCT
11/25/2014	PAR15-053	R21	Exploratory Grant Award to Promote Workforce Diversity in Basic Cancer Research	CRCHD
12/8/2014	PAR15-060	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	CCT
	PAR15-062	K23	NCI Mentored Patient-Oriented Research Career Development Award to Promote Diversity	
	PAR15-063	K22	NCI Transition Career Development Award to Promote Diversity	
	PAR15-064	K01	NCI Mentored Research Scientist Development Award to Promote Diversity	
12/10/2014	PAR15-056	K22	The NCI Transition Career Development Award	
12/16/2014	PAR15-075	R01	Academic-Industrial Partnerships for Translation of Technologies for Cancer Diagnosis and Treatment	DCTD, DCCPS
1/16/2015	PAR15-092	R21	Exploratory/Developmental Grants Program for Basic Cancer Research in Cancer Health Disparities	DCB
	PAR15-093	R01	Basic Cancer Research in Cancer Health Disparities	DCB, DCP
1/21/2015	PAR15-095	UH2, UH3	Assay Validation for High Quality Markers for NCI-Supported Clinical Trials	DCTD, DCP, DCCPS
	PAR15-096	UH3		
1/29/2015	PAR15-103	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE)	CRCHD
	PAR15-104	U01	Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	DCCPS
1/30/2015	PAR15-108	U01	Multilevel Interventions in Cancer Care Delivery: Building from the Problem of Follow-up to Abnormal Screening Tests	ALL DIVISIONS
2/26/2015	PA15-124	R03	Early-life Factors and Cancer Development Later in Life	DCCPS
	PA15-125	R21		
	PA15-126	R01		
	PA15-127	R01		

*continued*

Source: Office of Referral, Review and Program Coordination.

**Table 3a (cont'd). Program Announcements (PAs) Published by the NCI in FY2015**  
Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
3/24/2015	PAR15-150		Cancer Research Education Grants Program – Curriculum or Methods Development	CCT
	PAR15-151	R25	Cancer Research Education Grants Program – Courses for Skills Development	
	PAR15-152		Cancer Research Education Grants Program – Research Experiences	
3/26/2015	PAR15-155	P30	Administrative Supplements to Promote Cancer Prevention and Control Research in Low and Middle Income Countries (Admin Supp)	OD, CGH
5/18/2015	PA15-264	P30, U10 U19, U54 U56, R01 R33, U01 U24	Assay Validation for High Quality Markers for NCI-Supported Clinical Trials (Admin Supp)	DCTD, DCP, DCCPS
5/21/2015	PAR15-266	U24	Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine	DCTD, DCB, DCP
6/11/2015	PAR15-276	R01	Turkey-U.S. Collaborative Program for Affordable Medical Technologies	DCTD
6/30/2015	PAR15-289	U01	The Pancreatic Cancer Detection Consortium	DCP
7/14/2015	PAR15-297	U01	Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research	
7/24/2015	PA15-305	R01, R21 U01, U24	Supplements to Support Evaluation of the NCI Cancer Genomics Cloud Pilots (Admin Supp)	OD
	PAR15-307	U01	Translational Studies on Adducts for Cancer Risk Identification and Prevention	
	PAR15-308	R01	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention	DCCPS, DCP
	PAR15-309	R21	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention	
	PA15-310		Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival	
	PA15-311	R01	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival	
8/18/2015	PAR15-331	U24	Advanced Development of Informatics Technologies for Cancer Research and Management	OD
	PAR15-332	U01	Early-Stage Development of Informatics Technologies for Cancer Research and Management	
	PAR15-333	U24	Sustained Support for Informatics Resources for Cancer Research and Management	
	PAR15-334	R21	Development of Innovative Informatics Methods and Algorithms for Cancer Research and Management	
9/1/2015	PAR15-340		NCI Exploratory/Developmental Research Grant Program (NCI Omnibus)	ALL DIVISIONS
9/4/2015	PAR15-342	R35	NCI Outstanding Investigator Award	DCB

Source: Office of Referral, Review and Program Coordination.

**Table 3b. Program Announcements (PAs) Published by the NCI in FY2015**  
Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
ALL DIVISIONS	PAR15-023	P01	National Cancer Institute Program Project Applications	10/28/2014
	PAR15-108	U01	Multilevel Interventions in Cancer Care Delivery: Building From the Problem of Follow-up to Abnormal Screening Tests	1/30/2015
	PAR15-340	R21	NCI Exploratory/Developmental Research Grant Program (NCI Omnibus)	9/1/2015
CCT	PAR15-033	K07	Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award	11/14/2014
	PAR15-060	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	12/8/2014
	PAR15-062	K23	NCI Mentored Patient-Oriented Research Career Development Award to Promote Diversity	
	PAR15-063	K22	NCI Transition Career Development Award to Promote Diversity	
	PAR15-064	K01	NCI Mentored Research Scientist Development Award to Promote Diversity	12/10/2014
	PAR15-056	K22	The NCI Transition Career Development Award	
	PAR15-150		Cancer Research Education Grants Program – Curriculum or Methods Development	
	PAR15-151	R25	Cancer Research Education Grants Program – Courses for Skills Development	3/24/2015
	PAR15-152		Cancer Research Education Grants Program – Research Experiences	
CRCHD	PAR15-053	R21	Exploratory Grant Award to Promote Workforce Diversity in Basic Cancer Research	11/25/2014
	PAR15-103	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE)	1/29/2015
DCB	PAR15-021	U01	Physical Sciences-Oncology Network (PS-ON): Physical Sciences-Oncology Projects (PS-OP)	10/21/2014
	PAR15-092	R21	Exploratory/Developmental Grants Program for Basic Cancer Research in Cancer Health Disparities	1/16/2015
	PAR15-342	R35	NCI Outstanding Investigator Award	9/4/2015
DCB, DCP	PAR15-093	R01	Basic Cancer Research in Cancer Health Disparities	1/16/2015
DCCPS	PA15-009	R21	Spatial Uncertainty: Data, Modeling, and Communication	10/10/2014
	PA15-010	R01		
	PA15-011	R03		
	PAR15-104	U01	Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	1/29/2015
	PA15-124	R03	Early-life Factors and Cancer Development Later in Life	2/26/2015
	PA15-125	R21		
PA15-126	R01			

*continued*

Source: Office of Referral, Review and Program Coordination.

**Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2015**  
Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
DCCPS, DCP	PAR15-307	U01	Translational Studies on Adducts for Cancer Risk Identification and Prevention	7/24/2015
	PAR15-308	R01	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention	
	PAR15-309			
	PA15-310	R21	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival	
	PA15-311	R01	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival	
DCP	PAR15-289		The Pancreatic Cancer Detection Consortium	6/30/2015
	PAR15-297	U01	Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research	7/14/2015
DCTD, DCTD, CRCHD, DCCPS	PA15-127		Advancing Translational and Clinical Probiotic/Prebiotic and Human Microbiome Research	2/26/2015
DCTD	PAR15-276	R01	Turkey-U.S. Collaborative Program for Affordable Medical Technologies	6/11/2015
DCTD, DCCPS	PAR15-075		Academic-Industrial Partnerships for Translation of Technologies for Cancer Diagnosis and Treatment	12/16/2014
DCTD, DCB, DCP	PAR15-266	U24	Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine	5/21/2015
DCTD, DCP, DCCPS	PAR15-095	UH2, UH3	Assay Validation for High Quality Markers for NCI-Supported Clinical Trials	1/21/2015
	PAR15-096	UH3	Assay Validation for High Quality Markers for NCI-Supported Clinical Trials	
	PA15-264	P30, U10 U19, U54 U56, R01 R33, U01 U24	Assay Validation for High Quality Markers for NCI-Supported Clinical Trials (Admin Supp)	5/18/2015
OD	PA15-305	R01, R21 U01, U24	Supplements to Support Evaluation of the NCI Cancer Genomics Cloud Pilots (Admin Supp)	7/24/2015
	PAR15-331	U24	Advanced Development of Informatics Technologies for Cancer Research and Management	8/18/2015
	PAR15-332	U01	Early-Stage Development of Informatics Technologies for Cancer Research and Management	
	PAR15-333	U24	Sustained Support for Informatics Resources for Cancer Research and Management	
	PAR15-334	R21	Development of Innovative Informatics Methods and Algorithms for Cancer Research and Management	
OD, CGH	PAR15-155	P30	Administrative Supplements to Promote Cancer Prevention and Control Research in Low and Middle Income Countries (Admin Supp)	3/26/2015

Source: Office of Referral, Review and Program Coordination.

**Table 4. NCI Participation in Trans-NIH Program Announcements (PA/PARs)  
in FY2015**

*Sorted by Date of Publication*

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
10/16/2014	PAR15-019	U54	Limited Competition for the Continuation of Rare Diseases Clinical Research Consortia in the Rare Diseases Clinical Research Network	DCTD	NIH
10/28/2014	PAR15-024	R01	Food Specific Molecular Profiles and Biomarkers of Food and Nutrient Intake, and Dietary Exposure	DCP, DCCPS	NIH
11/5/2014	PA15-030	P01 U19 DP2 DP3 DP5 UP5 R00 R01 R37 U01	Collaborative Activities to Promote Metabolomics Research (Admin Supp)	DCB	NIH
11/18/2014	PA15-035	R34	Research Aimed at Novel Behavioral Targets to Improve Adolescent Substance Abuse Treatment and Prevention Interventions	DCCPS	NIH
11/21/2014	PAR15-047	R21	Systems Science and Health in the Behavioral and Social Sciences		
	PAR15-048	R01			
1/8/2015	PA15-083	K99 R00	NIH Pathway to Independence Award (Parent)	CCT	NIH
1/8/2015	PAR15-085	U01	Predictive Multiscale Models for Biomedical, Biological, Behavioral, Environmental and Clinical Research	DCB	NIH, ARO, DOE, FDA, NASA, NSF, ONR
3/9/2015	PA15-135	R01	Advancing Mechanistic Probiotic/Prebiotic and Human Microbiome Research	DCB, DCP, DCTD	NIH
3/12/2015	PA15-137	P01 P20 P30 P40 P50 P60 P2C PM1 PN2 U10 U19 U54 U56 UM1 UL1	Administrative Supplements for Research on HIV/AIDS and Aging (Admin Supp)	OHAM	NIAID
3/18/2015	PA15-144	G12 P01 P20 P30 P41 P50 P2C PM1 PN2 U19 U41 U43 UC2	Supplements to Support Interoperability of NIH Funded Biomedical Data Repositories (Admin Supp)	ALL DIVISIONS	NIH
3/27/2015	PA15-163	R21	Exploratory/Developmental Clinical Research Grants in Obesity	DC, DCCPS	NIH
4/2/2015	PAR15-170	R01	Diet and Physical Activity Assessment Methodology		
	PAR15-171	R21			
4/9/2015	PA15-183	P01 P30 P50 U19 U54 R01 U01	Administrative Supplements for Tobacco Regulatory Research on Tobacco Flavors and Flavorings (Admin Supp)	DCCPS	NIH FDA

*continued*

Source: Office of Referral, Review and Program Coordination.

**Table 4 (cont'd). NCI Participation in Trans-NIH Program Announcements (PA/PARs) in FY2015**

*Sorted by Date of Publication*

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
4/28/2015	PAR15-189	R00 SI2	Lasker Clinical Research Scholars Program	CCT	NIH
	PA15-188	R01	Developing the Therapeutic Potential of the Endocannabinoid System for Pain Treatment	DCP, DCCPS	
5/6/2015	PA15-249	P01 P20 P30 P40 P50 P51 U19 U42 U54 UM1 R01 R21 R21/R33 R34 U02 U24 UL1	NLM Administrative Supplements for Informationist Services in NIH-funded Research Projects (Admin Supp)	ALL DIVISIONS	NIH
5/14/2015	PA15-258	P01 P20 P30 P40 P50 P51 U19 U42 U54, UM1 R01 R21 R32/R33 R34	Administrative Supplements for Research on Dietary Supplements (Admin Supp)	DCP, DCCPS	NIH
5/15/2015	PAR15-259	X01	Discovery of the Genetic Basis of Structural Birth Defects and of Childhood Cancers: Gabriella Miller Kids First Pediatric Research Program	DCTD	NIH
5/18/2015	PA15-260	R15	The Health of Sexual and Gender Minority (SGM) Populations	OHAM	NIH
	PA15-261	R01			
	PA15-262	R03			
	PA15-263	R21			
6/4/2015	PA15-269	R43 R44	PHS 2015-02 Omnibus Solicitation of the NIH, CDC, FDA and ACF for Small Business Innovation Research Grant Applications (Parent SBIR)	SBIRDC	NIH, CDC, FDA, ACF
	PA15-270	R41 R42	PHS 2015-02 Omnibus Solicitation of the NIH for Small Business Technology Transfer Grant Applications (Parent STTR)		NIH
6/5/2015	PA15-273	R01	Harnessing Big Data to Halt HIV	OHAM	NIAID
	PAR15-274		Ethical Issues in Research on HIV/AIDS and Its Co-Morbidities		
	PAR15-275		R21		
6/18/2015	PAR15-280	R01	Multidisciplinary Studies of HIV/AIDS and Aging	OHAM	NIAID
	PAR15-281	R03			
6/24/2015	PAR15-282	R21	Pre-application: Opportunities for Collaborative Research at the NIH Clinical Center	DCTD	NIH
	PAR15-286	X02			
	PAR15-287	U01			

*continued*

Source: Office of Referral, Review and Program Coordination.

**Table 4 (cont'd). NCI Participation in Trans-NIH Program Announcements (PA/PARs) in FY2015**

*Sorted by Date of Publication*

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
6/30/2015	PAR15-288	R44	Direct Phase II SBIR Grants to Support Extended Development, Hardening, and Dissemination of Technologies in Biomedical Computing, Informatics, and Big Data Science	SBIRDC	NIH
8/7/2015	PA15-321	G12 P01 P20 P30 P40 P41 P50 P51 P60 P2C PM1 PN2 U10 U19 U41 U42 U54 U56 UM2 U2C	Research Supplements to Promote Re-Entry Into Biomedical and Behavioral Research Careers (Admin Supp)	CRCHD	NIH
	PA15-322	G12 P01 P20 P30 P40 P41 P50 P51 P60 P2C PM1 PN2 U10 U19 U41 U42 U54 U56 UM2 U2C	Research Supplements to Promote Diversity in Health-Related Research (Admin Supp)		NIH, CDC, NIOSH, CDC
	PA15-324	R01	End-of-Life and Palliative Needs of Adolescents and Young Adults (AYA) With Serious Illnesses	DCCPS	NIH
	PA15-325	R21			
8/11/2015	PA15-329	P01 P20 P30 P50 P51 P60 U10 U19 U54 U56	Administrative Supplements for Research on Sexual and Gender Minority (SGM) Populations (Admin Supp)	OHAM	NIH
9/17/2015	PAR15-346	R01	Time-Sensitive Obesity Policy and Program Evaluation		
	PA15-347	R01	Research on the Mechanisms and/or Behavioral Outcomes of Multisensory Processing	DCCPS	NIH
9/21/2015	PA15-354	R43, R44	SBIR Technology Transfer	SBIRDC	NIH

Source: Office of Referral, Review and Program Coordination.

**Table 5. Applications Received for Referral by the NCI/DEA in FY2015**  
Sorted by Mechanism

Mechanism	Activity Code	Total by Activity	Applications by NCAB			Total Costs Requested First Year
			Feb	June	Sept	
International Training Grants in Epidemiology (FIC)	D43	30	30	0	0	\$8,926,594
NIH Director's New Innovator Awards	DP2	1	0	1	0	\$1,500,000
Early Independence Award	DP5	3	0	0	3	\$1,266,250
Individual Predoctoral NRSA for M.D./Ph.D. Fellowships (ADAMHA)	F30	178	57	56	65	\$0
Predoctoral Individual National Research Service Award	F31	419	169	137	113	\$0
Postdoctoral Individual National Research Service Award	F32	299	76	130	93	\$0
National Research Service Award for Senior Fellows	F33	1	0	1	0	\$0
Research Scientist Development Award – Research and Training	K01	81	11	14	56	\$12,656,875
Research Scientist Award	K05	3	0	3	0	\$270,784
Academic/Teacher Award	K07	65	21	28	16	\$9,865,274
Clinical Investigator Award	K08	79	18	39	22	\$13,266,270
Physician Scientist Award (Program)	K12	8	8	0	0	\$4,013,532
Career Transition Award	K22	107	30	41	36	\$17,326,546
Mentored Patient-Oriented Research Development Award	K23	32	12	10	10	\$5,611,614
Midcareer Investigator Awd in Patient – Oriented Research	K24	10	3	2	5	\$1,579,374
Mentored Quantitative Research Career Development	K25	13	2	5	6	\$1,847,856
Career Transition Award	K99	186	71	58	57	\$21,108,258
Research Program Projects	P01	80	25	31	24	\$171,375,388
Exploratory Grants	P20	16	0	0	16	\$3,289,139
Center Core Grants	P30	26	14	6	6	\$85,620,015
Biotechnology Resource Grant Program	P41	1	1	0	0	\$2,393,389
Specialized Center	P50	46	11	27	8	\$102,933,108
Research Project	R01	6,633	2,424	2,134	2,075	\$3,265,916,817
Small Research Grants	R03	603	198	228	177	\$46,657,033
Conferences	R13	102	54	25	23	\$2,912,819
Academic Research Enhancement Awards (AREA)	R15	323	91	123	109	\$135,339,972
Exploratory/Developmental Grants	R21	3,575	1,140	1,275	1,160	\$809,715,465
Education Projects	R25	91	12	15	64	\$19,115,734
Exploratory/Developmental Grants Phase II	R33	97	23	45	29	\$41,983,581
Outstanding Investigator Award	R35	224	0	224	0	\$209,367,289

*continued*

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (455) were not included in the total count.

**Table 5 (cont'd). Applications Received for Referral by the NCI/DEA in FY2015**  
Sorted by Mechanism

Mechanism	Activity Code	Total by Activity	Applications by NCAB			Total Costs Requested First Year
			Feb	June	Sept	
Method to Extend Research in Time (MERIT) Award	R37	1	1	0	0	\$376,290
Small Business Technology Transfer (STTR) Grants – Phase I	R41	271	92	73	106	\$60,991,402
Small Business Technology Transfer (STTR) Grants – Phase II	R42	43	13	13	17	\$25,317,119
Small Business Innovation Research Grants (SBIR) – Phase I	R43	802	234	257	311	\$171,783,475
Small Business Innovation Research Grants (SBIR) – Phase II	R44	308	88	93	127	\$200,340,750
High Priority, Short Term Project Award	R56	8	5	3	0	\$1,201,476
Research Enhancement Award	SC1	25	4	0	21	\$7,910,803
Pilot Research Project	SC2	18	1	0	17	\$2,621,920
Intramural Clinical Scholar Research Award	SI2	4	4	0	0	\$0
Institutional National Research Service Award	T32	104	48	38	18	\$41,727,963
Research Project (Cooperative Agreements)	U01	848	209	296	343	\$733,473,859
Conference (Cooperative Agreement)	U13	3	1	0	2	\$97,997
Resource-Related Research Project (Cooperative Agreements)	U24	46	14	8	24	\$81,596,778
International Training Cooperative Agreement	U2R	20	0	20	0	\$5,625,642
Biotechnology Resource (Cooperative Agreements)	U41	2	1	1	0	\$2,183,051
Specialized Center (Cooperative Agreements)	U54	88	24	33	31	\$206,762,565
Exploratory/Developmental Cooperative Agreement – Phase I	UH2	52	0	0	52	\$25,227,856
Exploratory/Developmental Cooperative Agreement – Phase II	UH3	2	0	0	2	\$792,281
Research Project With Complex Structure Cooperative Agreement	UM1	4	3	0	1	\$29,191,033
Pre-Application	X02	36	22	14	0	\$0
<b>Overall Totals</b>		<b>16,017</b>	<b>5,265</b>	<b>5,507</b>	<b>5,245</b>	<b>\$6,593,081,236</b>

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (455) were not included in the total count.

**Table 6. Grant and Cooperative Agreement Applications Reviewed by the NCI/DEA in FY2015**

*Sorted by Mechanism*

Mechanism	Activity Code	Total by Activity	Applications by NCAB			Total Costs Requested First Year
			Feb	June	Sept	
Research Scientist Development Award – Research and Training	K01	36	11	14	11	\$4,631,063
Research Scientist Award	K05	3	0	3	0	\$270,784
Academic/Teacher Award	K07	65	21	28	16	\$9,865,274
Clinical Investigator Award	K08	74	18	35	21	\$12,370,032
Physician Scientist Award (Program)	K12	8	8	0	0	\$4,013,532
Career Transition Award	K22	107	30	41	36	\$17,326,546
Mentored Patient-Oriented Research Development Award	K23	25	8	8	9	\$4,368,837
Midcareer Investigator Award in Patient-Oriented Research	K24	10	3	2	5	\$1,579,374
Mentored Quantitative Research Career Development	K25	13	2	5	6	\$1,847,856
Career Transition Award	K99	156	56	50	50	\$18,257,340
Research Program Projects	P01	80	25	31	24	\$171,375,388
Exploratory Grants	P20	16	0	0	16	\$3,289,139
Center Core Grants	P30	17	5	6	6	\$72,388,271
Specialized Center	P50	39	11	21	7	\$88,047,460
Research Project	R01	104	87	7	10	\$53,739,354
Small Research Grants	R03	547	172	207	168	\$42,517,269
Conferences	R13	70	35	18	17	\$1,797,864
Exploratory/Developmental Grants	R21	2,741	843	929	969	\$619,795,402
Education Projects	R25	31	9	12	10	\$9,437,145
Exploratory/Developmental Grants – Phase II	R33	93	21	45	27	\$40,991,630
Outstanding Investigator Award	R35	224	0	224	0	\$209,367,289
Small Business Innovation Research Grants (SBIR) – Phase II	R44	23	0	0	23	\$23,988,788
Institutional National Research Service Award	T32	79	26	38	15	\$28,773,262
Research Project (Cooperative Agreements)	U01	483	78	222	183	\$370,811,082
Resource-Related Research Project (Cooperative Agreements)	U24	29	14	8	7	\$42,953,802
Specialized Center (Cooperative Agreements)	U54	88	24	33	31	\$206,762,565
Exploratory/Developmental Cooperative Agreement – Phase I	UH2	52	0	0	52	\$25,227,856
Exploratory/Developmental Cooperative Agreement – Phase II	UH3	2	0	0	2	\$792,281
Research Project With Complex Structure Cooperative Agreement	UM1	4	3	0	1	\$29,191,033
<b>Overall Totals</b>		<b>5,219</b>	<b>1,510</b>	<b>1,987</b>	<b>1,722</b>	<b>\$2,115,777,518</b>

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (189) were not included in the total count.

**Table 7. Applications Reviewed by NCI IRG Subcommittees and Special Emphasis Panels (SEPs) in FY2015**

NCI IRG Subcommittee	Types of Applications Reviewed	Total by Committee	Total Costs Requested First Year
A - Cancer Centers	P30	16	\$70,838,272
F - Institutional Training and Education	K12, R25, T32	117	\$42,044,316
I - Transition to Independence	K01, K22, K25, K99	310	\$41,767,570
J - Career Development	K05, K07, K08, K23, K24	174	\$27,940,802
<b>Totals - NCI IRG Subcommittees</b>		<b>617</b>	<b>\$182,590,960</b>
Total SEPs	K01, K05, K07, K22, K23, K24, K99, L30, L40, P01, P20, P30, P50, R01, R03, R13, R21, R25, R33, R35, R44, T32, U01, U24, U54, UH2, UH3, UM1	<b>4,602</b>	<b>\$1,933,186,558</b>
<b>TOTAL</b>		<b>5,219</b>	<b>\$2,115,777,518</b>

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (16) were not included in the total count.

**Table 8. Summary of Investigator-Initiated P01 Applications Reviewed in FY2015**

Type of Application	Applications by Board			
	February 2015	June 2015	September 2015	FY2015 Total
New	5	12	17	34
Resubmitted New	4	8	0	12
Renewal	6	5	2	13
Resubmitted Renewal	5	4	4	13
Revisions	5	2	1	8
<b>Total</b>	<b>25</b>	<b>31</b>	<b>24</b>	<b>80</b>

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

**Table 9. Summary of Investigator-Initiated P01 Applications Reviewed, Sorted by NCI Program Division, in FY2015**

Program Division	Number of Applications	Total Costs Requested First Year	Total Costs for Requested Period
Division of Cancer Biology (DCB)	28	\$57,818,689	\$289,530,131
Division of Cancer Control and Population Sciences (DCCPS)	9	\$27,401,456	\$141,323,619
Division of Cancer Prevention (DCP)	7	\$17,343,054	\$88,266,748
Division of Cancer Treatment and Diagnosis (DCTD)	36	\$68,812,189	\$345,050,047
<b>Total</b>	<b>80</b>	<b>\$171,375,388</b>	<b>\$864,170,545</b>

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 FY2015**

Title of Initiative	RFA Number	Activity Code	Applications by NCAB				Total Costs Requested First Year
			Totals	Feb	June	Sept	
Research Answers to NCIs Provocative Questions – Group A	CA13-016	R01	17	17	0	0	\$8,031,944
	CA13-017	R21	12	12	0	0	\$2,632,026
Research Answers to NCIs Provocative Questions – Group B	CA13-018	R01	26	26	0	0	\$11,828,465
	CA13-019	R21	14	14	0	0	\$3,023,168
Research Answers to NCIs Provocative Questions – Group C	CA13-020	R01	21	21	0	0	\$12,053,352
	CA13-021	R21	24	24	0	0	\$5,338,384
Research Answers to NCIs Provocative Questions – Group D	CA13-022	R01	8	8	0	0	\$3,632,223
	CA13-023	R21	7	7	0	0	\$1,612,725
Research Answers to NCIs Provocative Questions – Group E	CA13-024	R01	8	8	0	0	\$4,787,536
	CA13-025	R21	1	1	0	0	\$231,000
Early-Stage Innovative Molecular Analysis Technology Development for Cancer Research)	CA14-003	R21	99	42	57	0	\$26,377,122
Validation and Advanced Development of Emerging Molecular Analysis Technologies for Cancer Research	CA14-004	R33	59	20	39	0	\$25,827,163
Early-Stage Development of Innovative Technologies for Biospecimen Science	CA14-005	R21	24	9	15	0	\$6,240,991
Validation and Advanced Development of Emerging Technologies for Biospecimen Science)	CA14-006	R33	7	1	6	0	\$2,886,069
Molecular and Cellular Characterization of Screen-Detected Lesions	CA14-010	U01	31	0	31	0	\$24,052,533
Molecular and Cellular Characterization of Screen-Detected Lesions – Coordinating Center and Data Management Group	CA14-011	U01	7	0	7	0	\$3,675,188
Cancer Intervention and Surveillance Modeling Network (CISNET)	CA14-012	U01	7	0	7	0	\$10,548,181
Centers of Cancer Nanotechnology Excellence (CCNEs)	CA14-013	U54	31	0	31	0	\$79,796,904
The Early Detection Research Network: Biomarker Developmental Laboratories	CA14-014	U01	56	0	0	56	\$32,760,731
The Early Detection Research Network: Clinical Validation Centers	CA14-015	U01	20	0	0	20	\$18,429,833
The Early Detection Research Network: Biomarker Reference Laboratories	CA14-016	U24	5	0	0	5	\$2,338,672
The Early Detection Research Network: Data Management and Coordinating Center	CA14-017	U24	2	0	0	2	\$11,740,000
Pediatric Preclinical Testing Consortium: Research Programs	CA14-018	U01	17	0	17	0	\$9,010,060
Pediatric Preclinical Testing Consortium: Coordinating Center	CA14-019	U01	3	0	3	0	\$1,584,821

*continued*

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (127) were not included in the total count.

**Table 10 (cont'd). Requests for Applications (RFAs) Reviewed by the NCI/DEA in FY2015**

Title of Initiative	RFA Number	Activity Code	Applications by NCAB				Total Costs Requested First Year
			Totals	Feb	June	Sept	
Limited Competition: Biospecimen Banks to Support NCI-Clinical Trials Network (NCTN)	CA14-501	U24	5	5	0	0	\$15,210,175
Limited Competition: AIDS Malignancy Clinical Trials Consortium	CA14-502	UM1	1	0	0	1	\$21,400,000
Limited Competition: International Agency for Research on Cancer (IARC) Monographs Program	CA14-503	U01	1	0	1	0	\$859,000
Cancer Detection, Diagnosis, and Treatment Technologies for Global Health	CA15-001	UH2	44	0	0	44	\$22,225,245
Innovative Molecular Analysis Technologies for Cancer Research	CA15-002	R21	64	0	0	64	\$14,454,626
Advanced Development and Validation of Emerging Molecular Analysis Technologies for Cancer Research	CA15-003	R33	24	0	0	24	\$10,941,939
Innovative Technologies for Cancer-Relevant Biospecimen Science	CA15-004	R21	6	0	0	6	\$1,376,752
Advanced Development and Validation of Emerging Technologies for Cancer-Relevant Biospecimen Science	CA15-005	R33	3	0	0	3	\$1,336,459
SBIR Phase IIB Bridge Awards to Accelerate the Development of Cancer Therapeutics, Imaging Technologies, Interventional Devices, Diagnostics and Prognostics Toward Commercialization	CA15-010	R44	23	0	0	23	\$23,988,788
<b>Totals</b>			<b>677</b>	<b>215</b>	<b>214</b>	<b>248</b>	<b>\$420,232,075</b>

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (119) were not included in the total count.

**Table 11. Program Announcements (PAs) Reviewed by the NCI/DEA in FY2015**

Title of Initiative	RFA Number	Activity Code	Applications by NCAB				Total Costs Requested First Year
			Totals	Feb	Jun	Sept	
Examination of Survivorship Care Planning Efficacy and Impact	PA12-275	R01	1	1	0	0	\$303,613
Mechanisms, Models, Measurement, and Management in Pain Research	PA13-118	R01	1	0	1	0	\$639,358
Research Project Grant (Parent)	PA13-302	R01	16	5	2	9	\$10,670,878
NIH Exploratory/Development Research Grant Program (Parent)	PA13-303	R21	0	0	0	0	\$0
NIH Support for Conferences and Scientific Meetings (Parent)	PA13-347	R13	70	35	18	17	\$1,797,864
Advancing the Science of Geriatric Palliative Care	PA13-354	R01	1	0	0	1	\$853,760
Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent)	PA14-015	T32	79	26	38	15	\$28,773,262
NIH Pathway to Independence Award (Parent)	PA14-042	K99	106	56	50	0	\$12,439,228
Mentored Clinical Scientist Research Career Development Award (Parent)	PA14-046	K08	67	16	31	20	\$11,208,685
Midcareer Investigator Award in Patient-Oriented Research (Parent)	PA14-047	K24	10	3	2	5	\$1,579,374
Mentored Quantitative Research Development Award (Parent)	PA14-048	K25	13	2	5	6	\$1,847,856
Mentored Patient-Oriented Research Career Development Award (Parent)	PA14-049	K23	23	7	8	8	\$4,054,303
NIH Pathway to Independence Award (Parent)	PA15-083	K99	50	0	0	50	\$5,818,112
Small Grants Program for Cancer Epidemiology	PAR12-039	R03	79	33	46	0	\$6,090,465
Cancer Education Grants Program	PAR12-049	R25	31	9	12	10	\$9,437,145
NCI Mentored Research Scientist Development Award to Promote Diversity	PAR12-050	K01	25	11	14	0	\$3,140,293
NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	PAR12-051	K08	6	2	4	0	\$992,867
NCI Mentored Patient-Oriented Research Career Development Award to Promote Diversity	PAR12-052	K23	1	1	0	0	\$143,678
The NCI Transition Career Development Award to Promote Diversity	PAR12-062	K22	5	2	3	0	\$780,625
NCI Established Investigator Award in Cancer Prevention and Control	PAR12-065	K05	3	0	3	0	\$270,784
Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award	PAR12-067	K07	49	21	28	0	\$7,441,325
The NCI Transition Career Development Award	PAR12-121	K22	66	28	38	0	\$10,217,363

*continued*

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (155) were not included in the total count.

**Table 11 (cont'd). Program Announcements (PAs) Reviewed by the NCI/DEA in FY2015**

Title of Initiative	RFA Number	Activity Code	Applications by NCAB				Total Costs Requested First Year
			Totals	Feb	Jun	Sept	
Revisions for Early-Stage Development of Informatics Technology	PAR12-286	R01	2	1	1	0	\$398,231
Early-Stage Development of Informatics Technology	PAR12-288	U01	23	12	11	0	\$9,361,935
Revisions for Early-Stage Development of Informatics Technology	PAR12-289	U01	1	1	0	0	\$245,000
Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research	PAR13-036	U01	25	11	0	14	\$14,771,512
Bridging the Gap Between Cancer Mechanism and Population Science	PAR13-081	U01	7	4	3	0	\$5,629,378
Bioengineering Research Grants (BRG)	PAR13-137	R01	1	0	1	0	\$539,994
NCI Exploratory/Developmental Research Grant Program (NCI Omnibus)	PAR13-146	R21	2,490	734	857	899	\$558,508,608
The Role of Microbial Metabolites in Cancer Prevention and Etiology	PAR13-159	U01	9	0	9	0	\$6,079,983
Collaborative Research in Integrative Cancer Biology	PAR13-184	U01	23	14	9	0	\$17,322,933
Paul Calabresi Career Development Award for Clinical Oncology	PAR13-201	K12	8	8	0	0	\$4,013,532
Advanced Development of Informatics Technology	PAR13-294	U24	15	7	8	0	\$11,507,211
Revision Applications to P50 Awards for Research on Imaging and Biomarkers for Early Cancer Detection	PAR13-318	P50	1	1	0	0	\$238,784
National Cancer Institute Program Project Applications	PAR13-321	P01	54	24	30	0	\$113,239,100
Opportunities for Collaborative Research at the NIH Clinical Center	PAR13-358	U01	17	0	0	17	\$11,076,596
Cancer Center Support Grants (CCSGs) for NCI-Designated Cancer Centers	PAR13-386	P30	17	5	6	6	\$72,388,271
NCI Small Grants Program for Cancer Research (NCI Omnibus)	PAR14-007	R03	468	139	161	168	\$36,426,804
Specialized Programs of Research Excellence (SPOREs) in Human Cancer for Years 2013 and 2014 (P50)	PAR14-031	P50	31	10	21	0	\$71,291,079
Specialized Programs of Research Excellence (SPOREs) in Human Cancer for Years 2013 and 2014	PAR14-031	U54	1	0	1	0	\$2,300,000
Fundamental Mechanisms of Affective and Decisional Processes in Cancer Control	PAR14-067	U01	33	16	17	0	\$17,882,262
Revision Applications for Research on Metabolic Reprogramming to Improve Immunotherapy	PAR14-087	P01	2	1	1	0	\$211,990
Quantitative Imaging for Evaluation of Response to Cancer Therapies	PAR14-116	U01	38	13	19	6	\$26,808,080
Feasibility Studies to Build Collaborative Partnerships in Cancer Research	PAR14-152	P20	16	0	0	16	\$3,289,139

*continued*

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (155) were not included in the total count.

**Table 11 (cont'd). Program Announcements (PAs) Reviewed by the NCI/DEA in FY2015**

Title of Initiative	RFA Number	Activity Code	Applications by NCAB				Total Costs Requested First Year
			Totals	Feb	Jun	Sept	
Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	PAR14-160	U01	19	7	12	0	\$40,420,859
	PAR14-160	UM1	3	3	0	0	\$7,791,033
Physical Sciences-Oncology Centers	PAR14-169	U54	42	24	0	18	\$101,857,781
Oncology Forums Model	PAR14-239	U24	2	2	0	0	\$2,157,744
Outstanding Investigator Award	PAR14-267	R35	224	0	224	0	\$209,367,289
Innovative Research in Cancer Nanotechnology (IRCN)	PAR14-285	U01	75	0	53	22	\$48,520,687
New Approaches to Synthetic Lethality for Mutant KRas-Dependent Cancers	PAR14-314	U01	23	0	23	0	\$21,164,646
Specialized Programs of Research Excellence (SPOREs) in Human Cancers for Years 2015 and 2016	PAR14-353	P50	7	0	0	7	\$16,517,597
Limited Competition for the Continuation of Rare Diseases Clinical Research Consortia in the Rare Diseases Clinical Research Network	PAR15-019	U54	1	0	1	0	\$1,250,000
Physical Sciences-Oncology Network (PS-ON): Physical Sciences-Oncology Projects (PS-OP)	PAR15-021	U01	36	0	0	36	\$25,871,606
National Cancer Institute Program Project Applications	PAR15-023	P01	24	0	0	24	\$57,924,298
Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award	PAR15-033	K07	16	0	0	16	\$2,423,949
The NCI Transition Career Development Award	PAR15-056	K22	34	0	0	34	\$6,040,742
NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	PAR15-060	K08	1	0	0	1	\$168,480
NCI Mentored Patient-Oriented Research Career Development Award to Promote Diversity	PAR15-062	K23	1	0	0	1	\$170,856
NCI Transition Career Development Award to Promote Diversity	PAR15-063	K22	2	0	0	2	
NCI Mentored Research Scientist Development Award to Promote Diversity	PAR15-064	K01	11	0	0	11	\$1,490,770
Assay Validation for High Quality Markers for NCI-Supported Clinical Trials	PAR15-095	UH2	8	0	0	8	\$3,002,611
	PAR15-096	UH3	2	0	0	2	\$792,281
Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE)	PAR15-103	U54	13	0	0	13	\$21,557,880
Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	PAR15-104	U01	9	0	0	9	\$21,648,773
Multilevel Interventions in Cancer Care Delivery: Building From the Problem of Follow-up to Abnormal Screening Tests	PAR15-108	U01	3	0	0	3	\$3,086,485
<b>Totals</b>			<b>4,540</b>	<b>1,295</b>	<b>1,771</b>	<b>1,474</b>	<b>\$1,695,545,443</b>

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. Withdrawn applications (155) were not included in the total count.

**Table 12. SBIR Topics and Requests for Proposals (RFPs) Reviewed by the NCI/DEA in FY2015\***

Announcement/ Topic Number	Announcement Title	Review Round	No. of Proposals
Topic 334 (Phase I & Fast-Track)	Vacutubes to Preserve the Viability of Circulating Tumor Cells	Nov-5	3 (3 FT)
Topic 335 (Phase I & Fast-Track)	Development of Advanced Culture Systems for Expansion of Cancer Stem Cells	Nov-5	13 (2 FT)
Topic 336 (Phase I & Fast-Track)	Development of Novel Therapeutic Agents that Target Cancer Stem Cells	Nov-5	9 (2 FT)
Topic 337 (Phase I & Fast-Track)	Cell-Free Nucleic Acid-Based Assay Development for Cancer Diagnosis	Nov-5	27
Topic 338 (Phase I & Fast-Track)	Predictive Biomarkers of Adverse Reactions to Radiation Treatment	Nov-5	6 (1 FT)
Topic 339 (Phase I & Fast-Track)	Systemic Targeted Radionuclide Therapy for Cancer Treatment	Nov-5	11 (3 FT)
Topic 340 (Phase I & Fast-Track)	Validation of Mobile Technologies for Clinical Assessment, Monitoring, and Intervention	Nov-5	13
<b>Phase II Topics From Earlier Phase I Awards</b>			
Topic 309	Development of Low Cost, Small Sample Multi-Analyte Technologies for Cancer Diagnosis, Prognosis and Early Detection	Jan-30	1
Topic 314	Development of Human Tissue Culture Systems That Mimic the Tumor Microenvironment	Jan-30	5
Topic 315	Development of Companion Diagnostics: Enabling Precision Medicine in Cancer Therapy	Jan-30	1
Topic 316	Development of CYC Isolation Technologies Enabling Downstream Single Cell Molecular Analysis	Jan-30	2
Topic 317	Wound Healing Preparations Incorporating Nitric Oxide-Releasing Materials (NIH Technology Transfer)	Jan-30	1
Topic 319	Technology to Generate Anti-Peptide Capture Reagents for Affinity-Enriched Proteomic Studies	Jan-30	5
Topic 321	Chemically Defined Glycan Libraries for Reference Standards and Glycomics Research (Joint NCI-NIGMS Program)	Jan-30	7
Topic 322	Real-Time Integration of Sensor and Self-Report Data for Clinical and Research Applications	Jan-30	1
Topic 323	Development of Radiation Modulators for Use During Radiotherapy	Jan-30	1
Topic 324	Novel Imaging Agents to Expand the Clinical Toolkit for Cancer Diagnosis, Staging, and Treatment	Jan-30	2
Topic 325	Innovative Radiation Sources for Advanced Radiotherapy Equipment	Jan-30	2
<b>Other Solicitations Reviewed in DEA</b>			
N01 CM51007-51	Carbon Ion Trials	Jul-23	2
N01 CN45009-45	Preclinical Prevent Cancer Program: Toxicology and Pharmacology Testing	May-19	7
N01 CN55003-47	Preclinical Prevent Cancer Program: Preclinical Efficacy and Intermediate Endpoint Biomarkers	May-28	8
L30 (OD14-105)	Loan Repayment Program for Clinical Researchers		283
L40 (OD14-107)	Loan Repayment Program for Pediatric Researchers		91
<b>TOTAL</b>			<b>512</b>

\* The proposals were in response to SBIR Contract Solicitations - Phase I (82) and Fast Track-Phase I/II (11), Phase II (28), RFPs (N01) (17), and Loan Repayment (L30/L40) (374).  
Source: Office of Referral, Review and Program Coordination.

**Table 13. Summary of NCI Grant Awards by Mechanism in FY2015\***

Fund Type: Appropriated Cost Centers Mechanisms	Awards Count	Awards Dollars	Average Cost	% of NCI Total Grants		Fiscal Year: 2015			
				Number	Dollars	Competing Requested	Competing Awarded	Success Rate	
<b>Research Project Grants</b>									
Traditional Research Grants – R01/RL1	2,949	1,174,944,184	398,421	46.3 %	38.13%	4,550	623	13.69%	
Program Projects – P01	100	193,818,246	1,938,182	1.57%	6.29%	69	16	23.19%	
Small Grants – R03	162	12,868,300	79,434	2.54%	0.42%	582	67	11.51%	
Exploratory/Developmental Research – R21	639	123,378,451	193,081	10.03%	4.0 %	2,864	325	11.35%	
Phased Innovation Grant (phase 2) – R33	0	85,634	85,634	0.0 %	0.0 %	0	0	0.0 %	
Bridge Award – R56	1	263,375	263,375	0.02%	0.01%	1	1	100.0 %	
Pathway to Independence – R00/Si2	93	22,840,950	245,602	1.46%	0.74%	0	0	0.0 %	
Exploratory/Development Coop Agreements – UH2/UH3	1	2,283,052	2,283,052	0.02%	0.07%	1	1	100.0 %	
Merit Awards – R37	12	5,695,175	474,598	0.19%	0.18%	1	0	0.0 %	
NIH Director Pioneer Award (NDPA) – DP1	2	2,412,844	1,206,422	0.03%	0.08%	0	0	0.0 %	
NIH Director New Innovator Awards – DP2	0	401,539	401,539	0.0 %	0.01%	0	0	0.0 %	
Outstanding Investigators – R35	43	34,740,450	807,917	0.68%	1.13%	224	43	19.2 %	
NIH Director's Early Independence Awards – DP5	8	3,501,382	437,673	0.13%	0.11%	0	0	0.0 %	
Academic Research Enhancement Awards (AREA) – R15	18	7,316,970	406,498	0.28%	0.24%	218	18	8.26%	
Multi-Component Research Proj Coop Agreements – UM1/RM1	15	28,571,687	1,904,779	0.24%	0.93%	3	1	33.33%	
Cooperative Agreements – U01/U19	167	110,069,044	659,096	2.62%	3.57%	363	57	15.7 %	
Request for Applications	287	101,999,939	355,400	4.51%	3.31%	490	64	13.06%	
Cooperative Agreements – RFA-U01/ U19	76	101,518,285	1,335,767	1.19%	3.29%	159	20	12.58%	
Small Business Innovative Research – R43/R44	162	77,601,590	479,022	2.54%	2.52%	739	113	15.29%	
Small Business Technology Transfer – R41/R42	32	14,996,817	468,651	0.5 %	0.49%	211	22	10.43%	
Program Evaluation – R01	0	73,327,000	73,327,000	0.0 %	2.38%	0	0	0.0 %	
<b>Subtotal Research Project Grants</b>	<b>4,767</b>	<b>2,092,634,914</b>	<b>438,984</b>	<b>74.85%</b>	<b>67.92%</b>	<b>10,475</b>	<b>1,371</b>	<b>13.09%</b>	
<b>Other Research</b>									
Clinical Cooperative Groups – U10/UG1	102	241,653,674	2,369,154	1.6 %	7.84%	0	0	0.0 %	
Clinical Cooperative Groups – U10 Specials	0	3,900,000	3,900,000	0.0 %	0.13%	0	0	0.0 %	
Clinical Cooperative Groups – CCCT	0	5,283,157	5,283,157	0.0 %	0.17%	0	0	0.0 %	
Conference Grants – R13/U13	54	752,306	13,932	0.85%	0.02%	78	49	62.82%	
International Research Training Grants Conference – D43/U2R	0	1,415,900	1,415,900	0.0 %	0.05%	0	0	0.0 %	

*continued*

\* A grant award count of zero showing a dollar amount represents either administrative supplements to existing grants, which are not factored into the grant count but are factored into the average cost of an award, or co-funded grants, which are not factored into the grant count for the NCI but are factored into the average cost of an award.

Source: Office of Extramural Finance and Information Analysis.

**Table 13 (cont'd). Summary of NCI Grant Awards by Mechanism in FY2015\***

Fund Type: Appropriated Cost Centers Mechanisms	Awards Count	Awards Dollars	Average Cost	% of NCI Total Grants		Fiscal Year: 2015		
				Number	Dollars	Competing Requested	Competing Awarded	Success Rate
Cancer Education Awards – R25	85	28,025,961	329,717	1.33%	0.91%	30	13	43.33%
Research/Resource Grant – R24/U24/ U2C	34	59,846,454	1,760,190	0.53%	1.94%	31	13	41.94%
Pilot Research Project – SC2	1	157,000	157,000	0.02%	0.01%	1	1	100.0 %
<b>Subtotal Other Research</b>	<b>276</b>	<b>341,034,452</b>	<b>1,235,632</b>	<b>4.33%</b>	<b>11.07%</b>	<b>140</b>	<b>76</b>	<b>54.29%</b>
<b>Centers</b>								
Core/Planing – P20/P30	93	285,944,851	3,074,676	1.46%	9.28%	33	24	72.73%
Core – CCCT	0	2,727,585	2,727,585	0.0 %	0.09%	0	0	0.0 %
Spore Grants – P50	49	102,679,849	2,095,507	0.77%	3.33%	35	7	20.0 %
Other P50/P20	4	5,838,527	1,459,632	0.06%	0.19%	1	0	0.0 %
Specialized Center (Nanotechnology)	0	0	0	0.0 %	0.0 %	23	0	0.0 %
Specialized Center (Cooperative Agreement) – U54/U41	101	106,000,098	1,049,506	1.59%	3.44%	61	23	37.7 %
Specialized Center (Cooperative Agreement) – BD2K	2	5,604,815	2,802,408	0.03%	0.18%	0	0	0.0 %
<b>Subtotal Centers</b>	<b>249</b>	<b>508,795,725</b>	<b>2,043,356</b>	<b>3.91%</b>	<b>16.51%</b>	<b>153</b>	<b>54</b>	<b>35.29%</b>
<b>NRSA</b>								
NRSA Institution – T32/T35	137	48,089,092	351,015	2.15%	1.56%	70	29	41.43%
NRSA Fellowships – F31/F32	539	21,714,399	40,286	8.46%	0.7 %	687	188	27.37%
<b>Subtotal NRSA</b>	<b>676</b>	<b>69,803,491</b>	<b>103,260</b>	<b>10.61%</b>	<b>2.27%</b>	<b>757</b>	<b>217</b>	<b>28.67%</b>
<b>Careers</b>								
Mentored Clinical Scientist – K08	95	15,276,138	160,801	1.49%	0.5 %	72	18	25.0 %
Preventive Oncology Award – K07	66	9,866,299	149,489	1.04%	0.32%	67	17	25.37%
Mentored Career Award – K12	17	12,265,773	721,516	0.27%	0.4 %	8	4	50.0 %
Mentored Research Scientist Development Awards /Mentored Career Development Awards/Temin – K01/Intl. Career – K43	49	6,227,444	127,091	0.77%	0.2 %	31	9	29.03%
Clinical Research Track – K22	41	6,985,148	170,369	0.64%	0.23%	111	19	17.12%
Mentored Patient-Oriented Research Career Development Award – K23	27	4,479,483	165,907	0.42%	0.15%	22	3	13.64%
Mid-Career Investigator in Patient- Oriented Research Award – K24	17	2,689,074	158,181	0.27%	0.09%	9	4	44.44%
Mentored Quantitative Research Career Development Award – K25	11	1,665,577	151,416	0.17%	0.05%	10	0	0.0 %
Established Invest. Award in Cancer Prevention and Control – K05	14	1,448,094	103,435	0.22%	0.05%	8	2	25.0 %
Pathway to Independence – K99	64	7,918,241	123,723	1.0 %	0.26%	138	33	23.91%
<b>Subtotal Careers</b>	<b>401</b>	<b>68,821,271</b>	<b>171,624</b>	<b>6.3 %</b>	<b>2.23%</b>	<b>476</b>	<b>109</b>	<b>22.9 %</b>
<b>Total:</b>	<b>6,369</b>	<b>3,081,089,853</b>	<b>483,764</b>	<b>100.0 %</b>	<b>100.0 %</b>	<b>12,001</b>	<b>1,827</b>	<b>15.22%</b>

\* A grant award count of zero showing a dollar amount represents either administrative supplements to existing grants, which are not factored into the grant count but are factored into the average cost of an award, or co-funded grants, which are not factored into the grant count for the NCI but are factored into the average cost of an award.

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 FY2011 – FY2015**

Budget Mechanism/ Division	FY 2011		FY 2012		FY 2013		FY 2014		FY 2015		Percent Change 2011 - 2015	
	No.	Avg. Cost	No.	Avg. Cost								
<b>R01 Average Cost of Award</b>												
NCI Overall	3,648	365	3,526	374	3,306	358	3,085	378	2,949	398	-19.16%	9.04%
DCB	1,748	317	1,660	323	1,555	312	1,441	330	1,375	351	-21.3 %	10.9 %
DCP	258	400	245	421	226	389	201	434	199	442	-22.9 %	10.5 %
DCTD	1,141	343	1,139	355	1,078	342	1,041	362	1,014	390	-11.1 %	13.5 %
DCCPS	485	553	468	559	436	521	391	542	354	556	-27.0 %	0.4 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	16	901	14	924	11	1,221	11	1,343	7	1,703	-56.3 %	89.1 %
<b>P01 Average Cost of Award</b>												
NCI Overall	129	2,010	122	1,997	124	1,868	109	1,937	100	1,938	-22.48%	-3.58%
DCB	53	1,804	54	1,771	54	1,612	45	1,708	44	1,713	-17.0 %	-5.1 %
DCP	8	1,814	8	1,579	7	1,414	7	1,652	5	1,253	-37.5 %	-30.9 %
DCTD	58	2,164	49	2,194	53	2,063	48	2,018	42	2,165	-27.6 %	0.1 %
DCCPS	10	2,298	11	2,502	10	2,517	9	2,836	9	2,299	-10.0 %	0.0 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	638	0	306	0	155	0	343	0	572	0.0 %	-10.3 %
<b>R03 Average Cost of Award</b>												
NCI Overall	127	76	172	76	199	77	194	78	162	79	27.56%	3.95%
DCB	3	75	10	76	11	75	22	76	33	79	1,000.0 %	5.7 %
DCP	38	75	61	78	63	77	48	78	28	79	-26.3 %	5.1 %
DCTD	6	76	10	78	15	76	24	78	29	79	383.3 %	4.2 %
DCCPS	80	77	91	75	110	77	100	78	72	79	-10.0 %	3.4 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	0	0	0	0	0	0	0	0	68	0.0 %	100.0 %
<b>R21 Average Cost of Award</b>												
NCI Overall	442	200	439	197	441	188	551	187	639	193	44.57%	-3.5 %
DCB	79	181	80	187	90	185	138	188	196	193	148.1 %	6.6 %
DCP	51	183	54	188	54	181	44	172	55	188	7.8 %	2.6 %
DCTD	207	220	188	215	190	194	242	194	266	196	28.5 %	-11.0 %
DCCPS	80	178	89	176	78	179	93	174	93	185	16.3 %	3.9 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	25	205	28	186	29	195	34	182	29	208	16.0 %	1.5 %

continued

\*A grant award count of zero showing a dollar amount represents either administrative supplements to existing grants, which are not factored into the grant count but are factored into the average cost of an award, or co-funded grants, which are not factored into the grant count for the NCI but are factored into the average cost of an award.

†In thousands.

Source: Office of Extramural Finance and Information Analysis.

**Table 14 (cont'd). Average Total Cost\*† and Number of Research Project Grant Awards Sorted by Division, Office, Center, and Mechanism From FY2011 – FY2015**

Budget Mechanism/ Division	FY 2011		FY 2012		FY 2013		FY 2014		FY 2015		Percent Change 2011 - 2015	
	No.	Avg. Cost	No.	Avg. Cost								
<b>U01/U19 Average Cost of Award</b>												
NCI Overall	130	1,062	132	989	115	1,093	79	988	53	1,141	-59.23%	7.44%
DCB	29	721	28	714	28	665	1	1,065	6	753	-79.3 %	4.4 %
DCP	35	671	36	681	36	674	35	546	11	975	-68.6 %	45.5 %
DCTD	26	1,313	23	939	5	3,621	1	3,820	7	780	-73.1 %	-40.6 %
DCCPS	23	1,752	22	1,761	22	1,593	16	1,570	16	1,570	-30.4 %	-10.4 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	17	1,135	23	1,119	24	1,235	26	1,113	13	1,129	-23.5 %	-0.5 %
<b>R13 Average Cost of Award</b>												
NCI Overall	92	65	64	89	57	15	54	14	54	14	-41.3 %	-78.46%
DCB	35	4	22	6	24	5	22	6	29	4	-17.1 %	-0.3 %
DCP	9	15	5	19	6	18	3	34	6	17	-33.3 %	11.4 %
DCTD	16	11	14	14	15	8	18	6	11	10	-31.3 %	-3.3 %
DCCPS	17	14	11	21	7	19	8	21	5	26	-70.6 %	82.1 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	15	349	12	418	5	69	3	84	3	93	-80.0 %	-73.4 %
<b>U10 Average Cost of Award</b>												
NCI Overall	135	1,801	128	1,789	120	1,958	49	3,637	49	3,130	-63.7 %	73.79%
DCP	77	1,160	75	1,165	75	1,130	0	11,012	0	1,009	-100.0 %	-13.0 %
DCTD	58	2,653	53	2,671	45	3,337	49	3,412	49	3,110	-15.5 %	17.2 %
<b>P30 Average Cost of Award</b>												
NCI Overall	66	4,168	67	4,134	68	3,823	68	4,098	69	4,110	4.55%	-1.39%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	66	4,168	67	4,133	68	3,823	68	4,098	69	4,110	4.5 %	-1.4 %
<b>P50 Average Cost of Award</b>												
NCI Overall	74	1,979	69	2,010	66	1,895	61	2,012	53	2,046	-28.38%	3.39%
DCP	0	400	0	400	0	388	0	388	0	0	0.0 %	-100.0 %
DCTD	64	1,999	59	2,044	59	1,907	56	2,032	53	2,042	-17.2 %	2.1 %
DCCPS	10	1,739	10	1,686	7	1,651	5	1,676	0	0	-100.0 %	-100.0 %
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	701	0	813	0	600	0	138	0	220	0.0 %	-68.6 %

continued

\* A grant award count of zero showing a dollar amount represents either administrative supplements to existing grants, which are not factored into the grant count but are factored into the average cost of an award, or co-funded grants, which are not factored into the grant count for the NCI but are factored into the average cost of an award.

† In thousands.

Source: Office of Extramural Finance and Information Analysis.

**Table 14 (cont'd). Average Total Cost\*† and Number of Research Project Grant Awards Sorted by Division, Office, Center, and Mechanism From FY2011 – FY2015**

Budget Mechanism/ Division	FY 2011		FY 2012		FY 2013		FY 2014		FY 2015		Percent Change 2011 - 2015	
	No.	Avg. Cost	No.	Avg. Cost								
<b>SBIR Average Cost of Award</b>												
NCI Overall	123	587	151	422	132	444	171	391	162	479	31.71%	-18.4 %
CRCHD	0	83	0	0	0	0	0	0	0	0	0.0 %	-100.0 %
DCTD	0	0	0	0	0	0	0	66	0	0	0.0 %	0.0 %
DCCPS	0	32	0	0	0	0	0	0	0	77	0.0 %	140.6 %
SBIRDC	123	586	151	422	132	444	171	391	162	479	31.7 %	-18.4 %
<b>STTR Average Cost of Award</b>												
NCI Overall	21	562	39	350	27	469	46	325	32	469	52.38%	-16.55%
SBIRDC	21	562	39	350	27	469	46	325	32	469	52.4 %	-16.6 %
<b>U54 Average Cost of Award</b>												
NCI Overall	101	1,523	103	1,709	106	1,316	99	1,268	90	1,073	-10.89%	-29.55%
CRCHD	47	1,152	49	1,110	50	940	49	978	51	818	8.5 %	-28.9 %
CSSI	21	2,468	21	3,630	21	2,155	9	2,343	6	2,116	-71.4 %	-14.2 %
DCB	22	1,400	22	1,441	24	1,343	30	1,288	22	1,110	0.0 %	-20.7 %
DCCPS	11	1,551	11	1,244	11	1,365	11	1,626	11	1,611	0.0 %	3.9 %

\*A grant award count of zero showing a dollar amount represents either administrative supplements to existing grants, which are not factored into the grant count but are factored into the average cost of an award, or co-funded grants, which are not factored into the grant count for the NCI but are factored into the average cost of an award.

†In thousands.

Source: Office of Extramural Finance and Information Analysis.

**Table 15. NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars <sup>†</sup>	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Adrenal	<b>Number of Grants</b>	<b>6</b>	<b>6</b>	<b>3</b>	<b>3</b>	<b>2</b>	
	Relevant Grant Dollars	557,068	694,479	334,332	440,344	255,563	
	<b>Total Count</b>	<b>6</b>	<b>6</b>	<b>3</b>	<b>3</b>	<b>2</b>	
	Total Relevant Dollars	557,086	694,479	334,332	440,344	255,563	<b>-9.36</b>
Anus	<b>Number of Grants</b>	<b>16</b>	<b>18</b>	<b>19</b>	<b>19</b>	<b>17</b>	
	Relevant Grant Dollars	2,740,690	2,539,326	3,730,597	3,860,964	3,142,985	
	<b>Number of Contracts</b>	<b>3</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	446,435	‡	‡	‡	‡	
	<b>Total Count</b>	<b>19</b>	<b>18</b>	<b>19</b>	<b>19</b>	<b>17</b>	
Total Relevant Dollars	3,187,125	2,539,326	3,730,597	3,860,964	3,142,985	<b>2.87</b>	
Bladder	<b>Number of Grants</b>	<b>176</b>	<b>143</b>	<b>124</b>	<b>147</b>	<b>129</b>	
	Relevant Grant Dollars	15,777,763	18,493,415	15,767,632	23,221,839	23,038,302	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	‡	<b>3</b>	
	Relevant Contract Dollars	176,266	749,947	561,614	‡	2,845,018	
<b>Total Count</b>	<b>177</b>	<b>144</b>	<b>125</b>	<b>147</b>	<b>132</b>		
Total Relevant Dollars	15,954,029	19,243,362	16,329,246	23,221,839	25,883,320	<b>14.79</b>	
Bone Marrow	<b>Number of Grants</b>	<b>76</b>	<b>55</b>	<b>67</b>	<b>40</b>	<b>21</b>	
	Relevant Grant Dollars	17,343,897	8,938,608	8,109,194	6,186,065	5,101,356	
	<b>Total Count</b>	<b>76</b>	<b>55</b>	<b>67</b>	<b>40</b>	<b>21</b>	
Total Relevant Dollars	17,343,897	8,938,608	8,109,194	6,186,065	5,101,356	<b>-24.75</b>	
Bone, Cartilage	<b>Number of Grants</b>	<b>90</b>	<b>72</b>	<b>68</b>	<b>54</b>	<b>19</b>	
	Relevant Grant Dollars	14,539	10,824,238	7,034,582	4,313,783	2,011,240	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
<b>Total Count</b>	<b>90</b>	<b>72</b>	<b>68</b>	<b>54</b>	<b>19</b>		
Total Relevant Dollars	14,539,162	10,824,238	7,034,582	4,313,783	2,011,240	<b>-38.15</b>	
Brain	<b>Number of Grants</b>	<b>500</b>	<b>512</b>	<b>544</b>	<b>557</b>	<b>538</b>	
	Relevant Grant Dollars	143,786,108	148,032,345	152,082,930	162,133,244	184,919,655	
	<b>Number of Contracts</b>	<b>3</b>	<b>5</b>	<b>2</b>	<b>2</b>	<b>2</b>	
	Relevant Contract Dollars	698,895	672,916	1,639,630	422,895	968,489	
<b>Total Count</b>	<b>503</b>	<b>517</b>	<b>546</b>	<b>559</b>	<b>540</b>		
Total Relevant Dollars	144,485,003	148,705,261	153,722,560	162,556,139	185,888,144	<b>6.60</b>	
Breast	<b>Number of Grants</b>	<b>1,859</b>	<b>1,835</b>	<b>1,792</b>	<b>1,811</b>	<b>1,729</b>	
	Relevant Grant Dollars	552,999,395	536,444,140	501,581,607	478,792,611	491,214,544	
	<b>Number of Contracts</b>	<b>20</b>	<b>25</b>	<b>20</b>	<b>10</b>	<b>11</b>	
	Relevant Contract Dollars	9,370,644	12,810,843	11,117,661	5,422,635	9,929,929	
<b>Total Count</b>	<b>1,879</b>	<b>1,860</b>	<b>1,812</b>	<b>1,821</b>	<b>1,740</b>		
Total Relevant Dollars	562,370,039	549,254,983	512,699,268	483,879,269	501,144,473	<b>-2.76</b>	
Central Nervous System	<b>Number of Grants</b>	<b>35</b>	<b>51</b>	<b>59</b>	<b>48</b>	<b>13</b>	
	Relevant Grant Dollars	5,370,246	4,169,107	3,630,469	1,739,620	1,300,559	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
<b>Total Count</b>	<b>35</b>	<b>51</b>	<b>59</b>	<b>48</b>	<b>13</b>		
Total Relevant Dollars	5,770,246	4,169,107	3,630,469	1,739,620	1,300,559	<b>-29.50</b>	

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.

<sup>†</sup>Relevant Dollars = portion of the funded amount relevant to a specific site.

<sup>‡</sup>Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Cervix	<b>Number of Grants</b>	<b>295</b>	<b>298</b>	<b>283</b>	<b>305</b>	<b>227</b>	
	Relevant Grant Dollars	60,341,462	58,198,274	50,597,621	52,183,192	45,275,628	
	<b>Number of Contracts</b>	<b>4</b>	<b>3</b>	<b>1</b>	<b>1</b>	‡	
	Relevant Contract Dollars	4,729,585	3,366,401	2,280,313	740,476	‡	
	<b>Total Count</b>	<b>299</b>	<b>301</b>	<b>284</b>	<b>306</b>	<b>227</b>	
	Total Relevant Dollars	65,071,047	61,564,675	52,877,934	52,923,668	45,275,628	<b>-8.47</b>
Childhood Leukemia	<b>Number of Grants</b>	<b>157</b>	<b>178</b>	<b>151</b>	<b>159</b>	<b>143</b>	
	Relevant Grant Dollars	33,329,128	51,786,291	51,230,678	36,743,720	36,439,553	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>157</b>	<b>178</b>	<b>151</b>	<b>160</b>	<b>143</b>	
	Total Relevant Dollars	33,291,283	51,786,291	51,230,678	36,788,720	36,439,553	<b>6.34</b>
Colon, Rectum	<b>Number of Grants</b>	<b>951</b>	<b>937</b>	<b>916</b>	<b>866</b>	<b>754</b>	
	Relevant Grant Dollars	242,486,775	227,386,183	213,714,476	198,038,574	186,582,220	
	<b>Number of Contracts</b>	<b>11</b>	<b>14</b>	<b>9</b>	<b>6</b>	<b>9</b>	
	Relevant Contract Dollars	4,299,256	6,246,343	4,230,994	3,024,309	4,627,427	
	<b>Total Count</b>	<b>962</b>	<b>951</b>	<b>925</b>	<b>872</b>	<b>763</b>	
	Total Relevant Dollars	246,786,031	233,632,526	217,945,470	201,062,883	191,209,647	<b>-6.17</b>
Connective Tissue	<b>Number of Grants</b>	<b>56</b>	<b>44</b>	<b>21</b>	<b>13</b>	<b>9</b>	
	Relevant Grant Dollars	9,999,338	8,185,709	3,310,900	3,141,987	1,224,585	
	<b>Total Count</b>	<b>56</b>	<b>44</b>	<b>21</b>	<b>13</b>	<b>9</b>	
	Total Relevant Dollars	9,999,338	8,185,709	3,310,900	3,141,987	1,224,585	<b>-35.95</b>
Embryonic Tissue, Cells	<b>Number of Grants</b>	<b>8</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>2</b>	
	Relevant Grant Dollars	1,325,565	368,936	340,919	145,522	‡	
	<b>Total Count</b>	<b>8</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>2</b>	
	Total Relevant Dollars	1,325,565	368,936	340,919	145,522	‡	<b>-45.69</b>
Esophagus	<b>Number of Grants</b>	<b>118</b>	<b>147</b>	<b>175</b>	<b>117</b>	<b>116</b>	
	Relevant Grant Dollars	28,238,207	23,801,157	23,146,386	24,631,620	26,634,006	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>1</b>	‡	‡	
	Relevant Contract Dollars	20,000	229,905	12,726	‡	‡	
	<b>Total Count</b>	<b>119</b>	<b>149</b>	<b>176</b>	<b>117</b>	<b>116</b>	
	Total Relevant Dollars	28,258,207	24,031,062	23,159,112	24,631,620	26,634,006	<b>-1.02</b>
Eye	<b>Number of Grants</b>	<b>12</b>	<b>14</b>	<b>16</b>	<b>17</b>	<b>23</b>	
	Relevant Grant Dollars	2,161,882	2,008,983	2,362,025	2,855,615	4,363,108	
	<b>Total Count</b>	<b>12</b>	<b>14</b>	<b>16</b>	<b>17</b>	<b>23</b>	
	Total Relevant Dollars	2,161,882	2,008,983	2,362,025	2,855,615	4,363,108	<b>21.05</b>
Gall Bladder	<b>Number of Grants</b>	<b>16</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	
	Relevant Grant Dollars	199,485	156,086	146,805	‡	‡	
	<b>Total Count</b>	<b>16</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	
	Total Relevant Dollars	199,485	156,086	146,805	‡	‡	<b>-13.85</b>
Gastrointestinal Tract	<b>Number of Grants</b>	<b>48</b>	<b>50</b>	<b>45</b>	<b>35</b>	<b>33</b>	
	Relevant Grant Dollars	8,306,179	9,181,848	7,398,956	5,831,855	5,873,156	
	<b>Number of Contracts</b>	‡	‡	‡	‡	<b>2</b>	
	Relevant Contract Dollars	‡	‡	‡	‡	1,663,052	
	<b>Total Count</b>	<b>48</b>	<b>50</b>	<b>45</b>	<b>35</b>	<b>35</b>	
	Total Relevant Dollars	8,306,179	9,181,848	7,398,956	5,831,855	7,536,208	<b>-0.21</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Genital System, Female	<b>Number of Grants</b>	<b>19</b>	<b>38</b>	<b>43</b>	<b>74</b>	<b>14</b>	
	Relevant Grant Dollars	1,708,702	2,136,318	2,875,521	1,800,605	1,458,230	
	<b>Number of Contracts</b>	<b>1</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	187,496	‡	‡	‡	‡	
	<b>Total Count</b>	<b>20</b>	<b>38</b>	<b>43</b>	<b>74</b>	<b>14</b>	
	Total Relevant Dollars	1,896,198	2,136,318	2,875,521	1,800,605	1,458,230	<b>-2.28</b>
Genital System, Male	<b>Number of Grants</b>	<b>5</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>2</b>	
	Relevant Grant Dollars	334,581	350,827	237,891	241,644	233,577	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>5</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>2</b>	
	Total Relevant Dollars	334,581	350,827	237,891	241,644	233,577	<b>-7.27</b>
Head and Neck	<b>Number of Grants</b>	<b>201</b>	<b>217</b>	<b>248</b>	<b>226</b>	<b>205</b>	
	Relevant Grant Dollars	39,623,318	37,034,455	33,677,355	33,439,973	35,246,846	
	<b>Number of Contracts</b>	<b>3</b>	<b>7</b>	<b>5</b>	<b>3</b>	<b>3</b>	
	Relevant Contract Dollars	1,337,385	4,032,932	717,810	1,733,390	1,713,852	
	<b>Total Count</b>	<b>204</b>	<b>224</b>	<b>253</b>	<b>229</b>	<b>208</b>	
	Total Relevant Dollars	40,960,703	41,067,387	34,395,165	35,173,363	36,960,698	<b>-2.16</b>
Heart	<b>Number of Grants</b>	<b>16</b>	<b>12</b>	<b>10</b>	<b>7</b>	<b>3</b>	
	Relevant Grant Dollars	1,737,287	1,971,428	1,792,289	1,344,822	929,886	
	<b>Total Count</b>	<b>16</b>	<b>12</b>	<b>10</b>	<b>7</b>	<b>3</b>	
	Total Relevant Dollars	1,737,287	1,971,428	1,792,289	1,344,822	929,886	<b>-12.86</b>
Hodgkins Lymphoma	<b>Number of Grants</b>	<b>77</b>	<b>94</b>	<b>83</b>	<b>51</b>	<b>39</b>	
	Relevant Grant Dollars	8,994,562	9,649,890	9,563,149	10,262,763	8,519,854	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>77</b>	<b>94</b>	<b>83</b>	<b>51</b>	<b>39</b>	
	Total Relevant Dollars	8,994,562	9,649,890	9,563,149	10,262,763	8,519,854	<b>-0.82</b>
Kaposi Sarcoma	<b>Number of Grants</b>	<b>87</b>	<b>82</b>	<b>77</b>	<b>76</b>	<b>77</b>	
	Relevant Grant Dollars	20,205,869	19,241,042	18,354,076	20,860,705	21,864,767	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>87</b>	<b>82</b>	<b>77</b>	<b>76</b>	<b>77</b>	
	Total Relevant Dollars	20,205,869	19,241,042	18,354,076	20,860,705	21,864,767	<b>2.27</b>
Kidney	<b>Number of Grants</b>	<b>241</b>	<b>246</b>	<b>250</b>	<b>237</b>	<b>160</b>	
	Relevant Grant Dollars	29,194,089	32,449,153	31,320,199	21,146,275	23,745,801	
	<b>Number of Contracts</b>	<b>2</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	390,889	‡	‡	‡	‡	
	<b>Total Count</b>	<b>243</b>	<b>246</b>	<b>250</b>	<b>237</b>	<b>160</b>	
	Total Relevant Dollars	29,584,978	32,449,153	31,320,199	21,146,275	23,745,801	<b>-3.50</b>
Larynx	<b>Number of Grants</b>	<b>4</b>	<b>6</b>	<b>6</b>	<b>7</b>	<b>5</b>	
	Relevant Grant Dollars	203,215	464,533	1,259,413	1,535,331	671,024	
	<b>Total Count</b>	<b>4</b>	<b>6</b>	<b>6</b>	<b>7</b>	<b>5</b>	
	Total Relevant Dollars	203,215	464,533	1,259,413	1,535,331	671,024	<b>66.33</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Leukemia	<b>Number of Grants</b>	<b>683</b>	<b>724</b>	<b>755</b>	<b>781</b>	<b>702</b>	
	Relevant Grant Dollars	199,610,401	208,324,142	209,330,335	212,414,621	218,460,707	
	<b>Number of Contracts</b>	<b>4</b>	<b>2</b>	<b>7</b>	<b>4</b>	<b>5</b>	
	Relevant Contract Dollars	1,098,646	213,752	3,612,561	1,775,197	3,259,086	
	<b>Total Count</b>	<b>687</b>	<b>726</b>	<b>762</b>	<b>785</b>	<b>707</b>	
	Total Relevant Dollars	200,709,047	208,537,894	212,942,896	214,189,818	221,719,793	<b>2.53</b>
Liver	<b>Number of Grants</b>	<b>302</b>	<b>322</b>	<b>321</b>	<b>306</b>	<b>294</b>	
	Relevant Grant Dollars	54,071	52,508,097	48,910,887	49,666,458	59,175,493	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>8</b>	<b>‡</b>	<b>2</b>	
	Relevant Contract Dollars	299,353	115,700	4,653,688	‡	1,488,511	
	<b>Total Count</b>	<b>303</b>	<b>324</b>	<b>329</b>	<b>306</b>	<b>296</b>	
	Total Relevant Dollars	54,370,763	52,623,797	53,564,575	49,666,458	60,664,004	<b>3.36</b>
Lung	<b>Number of Grants</b>	<b>968</b>	<b>993</b>	<b>1,003</b>	<b>977</b>	<b>898</b>	
	Relevant Grant Dollars	260,155,893	268,028,541	243,708,636	219,322,515	220,913,549	
	<b>Number of Contracts</b>	<b>16</b>	<b>26</b>	<b>21</b>	<b>11</b>	<b>9</b>	
	Relevant Contract Dollars	4,919,129	12,146,630	11,323,702	6,163,921	5,231,560	
	<b>Total Count</b>	<b>984</b>	<b>1,019</b>	<b>1,024</b>	<b>988</b>	<b>907</b>	
	Total Relevant Dollars	265,075,022	280,175,171	255,032,338	225,486,436	226,145,109	<b>-3.64</b>
Lymph Node	<b>Number of Grants</b>	<b>13</b>	<b>9</b>	<b>9</b>	<b>4</b>	<b>4</b>	
	Relevant Grant Dollars	2,017,737	1,975,041	608,275	316,561	273,875	
	<b>Total Count</b>	<b>13</b>	<b>9</b>	<b>9</b>	<b>4</b>	<b>4</b>	
	Total Relevant Dollars	2,017,737	1,975,041	608,275	316,561	273,875	<b>-33.19</b>
Lymphatic System	<b>Number of Grants</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>5</b>	
	Relevant Grant Dollars	788,609	803,722	489,999	397,376	704,373	
	<b>Total Count</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>5</b>	
	Total Relevant Dollars	788,609	803,722	489,999	397,376	704,373	<b>5.31</b>
Melanoma	<b>Number of Grants</b>	<b>435</b>	<b>423</b>	<b>474</b>	<b>502</b>	<b>461</b>	
	Relevant Grant Dollars	96,537,993	99,713,846	101,678,996	106,822,745	114,263,178	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>‡</b>	<b>2</b>	
	Relevant Contract Dollars	50,000	1,349,977	1,764,768	‡	597,520	
	<b>Total Count</b>	<b>436</b>	<b>425</b>	<b>476</b>	<b>502</b>	<b>463</b>	
	Total Relevant Dollars	96,587,993	101,063,823	103,443,764	106,822,745	114,860,698	<b>4.44</b>
Mesothelioma	<b>Number of Grants</b>	<b>16</b>	<b>18</b>	<b>19</b>	<b>25</b>	<b>25</b>	
	Relevant Grant Dollars	3,457,493	4,863,814	4,452,535	7,157,480	5,376,051	
	<b>Total Count</b>	<b>16</b>	<b>18</b>	<b>19</b>	<b>25</b>	<b>25</b>	
	Total Relevant Dollars	3,457,493	4,863,814	4,452,535	7,157,480	5,376,051	<b>17.02</b>
Muscle	<b>Number of Grants</b>	<b>48</b>	<b>58</b>	<b>41</b>	<b>10</b>	<b>5</b>	
	Relevant Grant Dollars	8,018,193	6,914,232	3,361,305	862,759	384,442	
	<b>Total Count</b>	<b>48</b>	<b>58</b>	<b>41</b>	<b>10</b>	<b>3</b>	
	Total Relevant Dollars	8,018,193	6,914,232	3,361,305	862,759	384,442	<b>-48.73</b>
Myeloma	<b>Number of Grants</b>	<b>242</b>	<b>249</b>	<b>160</b>	<b>174</b>	<b>184</b>	
	Relevant Grant Dollars	48,195,056	52,667,345	37,120,602	37,800,248	40,799,287	
	<b>Number of Contracts</b>	<b>‡</b>	<b>1</b>	<b>‡</b>	<b>‡</b>	<b>‡</b>	
	Relevant Contract Dollars	‡	1,499,746	‡	‡	‡	
	<b>Total Count</b>	<b>242</b>	<b>250</b>	<b>160</b>	<b>174</b>	<b>184</b>	
	Total Relevant Dollars	48,195,056	54,167,091	37,120,602	37,800,248	40,799,287	<b>-2.33</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Nervous System	<b>Number of Grants</b>	<b>28</b>	<b>26</b>	<b>24</b>	<b>24</b>	<b>25</b>	
	Relevant Grant Dollars	6,787,090	6,438,816	4,163,832	4,421,874	6,108,596	
	<b>Number of Contracts</b>	<b>1</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	8,250	‡	‡	‡	‡	
	<b>Total Count</b>	<b>29</b>	<b>26</b>	<b>24</b>	<b>24</b>	<b>25</b>	
	Total Relevant Dollars	6,795,340	6,438,816	4,163,832	4,421,874	6,108,596	<b>0.94</b>
Neuroblastoma	<b>Number of Grants</b>	<b>98</b>	<b>105</b>	<b>99</b>	<b>104</b>	<b>75</b>	
	Relevant Grant Dollars	20,974,714	24,697,656	16,492,753	21,130,521	16,233,598	
	<b>Number of Contracts</b>	‡	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	299,993	‡	‡	‡	
	<b>Total Count</b>	<b>98</b>	<b>106</b>	<b>99</b>	<b>104</b>	<b>75</b>	
	Total Relevant Dollars	20,974,714	24,997,649	16,492,753	21,130,521	16,233,598	<b>-2.47</b>
Non-Hodgkins Lymphoma	<b>Number of Grants</b>	<b>472</b>	<b>473</b>	<b>480</b>	<b>452</b>	<b>413</b>	
	Relevant Grant Dollars	101,566,115	93,857,913	89,044,122	93,955,405	96,633,382	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	‡	‡	
	Relevant Contract Dollars	1,500,000	125,000	749,986	‡	‡	
	<b>Total Count</b>	<b>473</b>	<b>474</b>	<b>481</b>	<b>452</b>	<b>413</b>	
	Total Relevant Dollars	103,066,115	93,982,913	89,794,108	93,955,405	96,633,382	<b>-1.45</b>
Nose, Nasal Passages	<b>Number of Grants</b>	<b>8</b>	<b>10</b>	<b>10</b>	<b>9</b>	<b>8</b>	
	Relevant Grant Dollars	904,491	1,117,904	987,215	890,916	699,843	
	<b>Total Count</b>	<b>8</b>	<b>10</b>	<b>10</b>	<b>9</b>	<b>8</b>	
	Total Relevant Dollars	904,491	1,117,904	987,215	890,916	699,843	<b>-4.82</b>
Not Site Specific §	<b>Number of Grants</b>	<b>1,952</b>	<b>1,889</b>	<b>1,727</b>	<b>1,747</b>	<b>1,668</b>	
	Relevant Grant Dollars	573,631,342	572,734,563	495,343,572	621,155,734	580,506,330	
	<b>Number of Contracts</b>	<b>166</b>	<b>192</b>	<b>201</b>	<b>181</b>	<b>152</b>	
	Relevant Contract Dollars	192,657,199	187,026,369	205,498,650	212,411,501	442,411,300	
	<b>Total Count</b>	<b>2,118</b>	<b>2,081</b>	<b>1,928</b>	<b>1,928</b>	<b>1,820</b>	
	Total Relevant Dollars	766,288,541	759,760,932	700,842,222	833,567,235	1,022,917,630	<b>8.26</b>
Oral Cavity	<b>Number of Grants</b>	<b>49</b>	<b>59</b>	<b>66</b>	<b>66</b>	<b>66</b>	
	Relevant Grant Dollars	8,209,050	11,657,227	10,151,964	8,835,614	12,635,411	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>49</b>	<b>59</b>	<b>66</b>	<b>66</b>	<b>66</b>	
	Total Relevant Dollars	8,209,050	11,657,227	10,151,964	8,835,614	12,635,411	<b>14.78</b>
Ovary	<b>Number of Grants</b>	<b>413</b>	<b>385</b>	<b>384</b>	<b>380</b>	<b>382</b>	
	Relevant Grant Dollars	96,600,440	95,732,146	85,110,664	79,194,763	77,297,410	
	<b>Number of Contracts</b>	<b>6</b>	<b>7</b>	<b>5</b>	<b>2</b>	<b>5</b>	
	Relevant Contract Dollars	2,015,726	2,496,203	3,421,603	1,182,604	3,363,895	
	<b>Total Count</b>	<b>419</b>	<b>392</b>	<b>389</b>	<b>382</b>	<b>387</b>	
	Total Relevant Dollars	98,616,166	98,228,349	88,532,267	80,377,367	80,661,305	<b>-4.78</b>
Pancreas	<b>Number of Grants</b>	<b>417</b>	<b>421</b>	<b>465</b>	<b>494</b>	<b>499</b>	
	Relevant Grant Dollars	91,095,822	97,245,213	93,541,191	109,038,628	113,151,301	
	<b>Number of Contracts</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>4</b>	
	Relevant Contract Dollars	673,594	306,780	1,249,838	6,483,207	3,791,916	
	<b>Total Count</b>	<b>420</b>	<b>424</b>	<b>467</b>	<b>499</b>	<b>503</b>	
	Total Relevant Dollars	91,769,416	97,551,993	94,791,029	115,521,835	116,943,217	<b>6.64</b>

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.

§ 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. There is no cancer site focus; however, it is relevant to cancer research.)

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars <sup>†</sup>	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Parathyroid	<b>Number of Grants</b>	1	2	2	3	3	
	Relevant Grant Dollars	‡	216,587	199,513	401,380	391,973	
	<b>Total Count</b>	1	2	2	3	3	
	Total Relevant Dollars	‡	216,587	199,513	401,380	391,973	30.32
Penis	<b>Number of Grants</b>	6	6	6	8	6	
	Relevant Grant Dollars	2,249,216	2,424,675	2,435,008	2,652,760	191,911	
	<b>Total Count</b>	6	6	6	8	6	
	Total Relevant Dollars	2,249,216	2,424,675	2,435,008	2,652,760	191,911	-18.90
Pharynx	<b>Number of Grants</b>	18	74	63	25	21	
	Relevant Grant Dollars	1,692,375	3,427,507	4,442,944	1,881,045	2,704,917	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	18	74	63	25	21	
Total Relevant Dollars	1,692,375	3,427,507	4,442,944	1,881,045	2,704,917	29.57	
Pituitary	<b>Number of Grants</b>	7	5	6	4	5	
	Relevant Grant Dollars	1,032,440	695,788	649,567	458,773	821,132	
	<b>Total Count</b>	7	5	6	4	5	
	Total Relevant Dollars	1,032,440	695,788	649,567	458,773	821,132	2.59
Prostate	<b>Number of Grants</b>	960	968	923	866	774	
	Relevant Grant Dollars	254,592,786	231,897,860	223,571,212	187,129,390	198,462,848	
	<b>Number of Contracts</b>	13	10	12	5	9	
	Relevant Contract Dollars	5,670,388	3,076,292	6,244,033	6,350,291	6,069,471	
	<b>Total Count</b>	973	978	935	871	783	
Total Relevant Dollars	260,263,174	234,974,152	229,815,245	193,479,681	204,532,319	-5.50	
Reticuloendothelial System	<b>Number of Grants</b>	23	12	9	8	7	
	Relevant Grant Dollars	4,207,337	3,007,301	1,097,687	1,318,507	1,188,247	
	<b>Total Count</b>	23	12	9	8	7	
Total Relevant Dollars	4,207,337	3,007,301	1,097,687	1,318,507	1,188,247	-20.45	
Respiratory System	<b>Number of Grants</b>	5	4	‡	‡	‡	
	Relevant Grant Dollars	433,241	424,144	‡	‡	‡	
	<b>Total Count</b>	5	4	‡	‡	‡	
	Total Relevant Dollars	433,241	424,144	‡	‡	‡	-2.10
Retinoblastoma	<b>Number of Grants</b>	14	13	14	16	14	
	Relevant Grant Dollars	2,291,465	2,335,494	2,225,018	3,538,181	3,475,408	
	<b>Total Count</b>	14	13	14	16	12	
	Total Relevant Dollars	2,291,465	2,335,494	2,225,018	3,538,181	3,475,408	13.61
Salivary Glands	<b>Number of Grants</b>	2	3	3	2	1	
	Relevant Grant Dollars	122,931	582,113	515,075	45,316	‡	
	<b>Total Count</b>	2	3	3	2	1	
	Total Relevant Dollars	122,931	582,113	515,075	45,316	‡	90.27
Skin	<b>Number of Grants</b>	206	209	205	192	170	
	Relevant Grant Dollars	39,781,606	38,979,774	36,075,772	35,045,052	34,254,082	
	<b>Number of Contracts</b>	1	1	1	‡	1	
	Relevant Contract Dollars	999,000	299,993	608,798	‡	35,000	
	<b>Total Count</b>	207	210	206	192	171	
Total Relevant Dollars	40,780,606	39,279,767	36,684,570	35,045,052	34,289,082	-4.23	

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.

<sup>†</sup>Relevant Dollars = portion of the funded amount relevant to a specific site.

<sup>‡</sup>Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Small Intestine	<b>Number of Grants</b>	<b>21</b>	<b>22</b>	<b>19</b>	<b>13</b>	<b>10</b>	
	Relevant Grant Dollars	2,523,663	2,601,072	2,440,030	1,954,527	2,085,838	
	<b>Total Count</b>	<b>21</b>	<b>22</b>	<b>19</b>	<b>13</b>	<b>10</b>	
	Total Relevant Dollars	2,523,663	2,601,072	2,440,030	1,954,527	2,085,838	<b>-4.08</b>
Spleen	<b>Number of Grants</b>	<b>1</b>	‡	‡	<b>2</b>	<b>2</b>	
	Relevant Grant Dollars	41,226	‡	‡	136,258	141,998	
	<b>Total Count</b>	<b>1</b>	‡	‡	<b>2</b>	<b>2</b>	
	Total Relevant Dollars	41,226	‡	‡	136,258	141,998	<b>117.36</b>
Stomach	<b>Number of Grants</b>	<b>58</b>	<b>46</b>	<b>43</b>	<b>63</b>	<b>66</b>	
	Relevant Grant Dollars	9,227,080	8,068,624	8,064,193	8,597,660	9,547,109	
	<b>Number of Contracts</b>	‡	<b>2</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	85,605	‡	‡	‡	
	<b>Total Count</b>	<b>58</b>	<b>48</b>	<b>43</b>	<b>63</b>	<b>66</b>	
Total Relevant Dollars	9,227,080	8,154,229	8,064,193	8,597,660	9,547,109	<b>1.23</b>	
Testis	<b>Number of Grants</b>	<b>23</b>	<b>12</b>	<b>8</b>	<b>8</b>	<b>10</b>	
	Relevant Grant Dollars	2,966,075	3,825,536	3,850,005	3,880,838	3,143,451	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>23</b>	<b>12</b>	<b>8</b>	<b>8</b>	<b>10</b>	
Total Relevant Dollars	2,966,075	3,825,536	3,850,005	3,880,838	3,143,451	<b>2.85</b>	
Thymus	<b>Number of Grants</b>	<b>4</b>	<b>4</b>	<b>5</b>	<b>5</b>	<b>4</b>	
	Relevant Grant Dollars	504,940	615,252	609,747	449,070	239,742	
	<b>Total Count</b>	<b>4</b>	<b>4</b>	<b>5</b>	<b>5</b>	<b>4</b>	
	Total Relevant Dollars	504,940	615,252	609,747	449,070	239,742	<b>-13.00</b>
Thyroid	<b>Number of Grants</b>	<b>51</b>	<b>48</b>	<b>52</b>	<b>61</b>	<b>62</b>	
	Relevant Grant Dollars	10,394,218	10,082,148	14,641,877	17,516,816	19,137,599	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	95313	‡	‡	
	<b>Total Count</b>	<b>51</b>	<b>48</b>	<b>53</b>	<b>61</b>	<b>62</b>	
Total Relevant Dollars	10,394,218	10,082,148	14,737,190	17,516,816	19,137,599	<b>17.82</b>	
Trachea, Bronchus	<b>Number of Grants</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	
	Relevant Grant Dollars	927,176	707,722	523,065	279,944	26,998	
	<b>Total Count</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	
	Total Relevant Dollars	927,176	707,722	523,065	279,944	26,998	<b>-46.65</b>
Uterus	<b>Number of Grants</b>	<b>90</b>	<b>107</b>	<b>104</b>	<b>101</b>	<b>88</b>	
	Relevant Grant Dollars	13,617,358	16,911,090	15,653,222	13,467,035	10,947,265	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	142712	‡	‡	
	<b>Total Count</b>	<b>90</b>	<b>107</b>	<b>105</b>	<b>101</b>	<b>88</b>	
Total Relevant Dollars	13,617,358	16,911,090	15,795,934	13,467,035	10,947,265	<b>-3.97</b>	

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.

Source: Research Analysis and Evaluation Branch.

**Table 15 (cont'd). NCI Organ and Related Site-Specific Dollars for  
FY2011 – FY2015 – Annual Percent Change\***

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

Anatomical Site	Counts and Relevant Dollars <sup>†</sup>	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Vagina	<b>Number of Grants</b>	<b>5</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>4</b>	
	Relevant Grant Dollars	284,762	336,623	317,026	286,298	86,493	
	<b>Total Count</b>	<b>5</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>4</b>	
	Total Relevant Dollars	284,762	336,623	317,026	286,298	86,493	<b>-16.77</b>
Vascular	<b>Number of Grants</b>	<b>48</b>	<b>40</b>	<b>30</b>	<b>19</b>	<b>14</b>	
	Relevant Grant Dollars	11,108,479	7,523,998	3,990,351	2,310,811	1,745,884	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>48</b>	<b>40</b>	<b>30</b>	<b>19</b>	<b>14</b>	
	Total Relevant Dollars	11,108,479	7,523,998	3,990,351	2,310,811	1,745,884	<b>-36.44</b>
Wilms Tumor	<b>Number of Grants</b>	<b>17</b>	<b>14</b>	<b>7</b>	<b>9</b>	<b>10</b>	
	Relevant Grant Dollars	3,166,418	2,563,467	1,341,539	3,843,112	3,548,011	
	<b>Total Count</b>	<b>17</b>	<b>14</b>	<b>7</b>	<b>9</b>	<b>10</b>	
	Total Relevant Dollars	3,166,418	2,563,467	1,341,539	3,843,112	3,548,011	<b>28.02</b>

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.

<sup>†</sup>Relevant Dollars = portion of the funded amount relevant to a specific site.

<sup>‡</sup>Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

**Table 16. NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Adoptive Cell Immunotherapy	<b>Number of Grants</b>	<b>226</b>	<b>231</b>	<b>216</b>	<b>211</b>	<b>210</b>	
	Relevant Grant Dollars	68,415,543	64,459,206	55,186,231	52,024,707	45,245,708	
	<b>Number of Contracts</b>	<b>1</b>	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	247,568	‡	1,499,971	‡	‡	
	<b>Total Count</b>	<b>227</b>	<b>231</b>	<b>217</b>	<b>211</b>	<b>210</b>	
	Total Relevant Dollars	68,663,021	64,459,206	56,686,202	52,024,707	45,245,708	<b>-9.86</b>
Advanced Manufacturing Technology	<b>Number of Grants</b>	<b>13</b>	<b>10</b>	<b>7</b>	<b>8</b>	<b>9</b>	
	Relevant Grant Dollars	2,770,889	2,945,075	2,460,945	2,295,195	1,939,427	
	<b>Number of Contracts</b>	<b>‡</b>	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	498,626	‡	‡	‡	
	<b>Total Count</b>	<b>13</b>	<b>11</b>	<b>7</b>	<b>8</b>	<b>9</b>	
	Total Relevant Dollars	2,770,889	3,443,701	2,460,945	2,295,195	1,939,427	<b>-6.62</b>
Aging	<b>Number of Grants</b>	<b>854</b>	<b>689</b>	<b>577</b>	<b>420</b>	<b>319</b>	
	Relevant Grant Dollars	99,438,832	79,998,304	69,649,282	57,171,560	53,143,671	
	<b>Number of Contracts</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	631,073	82,113	27,250	31,046	230,807	
	Total Count	859	691	578	421	322	
	<b>Total Relevant Dollars</b>	<b>100,069,905</b>	<b>80,080,417</b>	<b>69,676,532</b>	<b>57,202,606</b>	<b>53,374,478</b>	<b>-14.39</b>
AIDS	<b>Number of Grants</b>	<b>65</b>	<b>60</b>	<b>45</b>	<b>35</b>	<b>27</b>	
	Relevant Grant Dollars	13,092,878	12,538,472	10,917,513	10,442,198	8,158,469	
	<b>Number of Contracts</b>	<b>‡</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>65</b>	<b>60</b>	<b>45</b>	<b>35</b>	<b>27</b>	
	Total Relevant Dollars	13,092,878	12,538,472	10,917,513	10,442,198	8,158,469	<b>-10.84</b>
Alternative Medicine, Direct	<b>Number of Grants</b>	<b>347</b>	<b>343</b>	<b>304</b>	<b>317</b>	<b>229</b>	
	Relevant Grant Dollars	83,106,708	73,033,996	57,639,318	52,792,542	47,270,448	
	<b>Number of Contracts</b>	<b>‡</b>	<b>3</b>	‡	<b>2</b>	<b>2</b>	
	Relevant Contract Dollars	‡	266,500	‡	3,552,516	4,201,607	
	<b>Total Count</b>	<b>347</b>	<b>346</b>	<b>304</b>	<b>319</b>	<b>231</b>	
	Total Relevant Dollars	83,106,708	73,300,496	57,639,318	56,345,058	51,472,055	<b>-11.01</b>
Alternative Medicine, Indirect	<b>Number of Grants</b>	<b>47</b>	<b>31</b>	<b>23</b>	<b>24</b>	<b>23</b>	
	Relevant Grant Dollars	8,363,143	6,981,196	4,798,508	4,098,399	3,769,298	
	<b>Total Count</b>	<b>47</b>	<b>31</b>	<b>23</b>	<b>24</b>	<b>23</b>	
	Total Relevant Dollars	8,363,143	6,981,196	4,798,508	4,098,399	3,769,298	<b>-17.60</b>
Alzheimers Dementia	<b>Number of Grants</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>3</b>	
	Relevant Grant Dollars	565,699	96,204	186,357	294,069	386,427	
	<b>Total Count</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>3</b>	
	Total Relevant Dollars	565,699	96,204	186,357	294,069	386,427	<b>24.98</b>
Arctic Research	<b>Number of Grants</b>	<b>3</b>	<b>5</b>	<b>7</b>	<b>8</b>	<b>5</b>	
	Relevant Grant Dollars	692,817	570,649	1,048,649	1,141,359	562,755	
	<b>Number of Contracts</b>	<b>‡</b>	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	471,532	‡	‡	‡	
	<b>Total Count</b>	<b>3</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>5</b>	
	Total Relevant Dollars	692,817	1,042,181	1,048,649	1,141,359	562,755	<b>2.30</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Arthritis	<b>Number of Grants</b>	5	7	6	6	4	
	Relevant Grant Dollars	396,477	1,066,691	881,952	864,304	672,293	
	<b>Total Count</b>	5	7	6	6	4	
	Total Relevant Dollars	396,477	1,066,691	881,952	864,304	672,293	31.88
Asbestos	<b>Number of Grants</b>	12	13	13	12	13	
	Relevant Grant Dollars	2,591,109	3,609,082	2,872,753	2,937,531	3,365,262	
	<b>Total Count</b>	12	13	13	12	13	
	Total Relevant Dollars	2,591,109	3,609,082	2,872,753	2,937,531	3,365,262	8.93
Ataxia Telangiectasia	<b>Number of Grants</b>	17	11	7	6	5	
	Relevant Grant Dollars	1,769,222	1,369,928	1,238,529	309,072	749,775	
	<b>Total Count</b>	17	11	7	6	5	
	Total Relevant Dollars	1,769,222	1,369,928	1,238,529	309,072	749,775	8.85
Autoimmune Diseases	<b>Number of Grants</b>	35	33	28	22	14	
	Relevant Grant Dollars	4,076,442	3,767,007	2,747,501	1,403,677	630,151	
	<b>Total Count</b>	35	33	28	22	14	
	Total Relevant Dollars	4,076,442	3,767,007	2,747,501	1,403,677	630,151	-34.67
Behavior Research	<b>Number of Grants</b>	1,098	1,106	1,093	1,032	920	
	Relevant Grant Dollars	322,649,017	328,483,291	288,411,741	239,765,778	222,068,908	
	<b>Number of Contracts</b>	12	18	19	5	9	
	Relevant Contract Dollars	7,177,481	7,750,198	11,278,961	30,189,200	8,316,984	
	<b>Total Count</b>	1,110	1,124	1,112	1,037	929	
	Total Relevant Dollars	329,826,498	336,233,489	299,690,702	242,784,698	230,385,892	-8.25
Bioengineering	<b>Number of Grants</b>	478	471	438	551	525	
	Relevant Grant Dollars	136,659,850	128,170,758	116,606,055	139,804,609	135,770,178	
	<b>Number of Contracts</b>	28	14	14	9	10	
	Relevant Contract Dollars	7,104,296	7,721,382	6,142,128	3,567,443	1,910,970	
	<b>Total Count</b>	506	485	452	560	535	
	Total Relevant Dollars	143,764,146	135,892,140	122,748,183	143,372,052	137,681,148	-0.57
Bioinformatics	<b>Number of Grants</b>	620	691	655	649	645	
	Relevant Grant Dollars	195,579,757	220,626,261	188,164,686	183,215,139	162,383,424	
	<b>Number of Contracts</b>	20	25	31	29	18	
	Relevant Contract Dollars	20,328,761	20,993,037	24,968,039	24,606,810	33,425,767	
	<b>Total Count</b>	640	716	686	678	663	
	Total Relevant Dollars	215,908,518	241,619,298	213,132,725	207,821,949	195,809,191	-2.03
Biological Carcinogenesis, Non-Viral	<b>Number of Grants</b>	68	75	77	78	83	
	Relevant Grant Dollars	14,509,921	15,387,505	14,300,282	15,804,902	18,764,027	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	68	75	77	78	83	
Total Relevant Dollars	14,509,921	15,387,505	14,300,282	15,804,902	18,764,027	7.05	
Biologics/Biological Response Modifiers	<b>Number of Grants</b>	1,668	1,484	1,353	1,188	1,031	
	Relevant Grant Dollars	603,303,533	530,129,682	477,320,267	289,423,470	271,992,850	
	<b>Number of Contracts</b>	15	10	10	5	7	
	Relevant Contract Dollars	16,939,205	10,691,980	9,671,661	5,894,582	28,016,244	
	<b>Total Count</b>	1,683	1,494	1,363	1,193	1,038	
Total Relevant Dollars	620,242,738	540,821,662	486,991,928	295,318,052	300,009,094	-15.13	

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Biomaterials Research	<b>Number of Grants</b>	<b>114</b>	<b>104</b>	<b>94</b>	<b>84</b>	<b>78</b>	
	Relevant Grant Dollars	17,519,246	15,414,009	12,137,705	14,254,502	13,939,654	
	<b>Number of Contracts</b>	‡	<b>2</b>	<b>3</b>	‡	‡	
	Relevant Contract Dollars	‡	1,186,186	797,035	‡	‡	
	<b>Total Count</b>	<b>114</b>	<b>106</b>	<b>97</b>	<b>84</b>	<b>78</b>	
	Total Relevant Dollars	17,519,246	16,600,195	12,934,740	14,254,502	13,939,654	<b>-4.83</b>
Biomedical Computing	<b>Number of Grants</b>	<b>542</b>	<b>596</b>	<b>588</b>	<b>595</b>	<b>617</b>	
	Relevant Grant Dollars	144,567,142	164,726,922	161,506,346	190,278,426	185,096,312	
	<b>Number of Contracts</b>	<b>30</b>	<b>31</b>	<b>35</b>	<b>24</b>	<b>23</b>	
	Relevant Contract Dollars	76,247,799	53,261,742	37,914,467	24,933,240	24,023,855	
	<b>Total Count</b>	<b>572</b>	<b>627</b>	<b>623</b>	<b>619</b>	<b>640</b>	
	Total Relevant Dollars	220,814,941	217,988,664	199,420,813	215,211,666	209,120,167	<b>-1.17</b>
Birth Defects	<b>Number of Grants</b>	<b>56</b>	<b>46</b>	<b>33</b>	<b>30</b>	<b>35</b>	
	Relevant Grant Dollars	10,773,700	8,086,859	5,021,213	4,403,949	8,435,172	
	<b>Total Count</b>	<b>56</b>	<b>46</b>	<b>33</b>	<b>30</b>	<b>35</b>	
	Total Relevant Dollars	10,773,700	8,086,859	5,021,213	4,403,949	8,435,172	<b>4.09</b>
Bone Marrow Transplantation	<b>Number of Grants</b>	<b>146</b>	<b>112</b>	<b>130</b>	<b>115</b>	<b>104</b>	
	Relevant Grant Dollars	50,005,537	37,328,235	39,871,538	35,750,541	34,316,819	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>146</b>	<b>112</b>	<b>130</b>	<b>115</b>	<b>104</b>	
	Total Relevant Dollars	50,005,537	37,328,235	39,871,538	35,750,541	34,316,819	<b>-8.22</b>
Breast Cancer Detection	<b>Number of Grants</b>	<b>458</b>	<b>441</b>	<b>411</b>	<b>385</b>	<b>344</b>	
	Relevant Grant Dollars	91,023,962	88,105,336	81,666,201	75,065,760	82,711,296	
	<b>Number of Contracts</b>	<b>15</b>	<b>12</b>	<b>4</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	6,478,783	5,863,578	3,543,475	1,100,000	750,000	
	<b>Total Count</b>	<b>473</b>	<b>453</b>	<b>415</b>	<b>386</b>	<b>345</b>	
	Total Relevant Dollars	97,502,745	93,968,914	85,209,676	76,165,760	83,461,296	<b>-3.49</b>
Breast Cancer Early Detection	<b>Number of Grants</b>	<b>196</b>	<b>197</b>	<b>180</b>	<b>180</b>	<b>189</b>	
	Relevant Grant Dollars	48,915,492	46,685,468	43,528,756	43,117,642	41,884,877	
	<b>Number of Contracts</b>	<b>4</b>	<b>6</b>	<b>2</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	2,561,486	3,764,617	2,295,819	1,100,000	750,000	
	<b>Total Count</b>	<b>200</b>	<b>203</b>	<b>182</b>	<b>181</b>	<b>190</b>	
	Total Relevant Dollars	51,476,978	50,450,085	45,824,575	44,217,642	42,634,877	<b>-4.56</b>
Breast Cancer Education	<b>Number of Grants</b>	<b>131</b>	<b>117</b>	<b>106</b>	<b>102</b>	<b>41</b>	
	Relevant Grant Dollars	16,114,826	13,390,623	9,550,272	4,699,015	4,270,107	
	<b>Total Count</b>	<b>131</b>	<b>117</b>	<b>106</b>	<b>102</b>	<b>41</b>	
	Total Relevant Dollars	16,114,826	13,390,623	9,550,272	4,699,015	4,270,107	<b>-26.38</b>
Breast Cancer Epidemiology	<b>Number of Grants</b>	<b>195</b>	<b>215</b>	<b>219</b>	<b>210</b>	<b>192</b>	
	Relevant Grant Dollars	67,767,559	79,021,942	74,082,885	65,139,979	55,393,919	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>6</b>	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	1,620,669	1,728,711	3,348,609	125,000	1,469,411	
	<b>Total Count</b>	<b>196</b>	<b>217</b>	<b>225</b>	<b>211</b>	<b>195</b>	
	Total Relevant Dollars	69,388,228	80,750,653	77,431,494	65,264,979	56,863,330	<b>-4.08</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for  
FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Breast Cancer Genetics	<b>Number of Grants</b>	<b>482</b>	<b>510</b>	<b>509</b>	<b>498</b>	<b>462</b>	
	Relevant Grant Dollars	116,790,479	130,302,574	116,592,352	107,994,765	96,024,839	
	<b>Number of Contracts</b>	<b>6</b>	<b>5</b>	<b>4</b>	‡	‡	
	Relevant Contract Dollars	2,277,691	2,143,190	2,739,232	‡	‡	
	<b>Total Count</b>	<b>488</b>	<b>515</b>	<b>513</b>	<b>498</b>	<b>462</b>	
	Total Relevant Dollars	119,068,170	132,445,764	119,331,584	107,994,765	96,024,839	<b>-4.81</b>
Breast Cancer Prevention	<b>Number of Grants</b>	<b>193</b>	<b>190</b>	<b>182</b>	<b>180</b>	<b>110</b>	
	Relevant Grant Dollars	19,425,993	18,454,078	18,639,346	16,628,036	18,681,211	
	<b>Number of Contracts</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	161,745	35,700	68,000	1,478,927	3,163,159	
	<b>Total Count</b>	<b>195</b>	<b>191</b>	<b>183</b>	<b>181</b>	<b>111</b>	
	Total Relevant Dollars	19,587,738	18,489,778	18,707,346	18,106,963	21,844,370	<b>3.25</b>
Breast Cancer Rehabilitation	<b>Number of Grants</b>	<b>180</b>	<b>169</b>	<b>160</b>	<b>130</b>	<b>92</b>	
	Relevant Grant Dollars	23,491,341	23,354,588	19,304,588	16,034,148	16,436,183	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	200,000	‡	‡	
	<b>Total Count</b>	<b>180</b>	<b>169</b>	<b>161</b>	<b>130</b>	<b>92</b>	
	Total Relevant Dollars	23,491,341	23,354,588	19,504,588	16,034,148	16,436,183	<b>-8.08</b>
Breast Cancer Screening	<b>Number of Grants</b>	<b>178</b>	<b>178</b>	<b>170</b>	<b>142</b>	<b>91</b>	
	Relevant Grant Dollars	24,098,034	26,090,155	24,889,715	20,751,155	17,485,192	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	1,599,992	1,400,000	1,300,000	1,100,000	750,000	
	<b>Total Count</b>	<b>179</b>	<b>179</b>	<b>171</b>	<b>143</b>	<b>92</b>	
	Total Relevant Dollars	25,698,026	27,490,155	26,189,715	21,851,155	18,235,192	<b>-7.71</b>
Breast Cancer Treatment	<b>Number of Grants</b>	<b>671</b>	<b>679</b>	<b>664</b>	<b>687</b>	<b>644</b>	
	Relevant Grant Dollars	182,244,051	151,868,982	142,815,791	138,560,818	152,387,067	
	<b>Number of Contracts</b>	<b>3</b>	<b>8</b>	<b>5</b>	<b>4</b>	<b>3</b>	
	Relevant Contract Dollars	461,244	4,169,128	2,525,833	2,065,223	892,527	
	<b>Total Count</b>	<b>674</b>	<b>687</b>	<b>669</b>	<b>691</b>	<b>647</b>	
	Total Relevant Dollars	182,705,295	156,038,110	145,341,624	140,626,041	153,279,594	<b>-3.92</b>
Breast Cancer – Basic	<b>Number of Grants</b>	<b>758</b>	<b>744</b>	<b>767</b>	<b>855</b>	<b>763</b>	
	Relevant Grant Dollars	168,911,481	175,587,977	164,833,399	167,569,592	165,644,820	
	<b>Number of Contracts</b>	<b>2</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>3</b>	
	Relevant Contract Dollars	648,203	1,013,726	1,431,744	653,485	3,654,832	
	<b>Total Count</b>	<b>760</b>	<b>749</b>	<b>770</b>	<b>858</b>	<b>766</b>	
	Total Relevant Dollars	169,559,684	176,601,703	166,265,143	168,223,077	169,299,652	<b>0.03</b>
Cancer Survivorship	<b>Number of Grants</b>	<b>669</b>	<b>669</b>	<b>628</b>	<b>568</b>	<b>476</b>	
	Relevant Grant Dollars	244,829,411	247,349,527	245,984,817	169,414,751	171,526,613	
	<b>Number of Contracts</b>	<b>11</b>	<b>13</b>	<b>15</b>	<b>1</b>	<b>7</b>	
	Relevant Contract Dollars	10,974,854	12,698,851	11,019,708	997,190	9,847,866	
	<b>Total Count</b>	<b>680</b>	<b>682</b>	<b>643</b>	<b>569</b>	<b>483</b>	
	Total Relevant Dollars	255,804,265	260,048,378	257,004,525	170,411,941	181,374,479	<b>-6.69</b>
Carcinogenesis, Environmental	<b>Number of Grants</b>	<b>1,237</b>	<b>1,163</b>	<b>1,116</b>	<b>1,041</b>	<b>943</b>	
	Relevant Grant Dollars	384,795,833	367,617,534	313,980,620	273,042,396	260,061,824	
	<b>Number of Contracts</b>	<b>9</b>	<b>13</b>	<b>17</b>	<b>11</b>	<b>9</b>	
	Relevant Contract Dollars	3,411,768	4,057,751	5,565,513	3,879,202	3,465,524	
	<b>Total Count</b>	<b>1,246</b>	<b>1,176</b>	<b>1,133</b>	<b>1,052</b>	<b>952</b>	
	Total Relevant Dollars	388,207,601	371,675,285	319,546,133	276,921,598	263,527,348	<b>-9.11</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Cervical Cancer Education	<b>Number of Grants</b>	<b>44</b>	<b>39</b>	<b>30</b>	<b>34</b>	<b>38</b>	
	Relevant Grant Dollars	6,289,116	6,569,930	4,529,757	6,077,658	6,221,573	
	<b>Total Count</b>	<b>44</b>	<b>39</b>	<b>30</b>	<b>34</b>	<b>38</b>	
	Total Relevant Dollars	6,289,116	6,569,930	4,529,757	6,077,658	6,221,573	<b>2.48</b>
Chemoprevention	<b>Number of Grants</b>	<b>513</b>	<b>521</b>	<b>490</b>	<b>429</b>	<b>342</b>	
	Relevant Grant Dollars	110,334,008	106,270,652	97,428,457	84,243,372	80,022,566	
	<b>Number of Contracts</b>	<b>9</b>	<b>9</b>	<b>6</b>	<b>6</b>	<b>11</b>	
	Relevant Contract Dollars	12,224,778	7,745,895	8,399,689	15,066,511	20,758,658	
	<b>Total Count</b>	<b>522</b>	<b>530</b>	<b>496</b>	<b>435</b>	<b>353</b>	
	Total Relevant Dollars	122,558,786	114,016,547	105,828,146	99,309,883	100,781,224	<b>-4.70</b>
Chemoprevention, Clinical	<b>Number of Grants</b>	<b>129</b>	<b>129</b>	<b>118</b>	<b>91</b>	<b>36</b>	
	Relevant Grant Dollars	30,974,445	26,207,896	24,973,361	14,722,116	12,015,435	
	<b>Number of Contracts</b>	<b>4</b>	<b>5</b>	‡	‡	‡	
	Relevant Contract Dollars	6,660,343	1,809,372	‡	‡	‡	
	<b>Total Count</b>	<b>133</b>	<b>134</b>	<b>118</b>	<b>91</b>	<b>36</b>	
Total Relevant Dollars	37,634,788	28,017,268	24,973,361	14,722,116	12,015,435	<b>-23.96</b>	
Chemotherapy	<b>Number of Grants</b>	<b>1,268</b>	<b>1,309</b>	<b>1,232</b>	<b>1,087</b>	<b>930</b>	
	Relevant Grant Dollars	487,783,247	483,927,715	439,082,427	250,373,415	246,109,305	
	<b>Number of Contracts</b>	<b>23</b>	<b>21</b>	<b>18</b>	<b>12</b>	<b>7</b>	
	Relevant Contract Dollars	15,509,777	15,400,076	10,450,686	9,970,324	5,413,456	
	<b>Total Count</b>	<b>1,291</b>	<b>1,330</b>	<b>1,250</b>	<b>1,099</b>	<b>937</b>	
Total Relevant Dollars	503,293,024	499,327,791	449,533,113	260,343,739	251,522,761	<b>-14.05</b>	
Child Health	<b>Number of Grants</b>	<b>146</b>	<b>132</b>	<b>123</b>	<b>122</b>	<b>102</b>	
	Relevant Grant Dollars	30,619,348	29,367,355	23,265,126	24,830,888	20,762,243	
	<b>Number of Contracts</b>	<b>1</b>	<b>3</b>	<b>5</b>	<b>2</b>	<b>3</b>	
	Relevant Contract Dollars	500,000	632,000	2,181,318	177,670	195,000	
	<b>Total Count</b>	<b>147</b>	<b>135</b>	<b>128</b>	<b>124</b>	<b>105</b>	
Total Relevant Dollars	31,119,348	29,999,355	25,446,444	25,008,558	20,957,243	<b>-9.17</b>	
Childhood Cancers	<b>Number of Grants</b>	<b>517</b>	<b>532</b>	<b>525</b>	<b>493</b>	<b>448</b>	
	Relevant Grant Dollars	165,281,278	177,934,130	155,945,246	173,785,934	178,242,101	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>2</b>	‡	
	Relevant Contract Dollars	2,791,925	2,999,993	4,212,177	3,007,558	‡	
	<b>Total Count</b>	<b>518</b>	<b>534</b>	<b>528</b>	<b>495</b>	<b>448</b>	
Total Relevant Dollars	168,073,203	180,934,123	160,157,423	176,793,492	178,242,101	<b>1.84</b>	
Chronic Myeloproliferative Disorders	<b>Number of Grants</b>	<b>143</b>	<b>143</b>	<b>143</b>	<b>132</b>	<b>113</b>	
	Relevant Grant Dollars	40,413,091	38,980,403	36,692,865	36,189,051	30,632,366	
	<b>Number of Contracts</b>	‡	‡	‡	‡	<b>1</b>	
	Relevant Contract Dollars	‡	‡	‡	‡	1,489,494	
	<b>Total Count</b>	<b>143</b>	<b>143</b>	<b>143</b>	<b>132</b>	<b>114</b>	
Total Relevant Dollars	40,413,091	38,980,403	36,692,865	36,189,051	32,121,860	<b>-5.50</b>	
Clinical Trials, Diagnosis	<b>Number of Grants</b>	<b>157</b>	<b>142</b>	<b>136</b>	<b>146</b>	<b>187</b>	
	Relevant Grant Dollars	50,104,212	38,090,132	30,815,744	45,889,734	53,037,657	
	<b>Number of Contracts</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>1</b>	‡	
	Relevant Contract Dollars	4,929,393	2,264,053	1,651,880	1,728,293	‡	
	<b>Total Count</b>	<b>160</b>	<b>144</b>	<b>139</b>	<b>147</b>	<b>187</b>	
Total Relevant Dollars	55,033,605	40,354,185	32,467,624	47,618,027	53,037,657	<b>2.95</b>	

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Clinical Trials, Other	<b>Number of Grants</b>	<b>220</b>	<b>241</b>	<b>115</b>	<b>279</b>	<b>250</b>	
	Relevant Grant Dollars	69,256,696	73,756,321	40,042,677	149,612,281	133,237,216	
	<b>Number of Contracts</b>	<b>4</b>	<b>8</b>	‡	<b>3</b>	<b>5</b>	
	Relevant Contract Dollars	5,627,105	4,870,009	‡	7,962,288	27,271,204	
	<b>Total Count</b>	<b>224</b>	<b>249</b>	<b>115</b>	<b>282</b>	<b>255</b>	
	Total Relevant Dollars	74,883,801	78,626,330	40,042,677	157,574,569	160,508,420	<b>63.82</b>
Clinical Trials, Prevention	<b>Number of Grants</b>	<b>227</b>	<b>140</b>	<b>115</b>	<b>114</b>	<b>119</b>	
	Relevant Grant Dollars	142,302,439	51,726,135	40,042,677	35,417,115	31,032,388	
	<b>Number of Contracts</b>	<b>6</b>	<b>8</b>	‡	<b>4</b>	<b>5</b>	
	Relevant Contract Dollars	11,401,878	2,682,866	‡	7,423,381	10,710,985	
	<b>Total Count</b>	<b>233</b>	<b>148</b>	<b>115</b>	<b>118</b>	<b>124</b>	
	Total Relevant Dollars	153,704,317	54,409,001	40,042,677	42,840,496	41,743,373	<b>-21.64</b>
Clinical Trials, Therapy	<b>Number of Grants</b>	<b>523</b>	<b>574</b>	<b>532</b>	<b>546</b>	<b>501</b>	
	Relevant Grant Dollars	321,816,935	326,779,192	323,103,308	315,511,818	334,042,999	
	<b>Number of Contracts</b>	<b>20</b>	<b>16</b>	<b>14</b>	<b>11</b>	<b>15</b>	
	Relevant Contract Dollars	57,748,533	38,008,573	22,662,279	18,485,764	60,380,409	
	<b>Total Count</b>	<b>543</b>	<b>590</b>	<b>546</b>	<b>557</b>	<b>516</b>	
	Total Relevant Dollars	379,565,468	364,787,765	345,765,587	333,997,582	394,423,408	<b>1.39</b>
Combined Treatment Modalities	<b>Number of Grants</b>	<b>769</b>	<b>922</b>	<b>1,022</b>	<b>1,056</b>	<b>1,084</b>	
	Relevant Grant Dollars	388,561,125	407,422,052	412,395,044	241,467,906	266,541,656	
	<b>Number of Contracts</b>	<b>7</b>	<b>8</b>	<b>8</b>	<b>6</b>	<b>7</b>	
	Relevant Contract Dollars	6,442,620	7,776,273	7,259,529	7,488,672	3,420,624	
	<b>Total Count</b>	<b>776</b>	<b>930</b>	<b>1,030</b>	<b>1,062</b>	<b>1,091</b>	
	Total Relevant Dollars	395,003,745	415,198,325	419,654,573	248,956,578	269,962,280	<b>-6.51</b>
Cost Effectiveness	<b>Number of Grants</b>	<b>177</b>	<b>181</b>	<b>155</b>	<b>139</b>	<b>131</b>	
	Relevant Grant Dollars	29,938,700	29,528,911	23,509,038	22,816,491	24,073,416	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	248,461	2,479,561	‡	‡	‡	
	<b>Total Count</b>	<b>178</b>	<b>182</b>	<b>155</b>	<b>139</b>	<b>131</b>	
	Total Relevant Dollars	30,187,161	32,008,472	23,509,038	22,816,491	24,073,416	<b>-4.48</b>
Diabetes	<b>Number of Grants</b>	<b>36</b>	<b>49</b>	<b>68</b>	<b>77</b>	<b>77</b>	
	Relevant Grant Dollars	4,851,425	7,823,131	9,846,534	8,622,303	10,029,759	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	207,952	‡	‡	
	<b>Total Count</b>	<b>36</b>	<b>49</b>	<b>69</b>	<b>77</b>	<b>77</b>	
	Total Relevant Dollars	4,851,425	7,823,131	10,054,486	8,622,303	10,029,759	<b>22.96</b>
Diagnosis	<b>Number of Grants</b>	<b>1,779</b>	<b>1,758</b>	<b>1,695</b>	<b>1,686</b>	<b>1,631</b>	
	Relevant Grant Dollars	559,531,772	538,315,913	492,426,013	529,392,958	539,541,884	
	<b>Number of Contracts</b>	<b>51</b>	<b>52</b>	<b>54</b>	<b>39</b>	<b>31</b>	
	Relevant Contract Dollars	24,273,760	32,848,866	40,112,891	30,979,563	49,265,219	
	<b>Total Count</b>	<b>1,830</b>	<b>1,810</b>	<b>1,749</b>	<b>1,725</b>	<b>1,662</b>	
	Total Relevant Dollars	583,805,532	571,164,779	532,538,904	560,372,521	588,807,103	<b>0.34</b>

continued

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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.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Diethylstilbestrol	<b>Number of Grants</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>2</b>	
	Relevant Grant Dollars	330,257	323,182	308,506	263,724	121,734	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>2</b>	
	Total Relevant Dollars	330,257	323,182	308,506	263,724	121,734	<b>-18.75</b>
Dioxin	<b>Number of Grants</b>	<b>13</b>	<b>9</b>	<b>8</b>	<b>7</b>	<b>9</b>	
	Relevant Grant Dollars	869,725	936,088	612,850	631,714	383,261	
	<b>Total Count</b>	<b>13</b>	<b>9</b>	<b>8</b>	<b>7</b>	<b>9</b>	
	Total Relevant Dollars	869,725	936,088	612,850	631,714	383,261	<b>-15.78</b>
DNA Repair	<b>Number of Grants</b>	<b>555</b>	<b>540</b>	<b>512</b>	<b>494</b>	<b>507</b>	
	Relevant Grant Dollars	122,952,777	111,276,907	102,121,375	99,797,181	100,671,223	
	<b>Number of Contracts</b>	‡	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	999,596	‡	‡	‡	
	<b>Total Count</b>	<b>555</b>	<b>541</b>	<b>512</b>	<b>494</b>	<b>507</b>	
	Total Relevant Dollars	122,952,777	112,276,503	102,121,375	99,797,181	100,671,223	<b>-4.78</b>
Drug Development	<b>Number of Grants</b>	<b>2,095</b>	<b>2,233</b>	<b>2,310</b>	<b>2,393</b>	<b>2,284</b>	
	Relevant Grant Dollars	582,044,480	593,685,849	583,484,075	604,291,255	617,108,394	
	<b>Number of Contracts</b>	<b>84</b>	<b>69</b>	<b>64</b>	<b>39</b>	<b>47</b>	
	Relevant Contract Dollars	44,439,383	58,367,271	43,062,404	36,749,532	84,307,830	
	<b>Total Count</b>	<b>2,179</b>	<b>2,302</b>	<b>2,374</b>	<b>2,432</b>	<b>2,331</b>	
	Total Relevant Dollars	626,483,863	652,053,120	626,546,479	641,040,787	701,416,224	<b>2.97</b>
Drug Discovery	<b>Number of Grants</b>	<b>380</b>	<b>426</b>	<b>423</b>	<b>432</b>	<b>422</b>	
	Relevant Grant Dollars	71,551,561	77,078,178	76,661,475	83,662,149	80,704,643	
	<b>Number of Contracts</b>	<b>11</b>	<b>7</b>	<b>14</b>	<b>3</b>	<b>4</b>	
	Relevant Contract Dollars	2,805,286	2,752,844	5,018,328	298,072	2,349,989	
	<b>Total Count</b>	<b>391</b>	<b>433</b>	<b>437</b>	<b>435</b>	<b>426</b>	
	Total Relevant Dollars	74,356,847	79,831,022	81,679,803	83,960,221	83,054,632	<b>2.84</b>
Drug Resistance	<b>Number of Grants</b>	<b>638</b>	<b>697</b>	<b>712</b>	<b>785</b>	<b>852</b>	
	Relevant Grant Dollars	126,166,864	137,912,021	133,575,885	148,056,783	177,796,465	
	<b>Number of Contracts</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	388,667	399,349	3,198,559	1,000,000	824,798	
	<b>Total Count</b>	<b>640</b>	<b>699</b>	<b>715</b>	<b>786</b>	<b>855</b>	
	Total Relevant Dollars	126,555,531	138,311,370	136,774,444	149,056,783	178,621,263	<b>9.24</b>
Drugs – Natural Products	<b>Number of Grants</b>	<b>603</b>	<b>577</b>	<b>556</b>	<b>490</b>	<b>371</b>	
	Relevant Grant Dollars	140,027,475	123,779,207	109,888,176	71,095,657	57,656,190	
	<b>Number of Contracts</b>	<b>5</b>	<b>2</b>	‡	‡	‡	
	Relevant Contract Dollars	1,298,440	396,938	‡	‡	‡	
	<b>Total Count</b>	<b>608</b>	<b>579</b>	<b>556</b>	<b>490</b>	<b>371</b>	
	Total Relevant Dollars	141,325,915	124,176,145	109,888,176	71,095,657	57,656,190	<b>-19.47</b>
Early Detection	<b>Number of Grants</b>	<b>799</b>	<b>788</b>	<b>755</b>	<b>748</b>	<b>714</b>	
	Relevant Grant Dollars	231,169,872	220,140,713	204,867,734	225,248,442	220,102,816	
	<b>Number of Contracts</b>	<b>10</b>	<b>17</b>	<b>14</b>	<b>9</b>	<b>14</b>	
	Relevant Contract Dollars	9,463,743	15,164,662	13,803,863	8,393,779	8,686,400	
	<b>Total Count</b>	<b>809</b>	<b>805</b>	<b>769</b>	<b>757</b>	<b>728</b>	
	Total Relevant Dollars	240,633,615	235,305,375	218,671,597	233,642,221	228,789,216	<b>-1.12</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Effectiveness Research	<b>Number of Grants</b>	<b>241</b>	<b>329</b>	<b>318</b>	<b>296</b>	<b>264</b>	
	Relevant Grant Dollars	88,645,132	95,620,963	90,764,479	80,220,580	69,440,936	
	<b>Number of Contracts</b>	<b>2</b>	<b>7</b>	<b>8</b>	<b>1</b>	<b>2</b>	
	Relevant Contract Dollars	303,094	5,463,193	12,172,772	10,500	4,377,973	
	<b>Total Count</b>	<b>243</b>	<b>336</b>	<b>326</b>	<b>297</b>	<b>266</b>	
	Total Relevant Dollars	88,948,226	101,084,156	102,937,251	80,231,080	73,818,909	<b>-3.64</b>
Endocrinology	<b>Number of Grants</b>	<b>669</b>	<b>619</b>	<b>572</b>	<b>539</b>	<b>512</b>	
	Relevant Grant Dollars	134,691,456	127,583,367	111,913,229	107,069,679	104,762,093	
	<b>Number of Contracts</b>	<b>2</b>	<b>4</b>	<b>1</b>	<b>1</b>	‡	
	Relevant Contract Dollars	365,780	813,140	1,307,520	1,478,552	‡	
	<b>Total Count</b>	<b>671</b>	<b>623</b>	<b>573</b>	<b>540</b>	<b>512</b>	
	Total Relevant Dollars	135,057,236	128,396,507	113,220,749	108,548,231	104,762,093	<b>-6.09</b>
Energy Balance	<b>Number of Grants</b>	<b>105</b>	<b>112</b>	<b>91</b>	<b>86</b>	<b>68</b>	
	Relevant Grant Dollars	33,474,016	32,621,115	27,758,787	23,971,943	20,847,429	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	31,250	‡	‡	
	<b>Total Count</b>	<b>105</b>	<b>112</b>	<b>92</b>	<b>86</b>	<b>68</b>	
	Total Relevant Dollars	33,474,016	32,621,115	27,790,037	23,971,943	20,847,429	<b>-11.25</b>
Epidemiology – Biochemical	<b>Number of Grants</b>	<b>513</b>	<b>525</b>	<b>516</b>	<b>495</b>	<b>457</b>	
	Relevant Grant Dollars	196,371,213	200,458,114	183,330,345	169,955,392	164,276,738	
	<b>Number of Contracts</b>	<b>10</b>	<b>10</b>	<b>4</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	27,302,955	32,063,034	12,320,111	2,160,252	1,716,430	
	<b>Total Count</b>	<b>523</b>	<b>535</b>	<b>520</b>	<b>496</b>	<b>458</b>	
	Total Relevant Dollars	223,674,168	232,521,148	195,650,456	172,115,644	165,993,168	<b>-6.87</b>
Epidemiology	<b>Number of Grants</b>	<b>248</b>	<b>257</b>	<b>245</b>	<b>233</b>	<b>210</b>	
	Relevant Grant Dollars	58,456,327	75,023,578	76,193,758	81,439,737	76,666,541	
	<b>Number of Contracts</b>	<b>9</b>	<b>19</b>	<b>42</b>	<b>33</b>	<b>27</b>	
	Relevant Contract Dollars	6,370,296	13,162,987	42,219,232	38,502,206	91,178,576	
	<b>Total Count</b>	<b>257</b>	<b>276</b>	<b>287</b>	<b>266</b>	<b>237</b>	
	Total Relevant Dollars	64,826,623	88,186,565	118,412,990	119,941,943	167,845,117	<b>27.88</b>
Epidemiology, Environmental	<b>Number of Grants</b>	<b>442</b>	<b>402</b>	<b>380</b>	<b>336</b>	<b>303</b>	
	Relevant Grant Dollars	158,195,340	146,924,987	117,386,653	107,915,202	93,061,131	
	<b>Number of Contracts</b>	<b>10</b>	<b>14</b>	<b>6</b>	<b>5</b>	<b>4</b>	
	Relevant Contract Dollars	22,833,401	27,082,561	13,262,667	3,754,701	3,257,460	
	<b>Total Count</b>	<b>452</b>	<b>416</b>	<b>386</b>	<b>341</b>	<b>307</b>	
	Total Relevant Dollars	181,028,741	174,007,548	130,649,320	111,669,903	96,318,591	<b>-14.26</b>
Epigenetics	<b>Number of Grants</b>	<b>859</b>	<b>893</b>	<b>901</b>	<b>943</b>	<b>917</b>	
	Relevant Grant Dollars	182,952,932	197,448,892	183,377,930	187,566,016	185,757,320	
	<b>Number of Contracts</b>	‡	<b>1</b>	<b>1</b>	‡	<b>1</b>	
	Relevant Contract Dollars	‡	80,000	80,000	‡	80,000	
	<b>Total Count</b>	<b>859</b>	<b>894</b>	<b>902</b>	<b>943</b>	<b>918</b>	
	Total Relevant Dollars	182,952,932	197,528,892	183,457,930	187,566,016	185,837,320	<b>0.54</b>
Gene Mapping, Human	<b>Number of Grants</b>	<b>402</b>	<b>349</b>	<b>283</b>	<b>237</b>	<b>197</b>	
	Relevant Grant Dollars	149,903,735	112,977,260	75,989,190	61,585,479	48,294,930	
	<b>Total Count</b>	<b>402</b>	<b>349</b>	<b>283</b>	<b>237</b>	<b>197</b>	
	Total Relevant Dollars	149,903,735	112,977,260	75,989,190	61,585,479	48,294,930	<b>-24.48</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Gene Mapping, Non-Human	<b>Number of Grants</b>	<b>215</b>	<b>183</b>	<b>157</b>	<b>130</b>	<b>82</b>	
	Relevant Grant Dollars	35,807,176	30,805,418	24,907,163	14,858,944	9,387,204	
	<b>Total Count</b>	<b>215</b>	<b>183</b>	<b>157</b>	<b>130</b>	<b>82</b>	
	Total Relevant Dollars	35,807,176	30,805,418	24,907,163	14,858,944	9,387,204	<b>-27.57</b>
Gene Transfer Clinical	<b>Number of Grants</b>	<b>33</b>	<b>28</b>	<b>23</b>	<b>22</b>	<b>20</b>	
	Relevant Grant Dollars	8,242,594	6,398,890	5,731,303	4,272,656	4,512,499	
	<b>Total Count</b>	<b>33</b>	<b>28</b>	<b>23</b>	<b>22</b>	<b>20</b>	
	Total Relevant Dollars	8,242,594	6,398,890	5,731,303	4,272,656	4,512,499	<b>-13.15</b>
Genetic Testing Research, Human	<b>Number of Grants</b>	<b>286</b>	<b>250</b>	<b>195</b>	<b>154</b>	<b>131</b>	
	Relevant Grant Dollars	97,622,451	78,970,309	60,583,797	42,299,385	38,489,954	
	<b>Number of Contracts</b>	<b>4</b>	<b>4</b>	‡	<b>1</b>	‡	
	Relevant Contract Dollars	1,531,022	2,838,423	‡	660,000	‡	
	<b>Total Count</b>	<b>290</b>	<b>254</b>	<b>195</b>	<b>155</b>	<b>131</b>	
Total Relevant Dollars	99,153,473	81,808,732	60,583,797	42,959,385	38,489,954	<b>-20.73</b>	
Genomics	<b>Number of Grants</b>	<b>936</b>	<b>1,090</b>	<b>1,113</b>	<b>1,182</b>	<b>1,203</b>	
	Relevant Grant Dollars	312,504,344	355,990,253	315,909,113	323,758,372	341,321,721	
	<b>Number of Contracts</b>	<b>10</b>	<b>9</b>	<b>8</b>	<b>2</b>	<b>9</b>	
	Relevant Contract Dollars	3,992,902	3,769,491	3,463,628	972,912	55,539,001	
	<b>Total Count</b>	<b>946</b>	<b>1,099</b>	<b>1,121</b>	<b>1,184</b>	<b>1,212</b>	
Total Relevant Dollars	316,497,246	359,759,744	319,372,741	324,731,284	396,860,722	<b>6.58</b>	
Health Literacy	<b>Number of Grants</b>	<b>104</b>	<b>107</b>	<b>106</b>	<b>98</b>	<b>100</b>	
	Relevant Grant Dollars	23,322,845	25,702,360	20,195,573	18,558,771	18,398,631	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	‡	‡	
	Relevant Contract Dollars	2,034,678	2,026,250	2,298,614	‡	‡	
	<b>Total Count</b>	<b>105</b>	<b>108</b>	<b>107</b>	<b>98</b>	<b>100</b>	
Total Relevant Dollars	25,357,523	27,728,610	22,494,187	18,558,771	18,398,631	<b>-6.97</b>	
Health Promotion	<b>Number of Grants</b>	<b>492</b>	<b>459</b>	<b>434</b>	<b>378</b>	<b>338</b>	
	Relevant Grant Dollars	158,653,454	152,900,603	125,530,387	107,111,437	92,700,255	
	<b>Number of Contracts</b>	<b>5</b>	<b>9</b>	<b>6</b>	<b>7</b>	<b>3</b>	
	Relevant Contract Dollars	4,853,740	5,078,162	7,193,454	4,712,166	1,673,149	
	<b>Total Count</b>	<b>497</b>	<b>468</b>	<b>440</b>	<b>385</b>	<b>341</b>	
Total Relevant Dollars	163,507,194	157,978,765	132,723,841	111,823,603	94,373,404	<b>-12.67</b>	
Health Care Delivery	<b>Number of Grants</b>	<b>361</b>	<b>370</b>	<b>360</b>	<b>398</b>	<b>378</b>	
	Relevant Grant Dollars	111,213,954	116,521,815	108,978,920	218,923,687	200,905,989	
	<b>Number of Contracts</b>	<b>10</b>	<b>12</b>	<b>14</b>	<b>3</b>	<b>5</b>	
	Relevant Contract Dollars	6,239,884	6,285,437	12,762,591	2,221,373	5,400,399	
	<b>Total Count</b>	<b>371</b>	<b>382</b>	<b>374</b>	<b>401</b>	<b>383</b>	
<b>Total Relevant Dollars</b>	<b>117,453,838</b>	<b>122,807,252</b>	<b>121,741,511</b>	<b>221,145,060</b>	<b>206,306,388</b>	<b>19.65</b>	
Helicobacter	<b>Number of Grants</b>	<b>33</b>	<b>32</b>	<b>31</b>	<b>29</b>	<b>29</b>	
	Relevant Grant Dollars	8,081,826	7,685,880	6,972,140	6,799,315	8,287,809	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>33</b>	<b>32</b>	<b>31</b>	<b>29</b>	<b>29</b>	
Total Relevant Dollars	8,081,826	7,685,880	6,972,140	6,799,315	8,287,809	<b>1.31</b>	

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Hematology	<b>Number of Grants</b>	<b>1,423</b>	<b>1,440</b>	<b>1,411</b>	<b>1,336</b>	<b>1,283</b>	
	Relevant Grant Dollars	464,441,339	454,740,603	428,144,424	432,281,168	443,608,933	
	<b>Number of Contracts</b>	<b>6</b>	<b>7</b>	<b>9</b>	<b>4</b>	<b>5</b>	
	Relevant Contract Dollars	2,797,458	3,100,209	5,851,583	1,775,197	3,259,086	
	<b>Total Count</b>	<b>1,429</b>	<b>1,447</b>	<b>1,420</b>	<b>1,340</b>	<b>1,288</b>	
	Total Relevant Dollars	467,238,797	457,840,812	433,996,007	434,056,365	446,868,019	<b>-1.06</b>
Hematopoietic Stem Cell Research	<b>Number of Grants</b>	<b>465</b>	<b>449</b>	<b>431</b>	<b>397</b>	<b>306</b>	
	Relevant Grant Dollars	122,611,326	105,983,734	101,488,276	87,079,722	88,073,334	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>465</b>	<b>449</b>	<b>431</b>	<b>397</b>	<b>306</b>	
	Total Relevant Dollars	122,611,326	105,983,734	101,488,276	87,079,722	88,073,334	<b>-7.71</b>
Hormone Replacement Therapy	<b>Number of Grants</b>	<b>31</b>	<b>23</b>	<b>21</b>	<b>17</b>	<b>10</b>	
	Relevant Grant Dollars	3,987,675	2,695,611	2,396,798	1,621,562	420,973	
	<b>Total Count</b>	<b>31</b>	<b>23</b>	<b>21</b>	<b>17</b>	<b>10</b>	
	Total Relevant Dollars	3,987,675	2,695,611	2,396,798	1,621,562	420,973	<b>-37.47</b>
Hospice	<b>Number of Grants</b>	<b>33</b>	<b>34</b>	<b>31</b>	<b>26</b>	<b>21</b>	
	Relevant Grant Dollars	8,276,000	7,183,290	5,960,311	6,718,944	5,068,406	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>33</b>	<b>34</b>	<b>31</b>	<b>26</b>	<b>21</b>	
	Total Relevant Dollars	8,276,000	7,183,290	5,960,311	6,718,944	5,068,406	<b>-10.52</b>
Human Genome	<b>Number of Grants</b>	<b>631</b>	<b>762</b>	<b>831</b>	<b>889</b>	<b>893</b>	
	Relevant Grant Dollars	262,277,096	303,194,306	285,048,104	288,232,403	270,053,324	
	<b>Number of Contracts</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>2</b>	‡	
	Relevant Contract Dollars	1,398,722	1,744,057	2,922,371	972,912	‡	
	<b>Total Count</b>	<b>633</b>	<b>766</b>	<b>837</b>	<b>891</b>	<b>893</b>	
	Total Relevant Dollars	263,675,818	304,938,363	287,970,475	289,205,315	270,053,324	<b>0.97</b>
Iatrogenesis	<b>Number of Grants</b>	<b>247</b>	<b>264</b>	<b>240</b>	<b>255</b>	<b>234</b>	
	Relevant Grant Dollars	62,271,326	70,740,383	63,359,024	62,665,069	65,666,762	
	<b>Number of Contracts</b>	<b>3</b>	<b>4</b>	<b>15</b>	<b>16</b>	<b>9</b>	
	Relevant Contract Dollars	487,983	1,406,258	9,252,324	11,590,700	7,954,033	
	<b>Total Count</b>	<b>250</b>	<b>268</b>	<b>255</b>	<b>271</b>	<b>243</b>	
	Total Relevant Dollars	62,759,309	72,146,641	72,611,348	74,255,769	73,620,795	<b>4.25</b>
Imaging	<b>Number of Grants</b>	<b>1012</b>	<b>1,014</b>	<b>977</b>	<b>1,020</b>	<b>1,004</b>	
	Relevant Grant Dollars	309,142,019	287,214,478	262,826,270	303,333,609	328,599,329	
	<b>Number of Contracts</b>	<b>20</b>	<b>14</b>	<b>18</b>	<b>15</b>	<b>3</b>	
	Relevant Contract Dollars	7,316,896	7,351,691	13,479,943	9,601,975	22,477,850	
	<b>Total Count</b>	<b>1032</b>	<b>1,028</b>	<b>995</b>	<b>1,035</b>	<b>1,007</b>	
	Total Relevant Dollars	316,458,915	294,566,169	276,306,213	312,935,584	351,077,179	<b>3.08</b>
Immunization	<b>Number of Grants</b>	<b>449</b>	<b>469</b>	<b>443</b>	<b>432</b>	<b>411</b>	
	Relevant Grant Dollars	122,814,703	127,780,151	108,339,472	104,548,325	102,651,388	
	<b>Number of Contracts</b>	<b>4</b>	<b>1</b>	<b>5</b>	<b>4</b>	<b>7</b>	
	Relevant Contract Dollars	3,429,651	1,996,084	8,810,556	4,894,582	28,016,244	
	<b>Total Count</b>	<b>453</b>	<b>470</b>	<b>448</b>	<b>436</b>	<b>418</b>	
	Total Relevant Dollars	126,244,354	129,776,235	117,150,028	109,442,907	130,667,632	<b>1.47</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Inflammation	<b>Number of Grants</b>	<b>467</b>	<b>532</b>	<b>594</b>	<b>611</b>	<b>580</b>	
	Relevant Grant Dollars	99,553,973	113,039,549	107,278,269	109,966,955	112,167,081	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	<b>3</b>	<b>3</b>	
	Relevant Contract Dollars	‡	‡	318,141	3,652,516	14,497,899	
	<b>Total Count</b>	<b>467</b>	<b>532</b>	<b>595</b>	<b>614</b>	<b>583</b>	
	Total Relevant Dollars	99,553,973	113,039,549	107,596,410	113,619,471	126,664,980	<b>6.45</b>
Information Dissemination	<b>Number of Grants</b>	<b>835</b>	<b>787</b>	<b>755</b>	<b>739</b>	<b>681</b>	
	Relevant Grant Dollars	237,305,178	247,159,725	224,368,430	217,876,571	210,348,487	
	<b>Number of Contracts</b>	<b>36</b>	<b>56</b>	<b>22</b>	<b>8</b>	<b>10</b>	
	Relevant Contract Dollars	70,246,091	76,556,706	19,915,843	14,567,395	3,998,692	
	<b>Total Count</b>	<b>871</b>	<b>843</b>	<b>777</b>	<b>747</b>	<b>691</b>	
	Total Relevant Dollars	307,551,269	323,716,431	244,284,273	232,443,966	214,347,179	<b>-7.97</b>
Metastasis	<b>Number of Grants</b>	<b>1,534</b>	<b>1,543</b>	<b>1,550</b>	<b>1,545</b>	<b>1,604</b>	
	Relevant Grant Dollars	381,229,457	370,139,067	339,242,680	340,009,556	358,876,606	
	<b>Number of Contracts</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>3</b>	<b>4</b>	
	Relevant Contract Dollars	1,024,332	3,434,990	2,322,483	961,421	1,108,062	
	<b>Total Count</b>	<b>1,540</b>	<b>1,549</b>	<b>1,556</b>	<b>1,548</b>	<b>1,608</b>	
	Total Relevant Dollars	382,253,789	373,574,057	341,565,163	340,970,977	359,984,668	<b>-1.35</b>
Mind/Body Research	<b>Number of Grants</b>	<b>83</b>	<b>83</b>	<b>78</b>	<b>59</b>	<b>52</b>	
	Relevant Grant Dollars	16,149,064	18,436,251	13,881,407	11,783,092	10,026,196	
	<b>Number of Contracts</b>	‡	<b>2</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	89,759	‡	‡	‡	
	<b>Total Count</b>	<b>83</b>	<b>85</b>	<b>78</b>	<b>59</b>	<b>52</b>	
	Total Relevant Dollars	16,149,064	18,526,010	13,881,407	11,783,092	10,026,196	<b>-10.09</b>
Molecular Disease	<b>Number of Grants</b>	<b>4,879</b>	<b>4,945</b>	<b>5,158</b>	<b>5,466</b>	<b>5,602</b>	
	Relevant Grant Dollars	1,660,747,605	1,646,243,216	1,611,962,239	1,679,313,384	1,782,526,277	
	<b>Number of Contracts</b>	<b>35</b>	<b>34</b>	<b>49</b>	<b>45</b>	<b>41</b>	
	Relevant Contract Dollars	14,337,338	19,893,543	30,025,697	30,765,834	79,018,098	
	<b>Total Count</b>	<b>4,914</b>	<b>4,979</b>	<b>5,207</b>	<b>5,511</b>	<b>5,643</b>	
	Total Relevant Dollars	1,675,084,943	1,666,136,759	1,641,987,936	1,710,079,218	1,861,544,375	<b>2.75</b>
Molecular Imaging	<b>Number of Grants</b>	<b>701</b>	<b>724</b>	<b>672</b>	<b>620</b>	<b>609</b>	
	Relevant Grant Dollars	181,500,075	184,280,121	160,435,399	152,907,543	156,307,861	
	<b>Number of Contracts</b>	<b>15</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>1</b>	
	Relevant Contract Dollars	5,602,005	798,078	2,940,739	1,942,675	118,783	
	<b>Total Count</b>	<b>716</b>	<b>728</b>	<b>677</b>	<b>623</b>	<b>610</b>	
	Total Relevant Dollars	187,102,080	185,078,199	163,376,138	154,850,218	156,426,644	<b>-4.25</b>
Molecular Targeted Prevention	<b>Number of Grants</b>	<b>248</b>	<b>269</b>	<b>260</b>	<b>232</b>	<b>208</b>	
	Relevant Grant Dollars	47,765,297	47,214,496	48,209,422	44,556,081	46,590,174	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	
	Relevant Contract Dollars	248,461	212,500	1,647,216	2,979,162	790,790	
	<b>Total Count</b>	<b>249</b>	<b>271</b>	<b>262</b>	<b>234</b>	<b>209</b>	
	Total Relevant Dollars	48,013,758	47,426,996	49,856,638	47,535,243	47,380,964	<b>-0.26</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Molecular Targeted Therapy	<b>Number of Grants</b>	<b>1,577</b>	<b>1,775</b>	<b>1,888</b>	<b>2,044</b>	<b>2,148</b>	
	Relevant Grant Dollars	442,319,529	475,531,951	470,992,018	523,857,998	581,779,389	
	<b>Number of Contracts</b>	<b>18</b>	<b>18</b>	<b>12</b>	<b>12</b>	<b>16</b>	
	Relevant Contract Dollars	7,588,080	12,174,642	8,499,344	8,863,954	53,873,784	
	<b>Total Count</b>	<b>1,595</b>	<b>1,793</b>	<b>1,900</b>	<b>2,056</b>	<b>2,164</b>	
	Total Relevant Dollars	449,907,609	487,706,593	479,491,362	532,721,952	635,653,173	<b>9.28</b>
Nanotechnology	<b>Number of Grants</b>	<b>444</b>	<b>480</b>	<b>476</b>	<b>455</b>	<b>481</b>	
	Relevant Grant Dollars	119,336,493	121,450,044	109,920,780	111,516,643	106,197,770	
	<b>Number of Contracts</b>	<b>11</b>	<b>14</b>	<b>6</b>	<b>5</b>	<b>9</b>	
	Relevant Contract Dollars	5,161,598	7,104,793	2,045,407	5,326,115	56,177,120	
	<b>Total Count</b>	<b>455</b>	<b>494</b>	<b>482</b>	<b>460</b>	<b>490</b>	
	Total Relevant Dollars	124,498,091	128,554,837	111,966,187	116,842,758	162,374,890	<b>8.41</b>
Neurofibromatosis	<b>Number of Grants</b>	<b>15</b>	<b>15</b>	<b>11</b>	<b>8</b>	<b>10</b>	
	Relevant Grant Dollars	2,915,817	2,745,637	1,584,767	1,376,362	3,686,798	
	<b>Total Count</b>	<b>15</b>	<b>15</b>	<b>11</b>	<b>8</b>	<b>10</b>	
	Total Relevant Dollars	2,915,817	2,745,637	1,584,767	1,376,362	3,686,798	<b>26.65</b>
Nursing Research	<b>Number of Grants</b>	<b>49</b>	<b>45</b>	<b>37</b>	<b>35</b>	<b>36</b>	
	Relevant Grant Dollars	11,599,142	11,366,624	9,407,781	8,475,918	8,132,143	
	<b>Total Count</b>	<b>49</b>	<b>45</b>	<b>37</b>	<b>35</b>	<b>36</b>	
	Total Relevant Dollars	11,599,142	11,366,624	9,407,781	8,475,918	8,132,143	<b>-8.30</b>
Nutrition – Fiber	<b>Number of Grants</b>	<b>19</b>	<b>13</b>	<b>10</b>	<b>7</b>	<b>7</b>	
	Relevant Grant Dollars	3,019,322	1,881,369	1,147,521	1,084,354	1,214,524	
	<b>Number of Contracts</b>	‡	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	56,250	‡	‡	‡	
	<b>Total Count</b>	<b>19</b>	<b>14</b>	<b>10</b>	<b>7</b>	<b>7</b>	
	Total Relevant Dollars	3,019,322	1,937,619	1,147,521	1,084,354	1,214,524	<b>-17.53</b>
Nutrition	<b>Number of Grants</b>	<b>779</b>	<b>735</b>	<b>698</b>	<b>638</b>	<b>513</b>	
	Relevant Grant Dollars	201,597,394	176,394,674	152,339,204	131,807,340	117,756,071	
	<b>Number of Contracts</b>	<b>5</b>	<b>19</b>	<b>9</b>	<b>9</b>	<b>10</b>	
	Relevant Contract Dollars	9,069,226	12,900,479	11,924,668	4,372,361	4,220,813	
	<b>Total Count</b>	<b>784</b>	<b>754</b>	<b>707</b>	<b>647</b>	<b>523</b>	
	Total Relevant Dollars	210,666,620	189,295,153	164,263,872	136,179,701	121,976,884	<b>-12.72</b>
Nutrition Monitoring	<b>Number of Grants</b>	<b>42</b>	<b>36</b>	<b>30</b>	<b>30</b>	<b>33</b>	
	Relevant Grant Dollars	15,194,549	9,995,060	10,354,902	8,955,163	9,882,676	
	<b>Number of Contracts</b>	‡	<b>7</b>	<b>2</b>	<b>3</b>	<b>1</b>	
	Relevant Contract Dollars	‡	1,107,515	1,277,146	2,210,544	323,154	
	<b>Total Count</b>	<b>42</b>	<b>43</b>	<b>32</b>	<b>33</b>	<b>34</b>	
	Total Relevant Dollars	15,194,549	11,102,575	11,632,048	11,165,707	10,205,830	<b>-8.69</b>
Obesity	<b>Number of Grants</b>	<b>251</b>	<b>258</b>	<b>283</b>	<b>290</b>	<b>281</b>	
	Relevant Grant Dollars	58,308,346	63,008,280	62,423,989	63,637,392	64,004,183	
	<b>Number of Contracts</b>	<b>3</b>	<b>4</b>	‡	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	689,394	1,012,349	‡	1,478,927	3,323,159	
	<b>Total Count</b>	<b>254</b>	<b>262</b>	<b>283</b>	<b>291</b>	<b>284</b>	
	Total Relevant Dollars	59,006,740	64,020,629	62,423,989	65,116,319	67,327,342	<b>3.42</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Occupational Cancer	<b>Number of Grants</b>	<b>49</b>	<b>42</b>	<b>36</b>	<b>27</b>	<b>30</b>	
	Relevant Grant Dollars	8,727,377	7,737,704	6,712,701	6,625,987	6,560,117	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>49</b>	<b>42</b>	<b>36</b>	<b>27</b>	<b>30</b>	
	Total Relevant Dollars	8,727,377	7,737,704	6,712,701	6,625,987	6,560,117	<b>-6.72</b>
Oncogenes	<b>Number of Grants</b>	<b>1,934</b>	<b>1,883</b>	<b>1,828</b>	<b>1,784</b>	<b>1,693</b>	
	Relevant Grant Dollars	498,144,267	473,323,034	413,130,527	404,601,468	402,124,198	
	<b>Number of Contracts</b>	<b>5</b>	<b>8</b>	<b>6</b>	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	1,072,456	2,534,277	5,307,498	111,706	1,510,068	
	<b>Total Count</b>	<b>1,939</b>	<b>1,891</b>	<b>1,834</b>	<b>1,785</b>	<b>1,696</b>	
	Total Relevant Dollars	499,216,723	475,857,311	418,438,025	404,713,174	403,634,266	<b>-5.07</b>
Organ Transplant Research	<b>Number of Grants</b>	<b>194</b>	<b>164</b>	<b>175</b>	<b>151</b>	<b>132</b>	
	Relevant Grant Dollars	67,155,158	49,923,229	55,542,375	48,657,932	45,618,921	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>194</b>	<b>164</b>	<b>175</b>	<b>151</b>	<b>132</b>	
	Total Relevant Dollars	67,155,158	49,923,229	55,542,375	48,657,932	45,618,921	<b>-8.26</b>
Osteoporosis	<b>Number of Grants</b>	<b>6</b>	<b>6</b>	<b>5</b>	<b>7</b>	<b>6</b>	
	Relevant Grant Dollars	317,668	925,324	722,771	1,471,815	1,557,646	
	<b>Total Count</b>	<b>6</b>	<b>6</b>	<b>5</b>	<b>7</b>	<b>6</b>	
	Total Relevant Dollars	317,668	925,324	722,771	1,471,815	1,557,646	<b>69.72</b>
Pain	<b>Number of Grants</b>	<b>152</b>	<b>154</b>	<b>159</b>	<b>132</b>	<b>75</b>	
	Relevant Grant Dollars	16,300,996	18,155,638	17,703,099	12,405,393	9,313,288	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	‡	100,000	‡	‡	
	<b>Total Count</b>	<b>152</b>	<b>154</b>	<b>160</b>	<b>132</b>	<b>75</b>	
	Total Relevant Dollars	16,300,996	18,155,638	17,803,099	12,405,393	9,313,288	<b>-11.45</b>
Palliative Care	<b>Number of Grants</b>	<b>153</b>	<b>153</b>	<b>152</b>	<b>129</b>	<b>68</b>	
	Relevant Grant Dollars	21,247,383	21,916,672	18,689,924	15,149,837	10,957,597	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	‡	
	Relevant Contract Dollars	52,655	21,000	53,991	10,500	‡	
	<b>Total Count</b>	<b>154</b>	<b>154</b>	<b>153</b>	<b>130</b>	<b>68</b>	
	Total Relevant Dollars	21,300,038	21,937,672	18,743,915	15,160,337	10,957,597	<b>-14.60</b>
Pap Testing	<b>Number of Grants</b>	<b>105</b>	<b>111</b>	<b>98</b>	<b>81</b>	<b>34</b>	
	Relevant Grant Dollars	11,695,680	11,312,785	10,168,380	5,542,465	4,772,033	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>105</b>	<b>111</b>	<b>98</b>	<b>81</b>	<b>34</b>	
	Total Relevant Dollars	11,695,680	11,312,785	10,168,380	5,542,465	4,772,033	<b>-18.19</b>
Pediatric Research	<b>Number of Grants</b>	<b>581</b>	<b>636</b>	<b>681</b>	<b>623</b>	<b>583</b>	
	Relevant Grant Dollars	146,844,741	179,363,922	193,100,899	209,529,822	216,588,476	
	<b>Number of Contracts</b>	<b>2</b>	<b>5</b>	<b>8</b>	<b>4</b>	<b>3</b>	
	Relevant Contract Dollars	3,291,925	3,631,993	6,488,808	3,185,228	195,000	
	<b>Total Count</b>	<b>583</b>	<b>641</b>	<b>689</b>	<b>627</b>	<b>586</b>	
	Total Relevant Dollars	150,136,666	182,995,915	199,589,707	212,715,050	216,783,476	<b>9.86</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Personalized Health Care	<b>Number of Grants</b>	<b>638</b>	<b>685</b>	<b>661</b>	<b>664</b>	<b>635</b>	
	Relevant Grant Dollars	180,445,101	184,951,025	164,974,350	155,335,886	153,442,074	
	<b>Number of Contracts</b>	<b>17</b>	<b>20</b>	<b>12</b>	<b>1</b>	<b>3</b>	
	Relevant Contract Dollars	32,351,821	37,283,739	8,158,581	224,999	25,437,656	
	<b>Total Count</b>	<b>655</b>	<b>705</b>	<b>673</b>	<b>665</b>	<b>638</b>	
	Total Relevant Dollars	212,796,922	222,234,764	173,132,931	155,560,885	178,879,730	<b>-3.20</b>
Pesticides	<b>Number of Grants</b>	<b>13</b>	<b>10</b>	<b>4</b>	<b>1</b>	<b>4</b>	
	Relevant Grant Dollars	471,294	460,087	59,725	‡	610,640	
	<b>Number of Contracts</b>	<b>‡</b>	<b>‡</b>	<b>‡</b>	<b>‡</b>	<b>‡</b>	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>13</b>	<b>10</b>	<b>4</b>	<b>1</b>	<b>4</b>	
	Total Relevant Dollars	471,294	460,087	59,725	‡‡	610,640	<b>277.67</b>
Pharmacogenetics	<b>Number of Grants</b>	<b>276</b>	<b>266</b>	<b>248</b>	<b>226</b>	<b>183</b>	
	Relevant Grant Dollars	52,795,552	54,346,257	49,570,728	41,541,959	37,555,190	
	<b>Number of Contracts</b>	<b>1</b>	<b>2</b>	<b>‡</b>	<b>‡</b>	<b>‡</b>	
	Relevant Contract Dollars	193,637	670,000	‡	‡	‡	
	<b>Total Count</b>	<b>277</b>	<b>268</b>	<b>248</b>	<b>226</b>	<b>183</b>	
	Total Relevant Dollars	52,989,189	55,016,257	49,570,728	41,541,959	37,555,190	<b>-7.96</b>
Prevention	<b>Number of Grants</b>	<b>1,220</b>	<b>1,235</b>	<b>1,240</b>	<b>1,221</b>	<b>1,067</b>	
	Relevant Grant Dollars	332,988,470	338,729,425	324,824,552	366,837,607	339,430,238	
	<b>Number of Contracts</b>	<b>23</b>	<b>35</b>	<b>27</b>	<b>23</b>	<b>33</b>	
	Relevant Contract Dollars	30,211,780	25,780,603	30,875,471	32,958,496	51,922,887	
	<b>Total Count</b>	<b>1,243</b>	<b>1,270</b>	<b>1,267</b>	<b>1,244</b>	<b>1,100</b>	
	Total Relevant Dollars	363,200,250	364,510,028	355,700,023	399,796,103	391,353,125	<b>2.05</b>
Proteomics	<b>Number of Grants</b>	<b>648</b>	<b>718</b>	<b>700</b>	<b>680</b>	<b>664</b>	
	Relevant Grant Dollars	128,504,517	143,749,069	133,187,112	132,200,036	134,218,056	
	<b>Number of Contracts</b>	<b>12</b>	<b>8</b>	<b>14</b>	<b>3</b>	<b>3</b>	
	Relevant Contract Dollars	2,364,169	3,506,652	5,364,611	465,439	534,814,62	
	<b>Total Count</b>	<b>660</b>	<b>726</b>	<b>714</b>	<b>683</b>	<b>667</b>	
	Total Relevant Dollars	130,868,686	147,255,721	138,551,723	132,665,475	187,699,518	<b>10.96</b>
Radiation, Electromagnetic Fields	<b>Number of Grants</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>3</b>	
	Relevant Grant Dollars	274,880	208,400	195,214	207,149	1,015,296	
	<b>Total Count</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>3</b>	
	Total Relevant Dollars	274,880	208,400	195,214	207,149	1,015,296	<b>91.43</b>
Radiation, Ionizing	<b>Number of Grants</b>	<b>118</b>	<b>109</b>	<b>99</b>	<b>91</b>	<b>87</b>	
	Relevant Grant Dollars	22,587,580	20,437,132	15,415,636	13,527,344	16,375,603	
	<b>Number of Contracts</b>	<b>‡</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	‡	91,808	95,313	209,449	291,030	
	<b>Total Count</b>	<b>118</b>	<b>110</b>	<b>100</b>	<b>92</b>	<b>88</b>	
	Total Relevant Dollars	22,587,580	20,528,940	15,510,949	13,736,793	16,666,633	<b>-5.92</b>
Radiation, Ionizing Diagnosis	<b>Number of Grants</b>	<b>288</b>	<b>297</b>	<b>291</b>	<b>301</b>	<b>292</b>	
	Relevant Grant Dollars	83,355,570	78,440,948	69,835,784	67,671,200	71,896,359	
	<b>Number of Contracts</b>	<b>6</b>	<b>4</b>	<b>6</b>	<b>3</b>	<b>1</b>	
	Relevant Contract Dollars	3,682,723	2,664,706	4,565,381	4,153,185	750,000	
	<b>Total Count</b>	<b>294</b>	<b>301</b>	<b>297</b>	<b>304</b>	<b>293</b>	
	Total Relevant Dollars	86,038,293	81,105,654	74,401,165	71,824,385	72,646,359	<b>-4.07</b>

continued

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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.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Radiation, Ionizing Radiotherapy	<b>Number of Grants</b>	<b>594</b>	<b>595</b>	<b>578</b>	<b>510</b>	<b>459</b>	
	Relevant Grant Dollars	215,668,304	178,645,894	168,829,680	105,995,072	113,662,465	
	<b>Number of Contracts</b>	<b>6</b>	<b>6</b>	<b>14</b>	<b>1</b>	<b>14</b>	
	Relevant Contract Dollars	852,523	1,860,053	7,299,204	1,499,978	5,521,043	
	<b>Total Count</b>	<b>600</b>	<b>601</b>	<b>592</b>	<b>511</b>	<b>473</b>	
	Total Relevant Dollars	216,520,827	180,505,947	176,128,884	107,495,050	119,183,508	<b>-11.78</b>
Radiation, Low-Level Ionizing	<b>Number of Grants</b>	<b>15</b>	<b>11</b>	<b>8</b>	<b>7</b>	<b>5</b>	
	Relevant Grant Dollars	2,684,415	2,790,815	1,703,359	760,210	489,579	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>15</b>	<b>11</b>	<b>8</b>	<b>7</b>	<b>5</b>	
	Total Relevant Dollars	2,684,415	2,790,815	1,703,359	760,210	489,579	<b>-31.49</b>
Radiation, Magnetic Resonance Imaging	<b>Number of Grants</b>	<b>311</b>	<b>316</b>	<b>302</b>	<b>322</b>	<b>339</b>	
	Relevant Grant Dollars	72,516,747	66,373,621	71,059,404	83,520,731	91,673,750	
	<b>Number of Contracts</b>	<b>3</b>	<b>4</b>	<b>3</b>	‡	‡	
	Relevant Contract Dollars	810,966	1,649,709	813,452	‡	‡	
	<b>Total Count</b>	<b>314</b>	<b>320</b>	<b>305</b>	<b>322</b>	<b>339</b>	
	Total Relevant Dollars	73,327,713	68,023,330	71,872,856	83,520,731	91,673,750	<b>6.09</b>
Radiation, Mammography	<b>Number of Grants</b>	<b>186</b>	<b>183</b>	<b>173</b>	<b>153</b>	<b>95</b>	
	Relevant Grant Dollars	30,249,026	29,124,083	27,564,637	23,148,908	20,990,452	
	<b>Number of Contracts</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	1,845,486	1,400,000	1,300,000	1,100,000	750,000	
	<b>Total Count</b>	<b>188</b>	<b>184</b>	<b>174</b>	<b>154</b>	<b>96</b>	
	Total Relevant Dollars	32,094,512	30,524,083	28,864,637	24,248,908	21,740,452	<b>-9.16</b>
Radiation, Non-Ionizing	<b>Number of Grants</b>	<b>160</b>	<b>149</b>	<b>129</b>	<b>130</b>	<b>129</b>	
	Relevant Grant Dollars	26,910,915	25,283,118	21,566,717	24,739,055	25,836,973	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	‡	‡	<b>1</b>	
	Relevant Contract Dollars	999,000	137,350	‡	‡	35,000	
	<b>Total Count</b>	<b>161</b>	<b>150</b>	<b>129</b>	<b>130</b>	<b>130</b>	
	Total Relevant Dollars	27,909,915	25,420,468	21,566,717	24,739,055	25,871,973	<b>-1.20</b>
Radiation, Non-Ionizing Diagnosis	<b>Number of Grants</b>	<b>467</b>	<b>491</b>	<b>469</b>	<b>474</b>	<b>470</b>	
	Relevant Grant Dollars	131,948,820	126,670,584	114,249,805	130,723,063	134,607,297	
	<b>Number of Contracts</b>	<b>5</b>	<b>6</b>	<b>6</b>	<b>3</b>	‡	
	Relevant Contract Dollars	1,260,269	2,735,231	4,045,191	679,250	‡	
	<b>Total Count</b>	<b>472</b>	<b>497</b>	<b>475</b>	<b>477</b>	<b>470</b>	
	Total Relevant Dollars	133,209,089	129,405,815	118,294,996	131,402,313	134,607,297	<b>0.52</b>
Radiation, Non-Ionizing Radiotherapy	<b>Number of Grants</b>	<b>190</b>	<b>187</b>	<b>187</b>	<b>193</b>	<b>190</b>	
	Relevant Grant Dollars	48,439,155	45,869,628	42,314,931	51,128,011	53,934,953	
	<b>Number of Contracts</b>	‡	<b>1</b>	<b>2</b>	<b>5</b>	<b>2</b>	
	Relevant Contract Dollars	‡	1,499,896	1,573,324	1,044,592	1,798,842	
	<b>Total Count</b>	<b>190</b>	<b>188</b>	<b>189</b>	<b>198</b>	<b>192</b>	
	Total Relevant Dollars	48,439,155	47,369,524	43,888,255	52,172,603	55,733,795	<b>4.03</b>

continued

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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.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for  
FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Radiation, UV	<b>Number of Grants</b>	<b>144</b>	<b>133</b>	<b>121</b>	<b>114</b>	<b>98</b>	
	Relevant Grant Dollars	24,555,465	23,909,838	20,530,426	22,589,958	18,726,175	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	‡	‡	<b>1</b>	
	Relevant Contract Dollars	‡	137,350	‡	‡	35,000	
	<b>Total Count</b>	<b>145</b>	<b>134</b>	<b>121</b>	<b>114</b>	<b>99</b>	
	Total Relevant Dollars	25,554,465	24,047,188	20,530,426	22,589,958	18,761,175	<b>-6.86</b>
Radon	<b>Number of Grants</b>	<b>3</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>4</b>	
	Relevant Grant Dollars	326,441	490,407	399,608	417,728	422,972	
	<b>Total Count</b>	<b>3</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>4</b>	
	Total Relevant Dollars	326,441	490,407	399,608	417,728	422,972	<b>9.38</b>
Rare Diseases	<b>Number of Grants</b>	<b>119</b>	<b>100</b>	<b>73</b>	<b>62</b>	<b>61</b>	
	Relevant Grant Dollars	23,592,946	18,712,924	12,159,075	10,866,928	14,081,488	
	<b>Number of Contracts</b>	‡	‡	<b>1</b>	<b>1</b>	‡	
	Relevant Contract Dollars	‡	‡	74,592	312,912	‡	
	<b>Total Count</b>	<b>119</b>	<b>100</b>	<b>74</b>	<b>63</b>	<b>61</b>	
	Total Relevant Dollars	23,592,946	18,712,924	12,233,667	11,179,840	14,081,488	<b>-9.49</b>
Rehabilitation	<b>Number of Grants</b>	<b>230</b>	<b>234</b>	<b>229</b>	<b>210</b>	<b>168</b>	
	Relevant Grant Dollars	40,748,671	45,308,533	40,076,940	47,474,572	51,747,174	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>2</b>	<b>1</b>	
	Relevant Contract Dollars	52,655	21,000	475,141	1,007,690	149,925	
	<b>Total Count</b>	<b>231</b>	<b>235</b>	<b>233</b>	<b>212</b>	<b>169</b>	
	Total Relevant Dollars	40,801,326	45,329,533	40,552,081	48,482,262	51,897,099	<b>6.78</b>
Rural Populations	<b>Number of Grants</b>	<b>103</b>	<b>100</b>	<b>91</b>	<b>118</b>	<b>103</b>	
	Relevant Grant Dollars	34,658,560	31,874,931	28,293,909	51,131,320	45,918,623	
	<b>Number of Contracts</b>	<b>10</b>	<b>8</b>	‡	‡	‡	
	Relevant Contract Dollars	8,535,867	7,269,316	‡	‡	‡	
	<b>Total Count</b>	<b>113</b>	<b>108</b>	<b>91</b>	<b>118</b>	<b>103</b>	
	Total Relevant Dollars	43,194,427	39,144,247	28,293,909	51,131,320	45,918,623	<b>8.35</b>
Sexually Transmitted Diseases	<b>Number of Grants</b>	<b>185</b>	<b>175</b>	<b>154</b>	<b>130</b>	<b>69</b>	
	Relevant Grant Dollars	29,789,110	28,189,148	21,439,368	17,283,985	12,192,170	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	3,836,717	870,317	‡	‡	‡	
	<b>Total Count</b>	<b>186</b>	<b>176</b>	<b>154</b>	<b>130</b>	<b>69</b>	
	Total Relevant Dollars	33,625,827	29,059,465	21,439,368	17,283,985	12,192,170	<b>-22.16</b>
Sleep Disorders	<b>Number of Grants</b>	<b>64</b>	<b>54</b>	<b>46</b>	<b>48</b>	<b>49</b>	
	Relevant Grant Dollars	7,810,486	6,729,657	5,420,968	6,930,386	7,520,997	
	<b>Number of Contracts</b>	‡	<b>1</b>	<b>3</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	‡	300,000	550,000	78,195	35,000	
	<b>Total Count</b>	<b>64</b>	<b>55</b>	<b>49</b>	<b>49</b>	<b>50</b>	
	Total Relevant Dollars	7,810,486	7,029,657	5,970,968	7,008,581	7,555,997	<b>0.03</b>
Small Molecules	<b>Number of Grants</b>	<b>416</b>	<b>513</b>	<b>556</b>	<b>609</b>	<b>648</b>	
	Relevant Grant Dollars	81,708,151	100,631,305	95,910,356	109,485,605	112,555,106	
	<b>Number of Contracts</b>	<b>9</b>	<b>4</b>	<b>6</b>	<b>4</b>	<b>2</b>	
	Relevant Contract Dollars	3,726,105	1,449,375	1,140,627	1,389,150	846,672	
	<b>Total Count</b>	<b>425</b>	<b>517</b>	<b>562</b>	<b>613</b>	<b>650</b>	
	Total Relevant Dollars	85,434,256	102,080,680	97,050,983	110,874,755	113,401,778	<b>7.77</b>

continued

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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.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Smokeless Tobacco	<b>Number of Grants</b>	<b>19</b>	<b>24</b>	<b>33</b>	<b>29</b>	<b>25</b>	
	Relevant Grant Dollars	4,743,669	5,175,673	4,087,588	1,359,152	1,961,730	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	385,000	385,000	332,500	420,000	420,000	
	<b>Total Count</b>	<b>20</b>	<b>25</b>	<b>34</b>	<b>30</b>	<b>26</b>	
	Total Relevant Dollars	5,128,669	5,560,673	4,420,088	1,779,152	2,381,730	<b>-9.49</b>
Smoking, Passive	<b>Number of Grants</b>	<b>15</b>	<b>14</b>	<b>18</b>	<b>20</b>	<b>20</b>	
	Relevant Grant Dollars	2,250,884	2,491,604	3,160,590	3,771,941	4,153,475	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	385,000	385,000	332,500	420,000	420,000	
	<b>Total Count</b>	<b>16</b>	<b>15</b>	<b>19</b>	<b>21</b>	<b>21</b>	
	Total Relevant Dollars	2,635,884	2,876,604	3,493,090	4,191,941	4,573,475	<b>14.92</b>
Structural Biology	<b>Number of Grants</b>	<b>1,242</b>	<b>1,199</b>	<b>1,103</b>	<b>1,048</b>	<b>944</b>	
	Relevant Grant Dollars	258,099,045	235,455,633	206,932,623	196,164,921	180,943,953	
	<b>Number of Contracts</b>	<b>15</b>	<b>3</b>	<b>4</b>	‡	<b>2</b>	
	Relevant Contract Dollars	1,522,607	615,101	1,595,591	‡	52,481,360	
	<b>Total Count</b>	<b>1,257</b>	<b>1,202</b>	<b>1,107</b>	<b>1,048</b>	<b>946</b>	
	Total Relevant Dollars	259,621,652	236,070,734	208,528,214	196,164,921	233,425,313	<b>-1.91</b>
Surgery	<b>Number of Grants</b>	<b>333</b>	<b>328</b>	<b>326</b>	<b>300</b>	<b>208</b>	
	Relevant Grant Dollars	85,655,815	76,917,479	77,598,007	48,740,495	47,266,013	
	<b>Number of Contracts</b>	<b>2</b>	<b>3</b>	<b>5</b>	‡	<b>2</b>	
	Relevant Contract Dollars	373,417	545,979	2,527,184	‡	1,094,494	
	<b>Total Count</b>	<b>335</b>	<b>331</b>	<b>331</b>	<b>300</b>	<b>210</b>	
	Total Relevant Dollars	86,029,232	77,463,458	80,125,191	48,740,495	48,360,507	<b>-11.61</b>
Taxol	<b>Number of Grants</b>	<b>285</b>	<b>273</b>	<b>270</b>	<b>222</b>	<b>149</b>	
	Relevant Grant Dollars	70,198,681	60,447,024	52,963,267	17,879,201	14,735,085	
	<b>Number of Contracts</b>	‡	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	199,714	‡	‡	‡	
	<b>Total Count</b>	<b>285</b>	<b>274</b>	<b>270</b>	<b>222</b>	<b>149</b>	
	Total Relevant Dollars	70,198,681	60,646,738	52,963,267	17,879,201	14,735,085	<b>-27.52</b>
Telehealth	<b>Number of Grants</b>	<b>311</b>	<b>292</b>	<b>288</b>	<b>283</b>	<b>270</b>	
	Relevant Grant Dollars	76,191,259	76,478,419	65,169,688	64,593,337	64,342,929	
	<b>Number of Contracts</b>	<b>11</b>	<b>7</b>	<b>7</b>	<b>6</b>	<b>6</b>	
	Relevant Contract Dollars	11,912,660	9,755,606	9,541,363	10,473,269	6,161,456	
	<b>Total Count</b>	<b>322</b>	<b>299</b>	<b>295</b>	<b>289</b>	<b>276</b>	
	Total Relevant Dollars	88,103,919	86,234,025	74,711,051	75,066,606	70,504,385	<b>-5.27</b>
Therapy	<b>Number of Grants</b>	<b>3,626</b>	<b>3,738</b>	<b>3,838</b>	<b>4,057</b>	<b>4,079</b>	
	Relevant Grant Dollars	1,295,238,778	1,293,761,000	1,246,559,964	1,366,836,549	1,430,619,450	
	<b>Number of Contracts</b>	<b>94</b>	<b>92</b>	<b>104</b>	<b>67</b>	<b>81</b>	
	Relevant Contract Dollars	93,641,732	88,810,315	71,823,475	80,749,732	137,502,906	
	<b>Total Count</b>	<b>3,720</b>	<b>3,830</b>	<b>3,942</b>	<b>4,124</b>	<b>4,160</b>	
	Total Relevant Dollars	1,388,880,510	1,382,571,315	1,318,383,439	1,447,586,281	1,568,122,356	<b>3.25</b>
Tobacco	<b>Number of Grants</b>	<b>449</b>	<b>416</b>	<b>417</b>	<b>381</b>	<b>354</b>	
	Relevant Grant Dollars	127,614,366	122,594,345	98,441,413	80,787,427	79,736,310	
	<b>Number of Contracts</b>	<b>4</b>	<b>4</b>	<b>8</b>	<b>5</b>	<b>5</b>	
	Relevant Contract Dollars	1,419,652	1,302,350	2,268,519	1,335,500	196,000	
	<b>Total Count</b>	<b>453</b>	<b>420</b>	<b>425</b>	<b>386</b>	<b>359</b>	
	Total Relevant Dollars	129,034,018	123,896,695	100,709,932	82,122,927	81,696,310	<b>-10.41</b>

continued

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Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Tobacco Use Behavior	<b>Number of Grants</b>	<b>239</b>	<b>259</b>	<b>276</b>	<b>274</b>	<b>269</b>	
	Relevant Grant Dollars	83,456,895	87,985,064	73,128,257	64,136,938	63,391,848	
	<b>Number of Contracts</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>5</b>	<b>3</b>	
	Relevant Contract Dollars	1,320,000	1,302,350	2,066,485	1,335,500	1,285,000	
	<b>Total Count</b>	<b>241</b>	<b>263</b>	<b>282</b>	<b>279</b>	<b>272</b>	
	Total Relevant Dollars	84,776,895	89,287,414	75,194,742	65,472,438	64,676,848	<b>-6.15</b>
Tropical Diseases	<b>Number of Grants</b>	<b>25</b>	<b>21</b>	<b>16</b>	<b>15</b>	<b>15</b>	
	Relevant Grant Dollars	5,619,635	5,588,012	2,226,158	2,968,168	3,731,760	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>25</b>	<b>21</b>	<b>16</b>	<b>15</b>	<b>15</b>	
	Total Relevant Dollars	5,619,635	5,588,012	2,226,158	2,968,168	3,731,760	<b>-0.42</b>
Tumor Markers	<b>Number of Grants</b>	<b>626</b>	<b>508</b>	<b>393</b>	<b>298</b>	<b>214</b>	
	Relevant Grant Dollars	161,691,676	124,259,866	88,015,396	59,605,975	49,088,453	
	<b>Number of Contracts</b>	<b>4</b>	<b>3</b>	‡	‡	‡	
	Relevant Contract Dollars	2,569,530	2,693,245	‡	‡	‡	
	<b>Total Count</b>	<b>630</b>	<b>511</b>	<b>393</b>	<b>298</b>	<b>214</b>	
	Total Relevant Dollars	164,531,206	126,953,111	88,015,396	59,605,975	49,088,453	<b>-25.86</b>
Underserved Populations	<b>Number of Grants</b>	<b>595</b>	<b>585</b>	<b>556</b>	<b>610</b>	<b>595</b>	
	Relevant Grant Dollars	210,385,470	216,074,187	189,290,919	245,809,745	230,676,876	
	<b>Number of Contracts</b>	<b>16</b>	<b>16</b>	<b>2</b>	‡	<b>4</b>	
	Relevant Contract Dollars	10,306,244	11,469,992	2,354,483	‡	5,952,032	
	<b>Total Count</b>	<b>611</b>	<b>601</b>	<b>558</b>	<b>610</b>	<b>599</b>	
	Total Relevant Dollars	220,691,714	227,544,179	191,645,402	245,809,745	236,628,908	<b>2.96</b>
Vaccine Development	<b>Number of Grants</b>	<b>159</b>	<b>151</b>	<b>130</b>	<b>112</b>	<b>109</b>	
	Relevant Grant Dollars	21,105,678	20,714,291	17,452,232	15,119,199	17,882,191	
	<b>Number of Contracts</b>	<b>1</b>	‡	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	199,988	‡	739,425	458,635	318,481	
	<b>Total Count</b>	<b>160</b>	<b>151</b>	<b>131</b>	<b>113</b>	<b>110</b>	
	Total Relevant Dollars	21,305,666	20,714,291	18,191,657	15,577,834	18,200,672	<b>-3.12</b>
Vaccine Production	<b>Number of Grants</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	
	Relevant Grant Dollars	661,049	589,530	152,239	‡	41,056	
	<b>Number of Contracts</b>	<b>1</b>	‡	<b>1</b>	‡	‡	
	Relevant Contract Dollars	1,499,001	‡	739,425	‡	‡	
	<b>Total Count</b>	<b>7</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>1</b>	
	Total Relevant Dollars	2,160,050	589,530	891,664	‡	41,056	<b>-38.95</b>
Vaccine Research	<b>Number of Grants</b>	<b>195</b>	<b>183</b>	<b>167</b>	<b>149</b>	<b>129</b>	
	Relevant Grant Dollars	34,117,779	31,279,880	25,866,062	25,518,109	22,248,751	
	<b>Number of Contracts</b>	<b>2</b>	<b>1</b>	<b>3</b>	‡	<b>6</b>	
	Relevant Contract Dollars	1,502,003	1,996,084	5,831,735	‡	24,951,052	
	<b>Total Count</b>	<b>197</b>	<b>184</b>	<b>170</b>	<b>149</b>	<b>135</b>	
	Total Relevant Dollars	34,619,782	33,275,964	31,697,797	25,518,109	47,199,803	<b>14.21</b>
Vaccine Testing	<b>Number of Grants</b>	<b>111</b>	<b>101</b>	<b>82</b>	<b>70</b>	<b>72</b>	
	Relevant Grant Dollars	18,745,944	17,217,816	13,797,753	14,265,015	14,360,299	
	<b>Number of Contracts</b>	<b>1</b>	<b>1</b>	‡	<b>3</b>	<b>1</b>	
	Relevant Contract Dollars	3,836,717	870,317	‡	4,435,947	2,746,712	
	<b>Total Count</b>	<b>112</b>	<b>102</b>	<b>82</b>	<b>73</b>	<b>73</b>	
	Total Relevant Dollars	22,582,661	18,088,133	13,797,753	18,700,962	17,107,011	<b>-4.15</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Virus Cancer Research	<b>Number of Grants</b>	<b>505</b>	<b>481</b>	<b>458</b>	<b>442</b>	<b>419</b>	
	Relevant Grant Dollars	142,438,045	133,815,083	123,611,800	124,977,046	121,319,532	
	<b>Number of Contracts</b>	<b>1</b>	<b>4</b>	<b>2</b>	<b>1</b>	<b>2</b>	
	Relevant Contract Dollars	3,836,717	4,066,305	2,478,454	740,476	21,920,290	
	<b>Total Count</b>	<b>506</b>	<b>485</b>	<b>460</b>	<b>443</b>	<b>421</b>	
	Total Relevant Dollars	146,274,762	137,881,388	126,090,254	125,717,522	143,239,822	<b>-0.16</b>
Virus—Epstein-Barr	<b>Number of Grants</b>	<b>104</b>	<b>96</b>	<b>81</b>	<b>75</b>	<b>69</b>	
	Relevant Grant Dollars	24,499,924	22,756,337	20,096,683	17,304,516	16,834,173	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>104</b>	<b>96</b>	<b>81</b>	<b>75</b>	<b>69</b>	
	Total Relevant Dollars	24,499,924	22,756,337	20,096,683	17,304,516	16,834,173	<b>-8.85</b>
Virus—Genital Herpes	<b>Number of Grants</b>	<b>4</b>	<b>3</b>	<b>163</b>	‡	<b>148</b>	
	Relevant Grant Dollars	372,188	290,654	41,684,291	‡	41,959,685	
	<b>Total Count</b>	<b>4</b>	<b>3</b>	<b>163</b>	‡	<b>148</b>	
	Total Relevant Dollars	372,188	290,654	41,683,291	‡	41,959,685	<b>4739.98</b>
Virus—Hepatitis B	<b>Number of Grants</b>	<b>50</b>	<b>42</b>	<b>39</b>	<b>39</b>	<b>33</b>	
	Relevant Grant Dollars	6,370,613	4,928,799	3,929,183	4,816,519	3,855,582	
	<b>Total Count</b>	<b>50</b>	<b>42</b>	<b>39</b>	<b>39</b>	<b>33</b>	
	Total Relevant Dollars	6,370,613	4,928,799	3,929,183	4,816,519	3,855,582	<b>-10.07</b>
Virus—Hepatitis C	<b>Number of Grants</b>	<b>31</b>	<b>40</b>	<b>39</b>	<b>34</b>	<b>34</b>	
	Relevant Grant Dollars	4,600,379	5,332,014	3,990,130	3,507,767	6,172,959	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>31</b>	<b>40</b>	<b>39</b>	<b>34</b>	<b>34</b>	
	Total Relevant Dollars	4,600,379	5,332,014	3,990,130	3,507,767	6,172,959	<b>13.66</b>
Virus—Herpes	<b>Number of Grants</b>	<b>190</b>	<b>182</b>	<b>163</b>	<b>157</b>	<b>148</b>	
	Relevant Grant Dollars	48,127,519	44,080,597	41,683,291	42,315,552	41,959,685	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>190</b>	<b>182</b>	<b>163</b>	<b>157</b>	<b>148</b>	
	Total Relevant Dollars	48,127,519	44,080,597	41,683,291	42,315,552	41,959,685	<b>-3.29</b>
Virus—HHV8	<b>Number of Grants</b>	<b>78</b>	<b>74</b>	<b>66</b>	<b>65</b>	<b>63</b>	
	Relevant Grant Dollars	17,725,584	15,764,211	18,719,752	19,671,059	19,794,001	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>78</b>	<b>74</b>	<b>66</b>	<b>65</b>	<b>63</b>	
	Total Relevant Dollars	17,725,584	15,764,211	18,719,752	19,671,059	19,794,001	<b>3.35</b>
Virus—HTLV-I	<b>Number of Grants</b>	<b>24</b>	<b>22</b>	<b>20</b>	<b>22</b>	<b>18</b>	
	Relevant Grant Dollars	6,171,762	6,563,215	3,679,947	4,627,662	3,629,925	
	<b>Number of Contracts</b>	‡	‡	‡	‡	‡	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	<b>Total Count</b>	<b>24</b>	<b>22</b>	<b>20</b>	<b>22</b>	<b>18</b>	
	Total Relevant Dollars	6,171,762	6,563,215	3,679,947	4,627,662	3,629,925	<b>-8.35</b>

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.

Source: Research Analysis and Evaluation Branch.

**Table 16 (cont'd). NCI Special Interest Category (SIC) Dollars for FY2011 – FY2015 – Annual Percent Change\***

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

Special Interest Categories	Counts and Relevant Dollars†	2011	2012	2013	2014	2015	Average Percent Change/Yr.
Virus—HTLV-II	<b>Number of Grants</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Relevant Grant Dollars	2,000	171,471	160,325	151,718	171,471	
	<b>Total Count</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	
	Total Relevant Dollars	2,000	171,471	160,325	151,718	171,471	<b>2118.68</b>
Virus—Papilloma	<b>Number of Grants</b>	<b>168</b>	<b>165</b>	<b>162</b>	<b>176</b>	<b>167</b>	
	Relevant Grant Dollars	43,559,761	41,276,749	40,445,208	43,808,063	43,027,935	
	<b>Number of Contracts</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	3,836,717	3,866,401	2,478,454	740,476	1,327,705	
	<b>Total Count</b>	<b>169</b>	<b>168</b>	<b>164</b>	<b>177</b>	<b>168</b>	
Total Relevant Dollars	47,396,478	45,143,150	42,923,662	44,548,539	44,355,640	<b>-1.58</b>	
Virus—Papova	<b>Number of Grants</b>	<b>200</b>	<b>190</b>	<b>185</b>	<b>196</b>	<b>188</b>	
	Relevant Grant Dollars	52,541,742	49,415,531	49,217,700	50,340,929	49,604,921	
	<b>Number of Contracts</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	
	Relevant Contract Dollars	3,836,717	3,866,401	2,478,454	740,476	1,327,705	
	<b>Total Count</b>	<b>201</b>	<b>193</b>	<b>187</b>	<b>197</b>	<b>189</b>	
Total Relevant Dollars	56,378,459	53,281,932	51,696,154	51,081,405	50,932,626	<b>-2.49</b>	
Virus—SV40	<b>Number of Grants</b>	<b>25</b>	<b>21</b>	<b>15</b>	<b>7</b>	<b>2</b>	
	Relevant Grant Dollars	5,163,432	3,525,677	3,313,239	356,763	361,950	
	<b>Total Count</b>	<b>25</b>	<b>21</b>	<b>15</b>	<b>7</b>	<b>2</b>	
	Total Relevant Dollars	5,163,432	3,525,677	3,313,239	356,763	361,950	<b>-31.38</b>
Vitamin A	<b>Number of Grants</b>	<b>55</b>	<b>42</b>	<b>40</b>	<b>31</b>	<b>24</b>	
	Relevant Grant Dollars	9,150,008	6,336,364	6,714,906	4,342,551	2,458,147	
	<b>Number of Contracts</b>	<b>1</b>	‡	‡	‡	‡	
	Relevant Contract Dollars	99,917	‡	‡	‡	‡	
	<b>Total Count</b>	<b>56</b>	<b>42</b>	<b>40</b>	<b>31</b>	<b>24</b>	
Total Relevant Dollars	9,249,925	6,336,364	6,714,906	4,342,551	2,458,147	<b>-26.06</b>	
Vitamin C	<b>Number of Grants</b>	<b>15</b>	<b>16</b>	<b>11</b>	<b>7</b>	<b>6</b>	
	Relevant Grant Dollars	1,106,973	1,323,825	1,327,243	993,313	1,569,644	
	<b>Total Count</b>	<b>15</b>	<b>16</b>	<b>11</b>	<b>7</b>	<b>6</b>	
	Total Relevant Dollars	1,106,973	1,323,825	1,327,243	993,313	1,569,644	<b>13.18</b>
Vitamin D	<b>Number of Grants</b>	<b>70</b>	<b>76</b>	<b>70</b>	<b>81</b>	<b>68</b>	
	Relevant Grant Dollars	20,457,495	20,791,513	17,759,137	17,167,368	16,217,405	
	<b>Number of Contracts</b>	‡	<b>1</b>	<b>1</b>	‡	‡	
	Relevant Contract Dollars	‡	56,250	918,685	‡	‡	
	<b>Total Count</b>	<b>70</b>	<b>77</b>	<b>71</b>	<b>81</b>	<b>68</b>	
Total Relevant Dollars	20,457,495	20,847,763	18,677,822	17,167,368	16,217,405	<b>-5.53</b>	
Vitamin, Other	<b>Number of Grants</b>	<b>44</b>	<b>25</b>	<b>15</b>	<b>8</b>	<b>7</b>	
	Relevant Grant Dollars	10,076,781	6,252,528	4,252,163	3,199,595	3,184,755	
	<b>Number of Contracts</b>	‡	<b>1</b>	‡	‡	‡	
	Relevant Contract Dollars	‡	56,250	‡	‡	‡	
	<b>Total Count</b>	<b>44</b>	<b>26</b>	<b>15</b>	<b>8</b>	<b>7</b>	
Total Relevant Dollars	10,076,781	6,308,778	4,252,163	3,199,595	3,184,755	<b>-23.80</b>	

\*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.

**Table 17. NCI Funding of Foreign Research Grants and Contracts in FY2015***(This table reports extramural grants and contracts only; intramural grants and contracts are excluded.)*

Country/ Cancer Site	Mechanism											Totals
	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	
<b>Australia</b>												
Grants #					1			1				2
Funding \$					247,767			782,004				1,029,771
Breast					247,767							247,767
Childhood Leukemia								391,002				391,002
Non-Hodgkins Lymphoma								391,002				391,002
<b>Belgium</b>												
Grants #									1			1
Funding \$									287,531			287,531
Bone, Cartilage									7,501			7,501
Brain									5,001			5,001
Breast									82,508			82,508
Central Nervous System									2,500			2,500
Cervix									5,001			5,001
Childhood Leukemia									35,004			35,004
Colon, Rectum									10,001			10,001
Esophagus									2,500			2,500
Head and Neck									2,500			2,500
Kidney									5,001			5,001
Leukemia									35,004			35,004
Liver									2,500			2,500
Lung									20,002			20,002
Neuroblasoma									5,001			5,001
Non-Hodgkins Lymphoma									2,500			2,500
Not Site Specific*									20,002			20,002
Ovary									7,501			7,501
Pancreas									2,500			2,500
Pharynx									2,500			2,500
Prostate									27,503			27,503
Uterus									5,001			5,001

*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 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 FY2015***(This table reports extramural grants and contracts only; intramural grants and contracts are excluded.)*

Country/ Cancer Site	Mechanism											Totals	
	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1		
<b>Canada</b>													
Grants #		2		1	9			1	1	1	1	1	17
Funding \$		1,140,421		1,135,265	2,830,878			101,050	89,000	3,135,983	219,276	351,397	9,003,270
Bladder					4,462					156,799			161,261
Brain										156,799			156,799
Breast					960,122					1,254,393			2,214,515
Cervix										78,400			78,400
Childhood Leukemia					164,905								164,905
Colon, Rectum										125,439			125,439
Esophagus										62,720			62,720
Head and Neck										156,799			156,799
Kidney										156,799			156,799
Leukemia					780,967					117,599			898,566
Liver										31,360			31,360
Lung					584,272					156,799			741,071
Myeloma										78,400			78,400
Non-Hodgkins Lymphoma										117,599			117,599
Not Site Specific		1,140,421		1,135,265	224,100			101,050			219,276	351,397	3,171,509
Ovary									89,000	156,799			245,799
Pancreas										62,720			62,720
Prostate					112,050					156,799			268,849
Stomach										31,360			31,360
Uterus										78,400			78,400
<b>France</b>													
Grants #							2	2	3				7
Funding \$							113,000	233,248	1,336,899				1,683,147
Anus										241,940			241,940
Bladder										124,207			124,207
Esophagus								85,466					85,466
Head and Neck							56,500						56,500
Kidney								147,782					147,782
Lung							56,500		149,180				205,680
Not Site Specific									579,632				579,632
Pharynx									241,940				241,940
<b>Germany</b>													
Grants #					1								1
Funding \$					224,100								224,100
Sarcoma, Soft Tissue					224,100								224,100
<b>Hong Kong</b>													
Grants #			2										2
Funding \$			12,600										12,600
Not Site Specific			12,600										12,600

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 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 FY2015***(This table reports extramural grants and contracts only; intramural grants and contracts are excluded.)*

Country/ Cancer Site	Mechanism											Totals
Japan	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #		1										1
Funding \$		291,030										291,030
Not Site Specific		291,030										291,030
Italy	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #		1										1
Funding \$		24,000										24,000
Not Site Specific		24,000										24,000
Israel	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #					3							3
Funding \$					781,844							781,844
Breast					51,237							51,237
Colon, Rectum					51,237							51,237
Lung					51,237							51,237
Not Site Specific					474,123							474,123
Ovary					102,773							102,773
Skin					51,237							51,237
South Africa	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #					1		2					3
Funding \$					88,403		271,716					360,119
Breast					88,403							88,403
Kaposi Sarcoma							162,916					162,916
Non-Hodgkins Lymphoma							108,800					108,800
Switzerland	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #	1											1
Funding \$	50,690											50,690
Breast	50,690											50,690
United Kingdom	F32	N01	N02	N03	R01	R03	R21	U01	U10	U24	UM1	Totals
Grants #					4			1		1		6
Funding \$					1,569,982			144,467		249,066		1,963,515
Brain					161,263							161,263
Breast					222,503							222,503
Central Nervous System					161,263							161,263
Eye					403,788							403,788
Melanoma					403,788							403,788
Myeloma					217,377							217,377
Not Site Specific								144,467				144,467
Thyroid										249,066		249,066
<b>Total Grants &amp; Contracts</b>	<b>1</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>19</b>	<b>2</b>	<b>5</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>45</b>
<b>Total \$ Per Grant &amp; Contract type</b>	<b>50,690</b>	<b>1,431,451</b>	<b>36,600</b>	<b>1,135,265</b>	<b>5,742,974</b>	<b>113,000</b>	<b>606,014</b>	<b>2,352,370</b>	<b>3,423,514</b>	<b>468,342</b>	<b>351,397</b>	<b>15,711,617</b>

\*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 FY2015**

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

Country	Funding Mechanism																				Sub-total								
	F30	F31	F32	K01	K05	K07	K08	K22	K23	K99	N01	P01	R00	R01	R03	R13	R15	R21	R25	R35		R42	R44	U01	U24	UG1	UH2	UM1	
Africa														1															1
Argentina				1										1											1				3
Asia (unspecified)														2	1														3
Australia					1			1		1			18	1				1						2	2		1	28	
Austria																									1			1	
Bahamas																								1				1	
Belgium														3					2						1			6	
Benin														1														1	
Bhutan																			1									1	
Brazil														1					1	1				1	1		1	6	
Cameroon														1														1	
Canada					1							2		39	1	3			2	1			2	8	2	1	1	63	
Caribbean (unspecified)														1														1	
Central America (unspecified)														1														1	
Chile														1														1	
China		1				2					1		11	2				4					2	2			3	28	
Columbia														2					1						1		1	5	
Costa Rica																								1				1	
Czech																									1			1	
Denmark			1											7	1				2					1	1			13	
Egypt														1											1			2	
El Salvador														1														1	
Europe (unspecified)														1	1													2	
Finland														2										1	1			4	
France				1										7	3									3	1			14	
Germany													1	20					1			1	3	2				28	
Ghana																			1					1				2	
Greece														3														3	
Hungary																									2			2	
Iceland																									1			1	
India				1		1								4											1	1		8	
Iran																									1			1	
Ireland														2											1			3	
Israel			1											5			1		1				1	2	2			13	
Italy		1				1								5	2									3	2			14	
Japan											1			8	1				1						1			12	
Kenya		1												3													1	5	
Kuwait																									1			1	
Malaysia																									1			1	
Mexico					1		1							3					1						1			7	
Middle East (unspecified)														1														1	
Netherlands												1		11										5	1			18	

continued

Source: Research Analysis and Evaluation Branch.

**Table 18. (cont'd). Foreign Components of U.S. Domestic Research Grants and Contracts in FY2015**

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

Country	Funding Mechanism																					Sub-total													
	F30	F31	F32	K01	K05	K07	K08	K22	K23	K99	N01	P01	R00	R01	R03	R13	R15	R21	R25	R35	R42		R44	U01	U24	UG1	UH2	UM1							
New Zealand														2											2										4
Nigeria																									1							1			2
North America (unspecified)														1																					1
Norway														5	1											1									7
Oceania (unspecified)														1																					1
Pakistan																										1									1
Panama																										1									1
Paraguay																			1																1
Peru																																1			1
Philippines																																1			1
Poland														2													1								3
Portugal														2													1								3
Russia																											1								1
Saudi Arabia																											1								1
Senegal																										1									1
Singapore											1			4								1					1				1				8
Slovenia																											1								1
South Africa																				1						1	2		1	1					6
South America (unspecified)														1																					1
South Korea														1	1												1								3
Spain														8	1				2	1							2								14
Sweden														7												3	2								12
Switzerland														5					1							1	2								10
Taiwan														4													1								5
Tanzania														3																					3
Thailand														2																					2
Turkey	1	1																																	3
Uganda			1								1			2																					4
United Kingdom			1											29	2				3	1					1		7	2						46	
Uruguay																											1								1
Venezuela																											1								1
Vietnam														1																					1
Zambia			1											1																					2
Zimbabwe																																		1	1
<b>Totals</b>	<b>3</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>248</b>	<b>18</b>	<b>3</b>	<b>1</b>	<b>26</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>50</b>	<b>57</b>	<b>1</b>	<b>7</b>	<b>9</b>					<b>462*</b>			

\* Because many grants and contracts have multiple foreign contributors, the total count (462) is greater than the total number of grants and contracts (272).

Source: Research Analysis and Evaluation Branch.

## Appendix A: Activities of the National Cancer Advisory Board

Originally established as the National Advisory Cancer Council in 1937, the NCAB consists of 18 members who are appointed by the 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. It is authorized to recommend support for grants and cooperative agreements following technical and scientific peer review. The Director of the DEA serves as 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 7,929 applications in FY2015 requesting \$2,574,711,046 in direct costs with appropriated funds. Additionally, the Board reviewed 14 FDA applications.

The Board heard presentations, discussed, and provided advice on a variety of topics and NCI activities in FY2015, such as:

- NCI Director's Report
- President's Cancer Panel Report
- Legislative Update
- Biennial Inclusion Report
- Annual Delegations of Authority
- NCAB Phase II Cancer Centers Budget Working Group Report

- Precision Medicine Initiative
- Center for Cancer Research and Food and Drug Administration Collaboration
- NCI-China Collaborations
- Update: Electronic Cigarette
- Reducing the Number of Types of K Award Mechanisms
- Modular Grants
- Perspective on Cancer Prevention Research and Implementation

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

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 FY2015:

- Report of the NCI Director
- Cancer Genomics
- Update: Electronic Cigarettes
- Reducing the Types of K Award Mechanisms
- Modular Grants
- National Institute of Standards and Technology (NIST) Collaborative Activities/Interactions with NCI and NIH
- Center for Cancer Research and Food and Drug Administration Collaboration
- Precision Medicine Initiative
- NCAB Phase II Cancer Centers Budget Working Group Report
- Perspective on Cancer Prevention Research and Implementation

### RFA Concept Approved

#### Center for Cancer Training

- The NCI Predoc to Postdoc Transition Award (K21/K00)

#### Division of Cancer Control and Population Sciences

- Smoking Cessation Within the Context of Lung Cancer Screening

#### Division of Cancer Biology

- Research Specialist Award

#### Division of Cancer Biology and Office of the Director

- Provocative Question in Cancer with an Underlying HIV Infection

#### Office of the Director

- Non-Communicable Disease Regional Infrastructure Core Planning Grant

### RFA/Cooperative Agreements Approved

#### Division of Cancer Biology

- Impact of Aging on Animal Models of Disease
- Cancer Systems Biology Consortium (CSBC) Initiative

#### Division of Cancer Treatment and Diagnosis

- Phase II of the Experimental Therapeutics Clinical Trials Network (ETCTN)

### RFA Re-Issuances

#### Office of the Director

- Innovative Molecular Analysis Technologies (IMAT)
- Small Business Innovative Research (SBIR)

### RFA/Cooperative Agreements Re-Issuances

#### Office of the Director

- Genome Data Analysis Network (GDAN)
- Clinical Proteomic Tumor Analysis Consortium (CPTAC)

#### Division of Cancer Treatment and Diagnosis

- Childhood Cancer Survivor Study

## Appendix C: List of Chartered Committees

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John P. Holdren, Ph.D.	Office of Science and Technology Policy
John Howard, M.D., M.P.H., J.D., L.L.M.	National Institute for Occupational Safety and Health
Gina McCarthy, M.S.	U.S. Environmental Protection Agency
The Honorable Thomas E. Perez	U.S. Department of Labor
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The Honorable Kathleen Sebelius, M.P.A.	U.S. Department of Health and Human Services
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Vincent J. Cogliano, Ph.D.	U.S. Environmental Protection Agency
Michael Kelley, M.D., F.A.C.P.	U.S. Department of Veterans Affairs
Aubrey Miller, M.D.	National Institute of Environmental Health Sciences, NIH
Richard Pazdur, M.D., F.A.C.P.	U.S. Food and Drug Administration
Craig D. Shriver, M.D., F.A.C.S., COL., M.C.	U.S. Department of Defense
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Lawrence Corey, M.D. .... Fred Hutchinson Cancer Research Center  
Sara A. Courtneidge, Ph.D. .... Sanford Burnham Prebys Medical Discovery Institute  
Alan D'Andrea, Ph.D. .... Dana-Farber Cancer Institute  
Norman Drinkwater, Ph.D. .... University of Wisconsin, Madison  
Errol Friedberg, M.D. .... The University of Texas Southwestern Medical Center  
Joanna Groden, Ph.D. .... The Ohio State University  
Daria J. Hazuda, Ph.D. .... Merck & Company Inc.  
Eric Hunter, Ph.D. .... Emory University  
Stephen D. Hursting, Ph.D., M.P.H. .... The University of Texas at Austin  
Alexandra L. Joyner, Ph.D. .... Memorial Sloan Kettering Cancer Center  
Marcelo G. Kazanietz, Ph.D. .... University of Pennsylvania  
Brian C. Lewis, Ph.D. .... University of Massachusetts Medical School  
Robert E. Lewis, Ph.D. .... University of Nebraska Medical Center  
Jonathan D. Licht, M.D. .... Northwestern University Feinberg School of Medicine  
Sergio A. Lira, M.D., Ph.D. .... Icahn School of Medicine at Mount Sinai  
Ian G. Macara, Ph.D. .... Vanderbilt University Medical Center  
Roeland Nusse, Ph.D. .... Stanford University  
Suzanne Ostrand-Rosenberg, Ph.D. .... University of Maryland, Baltimore County  
Thomas L. Poulos, Ph.D. .... University of California, Irvine  
Kenneth L. Rock, M.D. .... University of Massachusetts Medical School  
Daniel Romo, Ph.D. .... Texas A&M University  
James A. Wells, Ph.D. .... University of California, San Francisco  
Tzyy-Choou Wu, M.D., Ph.D., M.P.H. .... Johns Hopkins University  
Wayne M. Yokoyama, M.D. .... Washington University in St. Louis  
Virginia A. Zakian, Ph.D. .... Princeton University  
Dong-Er Zhang, Ph.D. .... University of California, San Diego

### Executive Secretary

Mehrdad Tondravi, Ph.D. .... National Cancer Institute, NIH

## NCI Council of Research Advocates

(formerly NCI Director's Consumer Liaison Group)

### Chair

Max N. Wallace, J.D. .... Accelerate Brain Cancer Cure

### Members

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Gregory H. Aune, M.D., Ph.D. .... The University of Texas Health Science Center  
Susan G. Braun, M.A. .... The V Foundation for Cancer Research  
Adam M. Clark, Ph.D. .... U.S. Department of Health and Human Services  
Martha E. Gaines, J.D., LL.M. .... University of Wisconsin Law School  
Joya D. Harris, M.P.H. .... American Cancer Society  
Linda S. House, R.N., B.S.N., M.S.M. .... Cancer Support Community  
Jeffrey A. Kaufman, M.B.A, M.I.A. .... Adenoid Cystic Carcinoma Research Foundation  
Ms. Mila McCurrach .... The Lustgarten Foundation  
Michelle T. McMurry-Heath, M.D., Ph.D. .... U.S. Food and Drug Administration  
Shelley F. Nasso, M.P.P. .... National Coalition for Cancer Survivorship  
Senaída F. Poole, Ph.D. .... University of California  
Jon G. Retzlaff, M.P.A., M.B.A. .... American Association for Cancer Research  
Mr. Josh Sommer .... The Chordoma Foundation  
Andrea E. Ferris Stern, M.B.A. .... LUNGeVity Foundation  
Regina M. Vidaver, Ph.D. .... National Lung Cancer Partnership

### Executive Secretary

Kelley Landy, M.P.A. .... National Cancer Institute, NIH

## NCI Initial Review Group Scientific Review Committees

### Subcommittee A—Cancer Centers

#### Chair

Timothy L. Ratliff, Ph.D. .... Purdue University

#### Members

Lucile L. Adams-Campbell, Ph.D. .... Georgetown University  
 Alex A. Adjei, M.D., Ph.D., F.A.C.P. .... Roswell Park Cancer Institute  
 Terrance L. Albrecht, Ph.D. .... Wayne State University  
 Howard H. Bailey, M.D. .... University of Wisconsin, Madison  
 Donald J. Buchsbaum, Ph.D. .... The University of Alabama at Birmingham  
 William E. Carson III, M.D. .... The Ohio State University  
 Moon S. Chen, Jr., Ph.D., M.P.H. .... University of California, Davis  
 Margie L. Clapper, Ph.D. .... Fox Chase Cancer Center  
 Robert S. DiPaola, M.D. .... Rutgers Biomedical and Health Sciences  
 S. Gail Eckhardt, M.D. .... University of Colorado, Denver  
 Dennis E. Hallahan, M.D., F.A.S.T.R.O. .... Washington University in St. Louis  
 Helen E. Heslop, M.D. .... Baylor College  
 Roy A. Jensen, M.D. .... University of Kansas  
 Karen E. Knudsen, Ph.D. .... Thomas Jefferson University  
 King C. Li, M.D., M.B.A. .... Wake Forest University Health Sciences & Baptist Medical Center  
 Beverly S. Mitchell, M.D. .... Stanford University  
 Alfred W. Rademaker, Ph.D. .... Northwestern University  
 Jerome Ritz, M.D. .... Dana-Farber Cancer Institute  
 Victor M. Santana, M.D. .... St. Jude Children’s Research Hospital  
 Victoria L. Seewaldt, M.D. .... Duke University  
 Richard L. Seither, Ph.D., M.B.A. .... Albert Einstein College of Medicine of Yeshiva University  
 Eric J. Small, M.D. .... University of California, San Francisco  
 Eduardo M. Sotomayor, M.D. .... H. Lee Moffit Cancer Center & Research Institute  
 Ian M. Thompson, Jr., M.D. .... The University of Texas Health Science Center at San Antonio  
 Barnarese Wheatley, Dr.Ed., M.P.H. .... BPW Consulting Services  
 Patti Wiley, M.B.A. .... On the Wings of Angels Pediatric Cancer Foundation

#### Scientific Review Officer

Sonya V. Roberson, Ph.D. .... National Cancer Institute, NIH

## Subcommittee F—Institutional Training & Education

### Chair

Nipun B. Merchant, M.D., F.A.C.S. .... Vanderbilt University

### Members

Lisa K. Denzin, Ph.D. .... Rutgers, The State University of New Jersey  
Marlene L. Hauck, D.V.M., Ph.D. .... North Carolina State University  
Jennifer J. Hu, Ph.D. .... University of Miami Miller School of Medicine  
Aminah Jatoi, M.D. .... Mayo Clinic  
Molly F. Kulesz-Martin, Ph.D. .... Oregon Health & Science University  
Primo N. Lara Jr, M.D. .... University of California, Davis  
Stephen L. Lessnick, M.D., Ph.D. .... University of Utah  
Jesse D. Martinez, Ph.D. .... The University of Arizona  
Deborah B. McGuire, Ph.D., R.N., F.A.A.N. .... Virginia Commonwealth University  
Karen M. Meneses, Ph.D., R.N., F.A.A.N. .... The University of Alabama at Birmingham  
Funda Meric-Bernstam, M.D. .... The University of Texas MD Anderson Cancer Center  
Shiraz I. Mishra, M.B.B.S., Ph.D. .... The University of New Mexico  
Polly A. Newcomb, Ph.D. .... University of Washington  
Daniel P. Normolle, Ph.D. .... University of Pittsburgh  
Fiemu E. Nwariaku, M.D. .... The University of Texas Southwestern Medical Center  
Mark P. Pfeifer, M.D. .... University of Louisville  
Gavin P. Robertson, Ph.D. .... The Pennsylvania State University  
Kathryn H. Schmitz, Ph.D., M.P.H. .... University of Pennsylvania  
Danny R. Welch, Ph.D. .... University of Kansas Medical Center  
Gayle E. Woloschak, Ph.D. .... Northwestern University

### Scientific Review Officer

Timothy C. Meeker, M.D. .... National Cancer Institute, NIH

**Subcommittee I—Transition to Independence**

**Chair**

Neil Osheroff, Ph.D. .... Vanderbilt University Medical Center

**Members**

Emmanuel T. Akporiaye, Ph.D. .... Providence Portland Medical Center  
 Deepak Bastia, Ph.D. .... Medical University of South Carolina  
 Lawrence H. Boise, Ph.D. .... Emory University  
 Amy H. Bouton, Ph.D. .... University of Virginia  
 Jennifer P. Clarke, Ph.D. .... University of Nebraska–Lincoln  
 Andrei Goga, M.D., Ph.D. .... University of California, San Francisco  
 Charles Keller, M.D. .... Oregon Health & Science University  
 Kenneth A. Krohn, Ph.D. .... University of Washington  
 Sophie A. Lelievre, D.V.M., Ph.D., LL.M(PH) .... Purdue University  
 Anna E. Lokshin, Ph.D. .... University of Pittsburgh  
 Adhip P. N. Majumdar, D.Sc., Ph.D. .... Wayne State University  
 Daniela E. Matei, M.D. .... Indiana University-Purdue University Indianapolis  
 Keith D. Paulsen, Ph.D. .... Dartmouth College  
 Rajagopal Ramesh, Ph.D. .... University of Oklahoma Health Science Center  
 Edward A. Sausville, M.D., Ph.D., F.A.C.P. .... University of Maryland, Baltimore  
 Tiffany N. Seagroves, Ph.D. .... The University of Tennessee Health Science Center  
 David B. Solit, M.D. .... Memorial Sloan Kettering Cancer Center  
 Bakhos A. Tannous, Ph.D. .... Harvard Medical School  
 E. Aubrey Thompson, Ph.D. .... Mayo Clinic, Jacksonville  
 Shizhen E. Wang, Ph.D. .... City of Hope National Medical Center  
 Michael A. White, Ph.D. .... The University of Texas  
 Robert A. Winn, M.D. .... University of Illinois at Chicago  
 Wen-Cheng Xiong, Ph.D. .... Medical College of Georgia  
 Yu-Chung Yang, Ph.D. .... Case Western Reserve University

**Scientific Review Officer**

Sergei Radaev, Ph.D. .... National Cancer Institute, NIH

## Subcommittee J—Career Development

### Chair

Christopher H. Lowrey, M.D. .... Dartmouth-Hitchcock Medical Center

### Members

Virginia F. Borges, M.D., M.M.Sc. .... University of Colorado Denver  
Deborah W. Bruner, Ph.D., R.N. .... Emory University  
John C. Byrd, M.D. .... The Ohio State University  
Fernando A. Ferrer, M.D. .... University of Connecticut School of Medicine  
Christopher R. Friese, Ph.D., R.N., A.O.C.N. .... University of Michigan  
Michael E. Hagensee, M.D., Ph.D. .... Louisiana State University  
Heather S.L. Jim, Ph.D. .... H. Lee Moffitt Cancer Center & Research Institute  
Santosh Kesari, M.D., Ph.D. .... University of California, San Diego  
Alexander S. Krupnick, M.D. .... Washington University in Saint Louis  
Gertraud Maskarinec, M.D., Ph.D., M.P.H. .... University of Hawaii  
Chaya S. Moskowitz, Ph.D. .... Memorial Sloan Kettering Cancer Center  
Daniel C. Mullins, Ph.D. .... University of Maryland, Baltimore  
Scott A. Waldman, M.D., Ph.D. .... Thomas Jefferson University  
Zuo-Feng Zhang, M.D., Ph.D. .... University of California, Los Angeles

### Scientific Review Officer

Ilda F.S. Melo, Ph.D. .... National Cancer Institute, NIH

## Appendix D: NCI Initial Review Group Consultants

### 1. Consultants Serving as Temporary Members on IRG Subcommittees in FY2015

#### A

Andersen, Bogi, M.D. .... University of California, Irvine  
Arceci, Robert J., M.D., Ph.D. .... The University of Arizona  
Axelrod, David E., Ph.D. .... Rutgers, The State University of New Jersey

#### B

Bae-Jump, Victoria L., M.D., Ph.D. .... The University of North Carolina  
Basu, Sujit, M.D., Ph.D. .... The Ohio State University  
Baumgartner, Kathy B., Ph.D. .... University of Louisville  
Behbod, Fariba, Pharm.D., Ph.D. .... University of Kansas Medical Center  
Berwick, Marianne, Ph.D., M.P.H. .... The University of New Mexico  
Bjornsti, Mary-Ann, Ph.D. .... The University of Alabama at Birmingham  
Brock, Malcolm V., M.D. .... Johns Hopkins University  
Buchsbaum, Donald J., Ph.D. .... The University of Alabama at Birmingham  
Byers, Stephen W., Ph.D. .... Georgetown University

#### C

Cannon, Martin J., Ph.D. .... University of Arkansas for Medical Sciences  
Chen, Moon S., Ph.D., M.P.H. .... University of California, Davis  
Chiao, Elizabeth, M.D., M.P.H. .... Baylor College of Medicine  
Coleman, William B., Ph.D. .... The University of North Carolina at Chapel Hill  
Cooney, Kathleen A., M.D. .... University of Michigan  
Corey, Seth J., M.D., M.P.H. .... Northwestern University  
Corry, Peter M., Ph.D. .... University of Arkansas for Medical Sciences  
Creighton, Chad, Ph.D. .... Baylor College of Medicine

#### D

Datta, Kaustubh, Ph.D. .... University of Nebraska Medical Center  
Davis, Ian J., M.D., Ph.D. .... The University of North Carolina at Chapel Hill  
Davis, Scott C., Ph.D. .... Dartmouth College

#### F

Figlin, Robert A., M.D. .... Cedars-Sinai Medical Center

#### G

Garza, Mary A., M.D. .... Yale University  
Girardi, Michael, M.D. .... Yale University

Appendix D-1: Consultants Serving as Temporary Members on IRG Subcommittees in FY2015 \_\_\_\_\_

Goydos, James S., M.D. .... Rutgers Cancer Institute of New Jersey  
Graves, Kristi D., Ph.D. .... Georgetown University

**H**

Hackett, Lauren, M.P.A. .... Vanderbilt University  
Hawkins, William G., M.D. .... Washington University in St. Louis  
Hezel, Aram F., M.D. .... University of Rochester  
Hohl, Raymond J., M.D., Ph.D. .... Penn State Milton S. Hershey Medical Center  
Hong, Chi-Chen, Ph.D. .... Roswell Park Cancer Institute  
Hwang, Rosa F., M.D. .... The University of Texas MD Anderson Cancer Center

**J**

Jim, Heather S.L., Ph.D. .... H. Lee Moffitt Cancer Center & Research Institute  
Jones, Kevin B., M.D. .... University of Utah

**K**

Kalinski, Pawel, M.D., Ph.D. .... University of Pittsburgh  
Kalyanaraman, Balaraman, Ph.D. .... Medical College of Wisconsin  
Kazak, Anne E., Ph.D. .... Nemours Alfred I. duPont Hospital for Children  
Kesler, Shelli R., Ph.D. .... The University of Texas MD Anderson Cancer Center  
Kessel, David, Ph.D. .... Wayne State University  
Khan, Shafiq A., Ph.D. .... Clark Atlanta University  
Kline, Justin P., M.D. .... The University of Chicago  
Krohn, Kenneth, Ph.D. .... University of Washington

**L**

Lannigan, Deborah, Ph.D. .... Vanderbilt University  
Loffredo, Christopher A., Ph.D. .... Georgetown University

**M**

Ma, Xiaomei, Ph.D. .... Yale University  
Majumdar, Adhip P. N., D.Sc., Ph.D. .... Wayne State University  
Malafa, Mokenge P., M.D. .... H. Lee Moffitt Cancer Center & Research Institute  
Malkas, Linda H., Ph.D. .... City of Hope National Medical Center  
Manjili, Masoud H., D.V.M., Ph.D. .... Virginia Commonwealth University  
Martinez, Jesse D., Ph.D. .... The University of Arizona  
Matthay, Katherine K., M.D. .... University of California, San Francisco  
Mermelstein, Robin J., Ph.D. .... University of Illinois at Chicago  
Michor, Franziska, Ph.D. .... Dana-Farber Cancer Institute  
Morel, Penelope A., M.D. .... University of Pittsburgh  
Mortimer, Joanne E., M.D. .... City of Hope National Medical Center  
Mukhtar, Hasan, Ph.D. .... University of Wisconsin, Madison

**N**

Neugut, Alfred I., M.D., Ph.D., M.P.H. .... Columbia University

**O**

O'Connor, Kathleen L., Ph.D. .... University of Kentucky

O'Dorisio, M. Sue, M.D., Ph.D. .... The University of Iowa

Olshan, Andrew, Ph.D. .... The University of North Carolina at Chapel Hill

**P**

Pagel, John M., M.D., Ph.D. .... Fred Hutchinson Cancer Research Center

Patankar, Manish S., Ph.D. .... Eastern Virginia Medical School

Paterson, Yvonne J., Ph.D. .... University of Pennsylvania

**Q**

Quarles, Christopher C., Ph.D. .... Vanderbilt University

**R**

Rall, Glenn F., Ph.D. .... Fox Chase Cancer Center

Rathmell, Wendy K., M.D., Ph.D. .... The University of North Carolina

Reginato, Mauricio J., Ph.D. .... Drexel University College of Medicine

Reid, Mary E., Ph.D. .... Roswell Park Cancer Institute

Ritz, Jerome, M.D. .... Dana-Farber Cancer Institute

Rubenstein, James L., M.D., Ph.D. .... University of California, San Francisco

**S**

Sausville, Edward A., M.D., Ph.D. .... University of Maryland, Baltimore

Scaglioni, Pier P., M.D. .... The University of Texas Southwestern Medical Center at Dallas

Schmidt, Edward E., Ph.D. .... Montana State University, Bozeman

Spruck, Charles H., Ph.D. .... Sanford Burnham Prebys Medical Discovery Institute

Steel, Jennifer L., Ph.D. .... University of Pittsburgh

Steidl, Ulrich G., M.D., Ph.D. .... Albert Einstein College of Medicine of Yeshiva University

Sweet-Cordero, Eric A., M.D. .... Stanford University School of Medicine

Syngal, Sapna, M.D., M.P.H. .... Dana-Farber Cancer Institute

**T**

Tan, Ming T., Ph.D. .... Georgetown University

Thomas, Douglas D., Ph.D. .... University of Illinois at Chicago

Tsai, Kenneth Y., M.D., Ph.D. .... The University of Texas MD Anderson Cancer Center

Tunnell, James W., Ph.D. .... The University of Texas at Austin

**U**

Uittenbogaart, Christel H., M.D. .... University of California, Los Angeles

**W**

Walter, Roland B., M.D., Ph.D. .... Fred Hutchinson Cancer Research Center

Wang, Shizhen E., Ph.D. .... City of Hope National Medical Center

Watson, Dennis K., Ph.D. .... Medical University of South Carolina

Welch, Danny R., Ph.D. .... University of Kansas Medical Center

White, Michael A., Ph.D. .... The University of Texas Southwestern Medical Center at Dallas

White, Rebekah, M.D. .... Duke University

Williams, Karen P., Ph.D. .... Michigan State University

**Y**

Yamashiro, Darrell J., M.D., Ph.D. .... Columbia University Medical Center

**Z**

Zhang, Rugang, Ph.D. .... The Wistar Institute

Zhang, Ruiwen, M.D., Ph.D. .... Texas Tech University Health Sciences Center

Zhang, Yanping, Ph.D. .... The University of North Carolina at Chapel Hill

Zheng, Lei, M.D., Ph.D. .... Johns Hopkins University

**Total Number of Reviewers: 97**

## 2. Consultants Serving as *Ad Hoc* Committee Members on IRG Site Visit Teams in FY2015

### A

Abate-Shen, Cory, Ph.D. .... Columbia University Medical Center  
Adams-Campbell, Lucile L., Ph.D. .... Georgetown University  
Agarwal, Rajesh, Ph.D. .... University of Colorado Denver  
Ahn, Chul W., Ph.D. .... The University of Texas Southwestern Medical Center  
Albertson, Donna G., Ph.D. .... New York University

### B

Bastani, Roshan, Ph.D. .... University of California, Los Angeles  
Beckwith, Barbara J., M.A. .... The Ohio State University  
Berwick, Marianne, Ph.D. M.P.H. .... The University of New Mexico  
Bhatia, Smita, M.D., M.P.H. .... City of Hope National Medical Center  
Bjornsti, Mary-Ann, Ph.D. .... The University of Alabama at Birmingham  
Boffetta, Paolo, M.D., M.P.H. .... Icahn School of Medicine at Mount Sinai  
Bond, Jeffrey P., Ph.D. .... University of Vermont and State Agricultural College  
Bondy, Melissa L., Ph.D. .... Baylor College of Medicine  
Bowen, Deborah J., Ph.D. .... Boston University Medical Campus  
Brentjens, Renier J., M.D., Ph.D. .... Memorial Sloan Kettering Cancer Center

### C

Chaudhary, Preet M., M.D., Ph.D. .... University of Southern California  
Chen-Kiang, Selina Y., Ph.D. .... Weill Cornell Medical College  
Chernoff, Jonathan D., M.D., Ph.D. .... Fox Chase Cancer Center  
Chu, Edward, M.D. .... University of Pittsburgh  
Cody, Vivian, Ph.D. .... Hauptman-Woodward Medical Research Institute  
Cooney, Kathleen A., M.D. .... University of Michigan

### D

Debinski, Waldemar, M.D., Ph.D. .... Wake Forest University Health Sciences & Baptist  
Medical Center  
Deininger, Michael W., M.D., Ph.D. .... The University of Texas MD Anderson Cancer Center  
Djeu, Julie Y., Ph.D. .... H. Lee Moffitt Cancer Center & Research Institute  
Dowlati, Afshin, M.D. .... Case Western Reserve University  
Duckett, Colin S., Ph.D. .... University of Michigan  
Duli, Anne, M.P.A. .... Case Western Reserve University

### E

Earp, Henry S., M.D. .... The University of North Carolina at Chapel Hill  
Eaton, Kathryn A., D.V.M., Ph.D. .... University of Michigan  
El-Deiry, Wafik S., M.D., Ph.D. .... Fox Chase Cancer Center

**F**

Ferris, Robert L., M.D., Ph.D. .... University of Pittsburgh  
 Ferrone, Soldano, M.D., Ph.D. .... Massachusetts General Hospital  
 Formenti, Silvia C., M.D. .... New York University School of Medicine  
 Friedman, Debra L., M.D., R.N. .... Fred Hutchinson Cancer Research Center  
 Futscher, Bernard W., Ph.D. .... The University of Arizona

**G**

Gao, Allen C., M.D., Ph.D. .... University of California, Davis  
 Gapstur, Susan M., Ph.D., M.P.H. .... American Cancer Society, Inc.  
 Gerlach, Robert W., M.P.A. .... Dartmouth College  
 Gewirtz, David A., Ph.D. .... Virginia Commonwealth University  
 Gillanders, William E., M.D. .... Washington University in St. Louis  
 Gimotty, Phyllis A., Ph.D. .... University of Pennsylvania  
 Ginder, Gordon D., M.D. .... Virginia Commonwealth University  
 Gmitro, Arthur F., Ph.D. .... The University of Arizona  
 Gruber, Stephen B., M.D., Ph.D., M.P.H. .... University of Southern California

**H**

Hackett, Lauren, M.P.A. .... Vanderbilt University  
 Harrison, Anita L., M.P.A. .... Medical University of South Carolina  
 Heguy, Adriana, Ph.D. .... New York University School of Medicine  
 Hoopes, Jack, D.V.M., Ph.D. .... Dartmouth College  
 Houghton, Janet A., Ph.D. .... Cleveland Clinic Lerner College of Medicine  
 Huang, Tim H., Ph.D. .... The University of Texas Health Science Center at San Antonio  
 Hung, Mien-Chie, Ph.D. .... The University of Texas MD Anderson Cancer Center  
 Hussain, Maha H., M.D. .... University of Michigan  
 Hyslop, Terry, Ph.D. .... Duke University

**J**

Jensen, Roy A., M.D. .... University of Kansas  
 Jeraj, Robert, Ph.D. .... University of Wisconsin, Madison  
 Jones, David A., Ph.D. .... Oklahoma Medical Research Foundation  
 Jones, Richard J., M.D. .... Johns Hopkins University

**K**

Kane, Madeleine A., M.D., Ph.D. .... University of Colorado Denver  
 Kelley, Mark R., Ph.D. .... Indiana University–Purdue University Indianapolis  
 Kerr, William G., Ph.D. .... State University of New York Upstate Medical University  
 Keyomarsi, Khandan, Ph.D. .... The University of Texas MD Anderson Cancer Center  
 Khuri, Fadlo R., M.D. .... Emory University  
 Kinney, Anita Y., Ph.D., R.N. .... The University of New Mexico Health Sciences Center  
 Knudsen, Karen E., Ph.D. .... Thomas Jefferson University  
 Kumar, Nagi B., Ph.D. .... H. Lee Moffitt Cancer Center & Research Institute

**L**

Lang, Frederick F., M.D. .... The University of Texas MD Anderson Cancer Center  
 Le Beau, Michelle M., Ph.D. .... The University of Chicago  
 Lenkinski, Robert E., Ph.D. .... The University of Texas Southwestern Medical Center at Dallas  
 Lubaroff, David M., Ph.D. .... The University of Iowa  
 Lynch, Thomas J., M.D. .... Yale University

**M**

Malkas, Linda H., Ph.D. .... City of Hope National Medical Center  
 Mao, Li, M.D. .... University of Maryland, Baltimore  
 Marzluff, William F., Ph.D. .... The University of North Carolina at Chapel Hill  
 Mayne, Susan T., Ph.D. .... Yale University  
 McCarthy, James B., Ph.D. .... University of Minnesota  
 McWeeney, Shannon K., Ph.D. .... Oregon Health & Science University  
 Meneses, Karen M., Ph.D., R.N. .... The University of Alabama at Birmingham  
 Mermelstein, Robin J., Ph.D. .... University of Illinois at Chicago  
 Mikkelsen, Tom, M.D. .... Henry Ford Health System  
 Moley, Jeffrey F., M.D. .... Washington University in St. Louis  
 Mori, Motomi, Ph.D. .... Oregon Health & Science University  
 Munster, Pamela N., M.D. .... University of California, San Francisco

**O**

O'Connor, Kathleen L., Ph.D. .... University of Kentucky  
 O'Malley, Michael S., Ph.D. .... The University of North Carolina at Chapel Hill  
 Oeffinger, Kevin Charles, M.D. .... Memorial Sloan Kettering Cancer Center  
 Olshan, Andrew, Ph.D. .... The University of North Carolina at Chapel Hill

**P**

Partridge, Edward E., M.D. .... The University of Alabama at Birmingham  
 Pasche, Boris, M.D., Ph.D. .... Wake Forest University Health Sciences & Baptist Medical Center  
 Perez, Raymond P., M.D. .... University of Kansas Medical Center  
 Piazza, Gary A., Ph.D. .... University of South Alabama  
 Pieper, Russell O., Ph.D. .... University of California, San Francisco  
 Platanius, Leonidas C., M.D., Ph.D. .... Northwestern University  
 Porter, Peggy L., M.D. .... Fred Hutchinson Cancer Research Center  
 Prossnitz, Eric R., Ph.D. .... The University of New Mexico Health Sciences Center

**Q**

Quaranta, Vito, M.D. .... University of Pennsylvania

**R**

Redmond, Carol K., Sc.D., Ph.D. .... University of Pittsburgh  
 Resnicow, Ken A., Ph.D. .... University of Michigan  
 Rosner, Marsha R., Ph.D. .... The University of Chicago

**S**

Schwartz, Ann G., Ph.D., M.P.H. .... Wayne State University  
Serody, Jonathan S., M.D. .... The University of North Carolina at Chapel Hill  
Shea, Thomas C., M.D. .... The University of North Carolina at Chapel Hill  
Shyr, Yu, Ph.D. .... Vanderbilt University  
Singh, Rakesh K., Ph.D. .... University of Nebraska Medical Center  
Sotomayor, Eduardo M., M.D. .... H. Lee Moffitt Cancer Center & Research Institute  
Stauffer, Cynthia V., Ph.D. .... Purdue University  
Stein, Gary S., Ph.D. .... University of Vermont and State Agricultural College

**T**

Tanzer, Linda L., B.S. .... Rutgers Biomedical and Health Sciences  
Tycko, Benjamin, M.D., Ph.D. .... Gordon Research Conferences

**V**

Van Breemen, Richard B., Ph.D. .... University of Illinois at Chicago  
Van Etten, Richard A., M.D., Ph.D. .... University of California, Irvine  
Vertino, Paula M., Ph.D. .... Emory University  
Vuori, Kristiina, M.D., Ph.D. .... Sanford Burnham Prebys Medical Discovery Institute

**W**

Weiner, George J., M.D. .... The University of Iowa  
Weiss, Geoffrey R., M.D. .... University of Virginia  
Welch, Danny R., Ph.D. .... University of Kansas Medical Center  
Wilburn, Louella S., M.S. .... People Living With Cancer

**Z**

Zhang, Zhong-Yin, Ph.D. .... Indiana University–Purdue University Indianapolis  
Zutter, Mary M., M.D. .... Vanderbilt University

**Total Number of Reviewers: 118**

### 3. Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

#### A

Abdulkadir, Sarki A., M.D., Ph.D.	Northwestern University
Abounader, Roger, M.D., Ph.D.	University of Virginia
Abraham, George N., M.D., Ph.D.	University of Rochester
Abrams, Scott I., Ph.D.	Roswell Park Cancer Institute
Acharya, Raj S., Ph.D.	The Pennsylvania State University
Acharya, Samir, Ph.D.	The Ohio State University
Achilefu, Samuel, Ph.D.	Washington University in St. Louis
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Akabani, Gamal, Ph.D.	Texas A&M University
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Albertson, Donna G., Ph.D.	New York University
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Artman, Michael, M.D.	The Children’s Mercy Hospitals and Clinics
Ashendel, Curtis L., Ph.D.	Purdue University
Ashktorab, Hassan, Ph.D.	Howard University
Athar, Mohammad, Ph.D.	The University of Alabama at Birmingham
Atkins, Michael B., M.D.	Georgetown University
Atkins, William M., Ph.D.	University of Washington
Attisano, Liliana, Ph.D.	University of Toronto
Au, Jessie L. S., Pharm.D., Ph.D.	Optimum Therapeutics, LLC
Audrain-McGovern, Janet E., Ph.D.	University of Pennsylvania
Auerbach, Robert, Ph.D.	University of Wisconsin, Madison
Augenlicht, Leonard H., Ph.D.	Albert Einstein College of Medicine of Yeshiva University
Avantaggiati, Maria L., M.D., Ph.D.	Georgetown University
Avery, Anne C., V.M.D., Ph.D.	Colorado State University-Fort Collins
Avis, Nancy E., Ph.D.	Wake Forest University Health Sciences & Baptist Medical Center
Awasthi, Vibhudutta, Ph.D.	The University of Oklahoma Health Sciences Center
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**B**

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Bai, Mingfeng, Ph.D.	University of Pittsburgh
Bailey, Ryan C., Ph.D.	University of Illinois at Urbana-Champaign
Baker, Amanda F., Pharm.D., Ph.D.	The University of Arizona
Baker, Julie C., Ph.D.	Stanford University
Baker, Sharyn D., Pharm.D., Ph.D.	St. Jude Children’s Research Hospital
Baker, Tamara A., Ph.D.	University of Kansas
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### Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

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Banerjee, Sushanta K., Ph.D.	Kansas City VA Medical Center
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Bao, Ting, M.D., D.A.B.M.A.	Memorial Sloan Kettering Cancer Center
Baranova, Anna V., Ph.D.	George Mason University
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Barcellos-Hoff, Mary H., Ph.D.	New York University School of Medicine
Bareli, Menashe, Ph.D.	The University of Texas MD Anderson Cancer Center
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Barocas, Daniel A., M.D., M.P.H.	Vanderbilt University
Barrett, Michael T., Ph.D.	Translational Genomics Research Institute
Barrick, Christopher G., Ph.D.	State University of New York at Buffalo
Barth, Rolf F., M.D.	The Ohio State University
Barton, Debra L., Ph.D., R.N., A.O.C.N., F.A.A.N.	University of Michigan
Bass, Adam J., M.D.	Dana-Farber Cancer Institute
Bastia, Deepak, Ph.D.	Medical University of South Carolina
Basu, Hirak S., Ph.D.	University of Wisconsin, Madison
Basu, Sujit, M.D., Ph.D.	The Ohio State University
Batra, Surinder K., Ph.D.	University of Nebraska Medical Center
Batt, Carl A., Ph.D.	Cornell University
Bearden, James D., M.D.	Spartanburg Regional Medical Center
Beauchamp, Robert D., M.D.	Vanderbilt University
Bechara, Antoine, Ph.D.	University of Southern California
Becich, Michael J., M.D., Ph.D.	University of Pittsburgh
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Beck, John R., M.D.	Fox Chase Cancer Center
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Belinsky, Steven A., Ph.D.	Lovelace Biomedical Environmental Research Institute
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Bobashev, Georgiy, Ph.D.	RTI International
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Bock, Beth C., Ph.D.	The Miriam Hospital
Bock, Cathryn H., Ph.D., M.P.H.	Wayne State University
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Bohn, Robert, Ph.D.	National Institute of Standards and Technology
Boise, Lawrence H., Ph.D.	Emory University
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Borch, Richard F., M.D., Ph.D.	Purdue University
Borden, Ernest C., M.D.	Cleveland Clinic
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Breit, Jeffrey, Ph.D.	Bend Research, Inc.
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Burns, Linda J., M.D.	University of Minnesota
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 Camarero, Julio A., Ph.D. .... The University of Southern California  
 Cameron, Carrie A., Ph.D. .... The University of Texas MD Anderson Cancer Center  
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 Cantor, Sharon B., Ph.D. .... University of Massachusetts Medical School  
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 Caron, Marc G., Ph.D. .... Duke University  
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Cho, Hyunyi, Ph.D.	Purdue University
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Colcher, David M., Ph.D.	City of Hope National Medical Center
Cole, Michael D., Ph.D.	Dartmouth College
Comai, Lucio, Ph.D.	University of Southern California
Conaway, Mark R., Ph.D.	University of Virginia
Connell, Philip P., M.D.	The University of Chicago
Contag, Christopher H., Ph.D.	Stanford University
Conzen, Suzanne D., M.D.	The University of Chicago
Cook, Jeanette G., Ph.D.	The University of North Carolina at Chapel Hill
Cooley, Philip C., M.S.	RTI International
Cooper, Gregory S., M.D.	Case Western Reserve University
Cooper, Michael K., M.D.	Vanderbilt University
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Crawford, Sybil L., Ph.D.	University of Massachusetts Medical School
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### Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

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#### D

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D'Souza, Warren D., Ph.D. .... University of Maryland, Baltimore  
Daaka, Yehia, Ph.D. .... University of Florida  
Dahiya, Rajvir, Ph.D. .... Northern California Institute of Research & Education  
Daly, Mary B., M.D., Ph.D. .... Fox Chase Cancer Center  
Damodaran, Chendil, Ph.D. .... University of Louisville  
Dang, Nam H., M.D., Ph.D. .... University of Florida  
Daniel, Larry W., Ph.D. .... Wake Forest University Health Sciences & Baptist Medical Center  
Daniulaityte, Raminta, Ph.D. .... Wright State University  
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Dasgupta, Ramanuj, Ph.D. .... New York University School of Medicine  
Dash, Srikanta, Ph.D. .... Tulane University  
Daskalakis, Constantine, Sc.D. .... Thomas Jefferson University  
Datta, Kamal, M.D. .... Georgetown University  
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Davalos, Rafael V., Ph.D. .... Virginia Polytechnic Institute and State University  
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Davis, Michael J., Ph.D. .... University of Missouri  
Day, Roger S., Sc.D. .... University of Pittsburgh  
Day, Stephen P., Ph.D. .... Hologic, Inc.  
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De Leon, Marino, Ph.D. .... Loma Linda University  
de Winter, Alex, Ph.D. .... General Electric Healthcare Ventures  
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Dearling, Jason L., Ph.D. .... Boston Children's Hospital  
Debinski, Waldemar, M.D., Ph.D. .... Wake Forest University Health Sciences &  
Baptist Medical Center  
Debnath, Asim K., Ph.D. .... New York Blood Center  
DeClerck, Yves A., M.D. .... University of Southern California  
DeCoster, Mark A., Ph.D. .... Louisiana Tech University  
Deiner, Stacie, M.D. .... The Mount Sinai Hospital  
Deininger, Prescott L., Ph.D. .... Tulane University  
Del Fabbro, Egidio, M.D. .... Virginia Commonwealth University  
Delnevo, Cristine D., Ph.D., M.P.H. .... Rutgers Biomedical and Health Sciences  
DeLong, Robert K., Ph.D. .... Kansas State University

Delva, Jorge, Ph.D. ....	University of Michigan
Demaria, Sandra, M.D. ....	New York University School of Medicine
Demore, Nancy K., M.D. ....	Medical University of South Carolina
Deng, Yibin, M.D., Ph.D. ....	University of Minnesota
Denis, Gerald V., Ph.D. ....	Boston University Medical Campus
Denko, Nicholas C., M.D., Ph.D. ....	The Ohio State University
Dennis, Leslie K., Ph.D. ....	The University of Arizona
Dent, Paul, Ph.D. ....	Virginia Commonwealth University
Dewhirst, Mark W., D.V.M., Ph.D. ....	Duke University
Diamond, Alan, Ph.D. ....	University of Illinois at Chicago
Diaz, Manuel O., M.D. ....	Loyola University, Chicago
Di Carlo, Dino, Ph.D. ....	University of California, Los Angeles
Dicker, Adam P., M.D., Ph.D. ....	Thomas Jefferson University
Diehl, Michael R., Ph.D. ....	Rice University
Diergaarde, Brenda B., Ph.D. ....	University of Pittsburgh
Dignan, Mark B., Ph.D., M.P.H. ....	University of Kentucky
Diller, Lisa R., M.D. ....	Dana-Farber Cancer Institute
Dimri, Goberdhan P., Ph.D. ....	George Washington University
Ding, Han-Fei, Ph.D. ....	Georgia Regents University
Dingli, David J., M.D., Ph.D. ....	Mayo Clinic
Dino, Geri A., Ph.D. ....	West Virginia University
Dinov, Ivo D., Ph.D. ....	University of Michigan
DiPersio, C. Michael, Ph.D. ....	Albany Medical College
DiSilvestro, Paul A., M.D. ....	Women and Infants Hospital of Rhode Island
Distelhorst, Clark W., M.D. ....	Case Western Reserve University
Divgi, Chaitanya R., M.D. ....	Columbia University Health Sciences
Divine, George W., Ph.D. ....	Henry Ford Health System
Djaballah, Hakim, Ph.D. ....	Memorial Sloan Kettering Cancer Center
Djeu, Julie Y., Ph.D. ....	H. Lee Moffitt Cancer Center & Research Institute
Djuric, Zora, Ph.D. ....	University of Michigan
Doherty, Gerard M., M.D. ....	Boston University Medical Campus
Dong, Lei, Ph.D. ....	Scripps Research Institute
Donovan, Heidi S., Ph.D., R.N. ....	University of Pittsburgh
Dooley, William C., M.D. ....	The University of Oklahoma Health Sciences Center
Dorgan, Joanne F., Ph.D., M.P.H. ....	University of Maryland, Baltimore
Dorrestein, Pieter C., Ph.D. ....	University of California, San Diego
Dorsey, Susan G., Ph.D., R.N., F.A.A.N. ....	University of Maryland, Baltimore
Dou, Qing P., Ph.D. ....	Wayne State University
Dovat, Sinisa, M.D., Ph.D. ....	Penn State Milton S. Hershey Medical Center
Dowlati, Afshin, M.D. ....	Case Western Reserve University
Downs, Stephen M., M.D. ....	Indiana University–Purdue University, Indianapolis
Doyle, Marvin M., Ph.D. ....	University of Rochester
Drabkin, Harry A., M.D. ....	Medical University of South Carolina
Drake, Richard R., Ph.D. ....	Medical University of South Carolina
Dritschilo, Anatoly, M.D. ....	Georgetown University
Dubbs, Robert M., J.D. ....	Obermayer Rebmann Maxwell & Hippel LLP
Dubeau, Louis, M.D., Ph.D. ....	University of Southern California
Duda, Dan G., D.M.D., Ph.D. ....	Massachusetts General Hospital

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Duerksen-Hughes, Penelope J., Ph.D.	Loma Linda University
Duffy, David C., Ph.D.	Quanterix Corporation
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Dunkel, Ira J., M.D.	Memorial Sloan Kettering Cancer Center
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Dunton, Genevieve F., Ph.D., M.P.H.	University of Southern California
Dupont, William D., Ph.D.	Vanderbilt University
Dupuy, Adam J., Ph.D.	The University of Iowa
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Eckelman, William C., Ph.D., M.P.H.	Molecular Tracer, LLC
Eckhart, Walter, Ph.D.	Salk Institute for Biological Studies
Edelen, Maria O., Ph.D.	RAND Corporation
Edil, Barish H., M.D.	University of Colorado Denver
Edwards, D. Scott, Ph.D.	SciFluor Life Sciences, LLC
Edwards, Jeremy S., Ph.D.	The University of New Mexico
Eheman, Christie R., Ph.D.	U.S. Centers for Disease Control and Prevention
Eib, Lynn A., B.A.	Consultant
Eibl, Guido E. M., M.D.	University of California, Los Angeles
Eischen, Christine M., Ph.D.	Vanderbilt University
Eiseman, Julie L., Ph.D.	University of Pittsburgh
Eklund, Elizabeth A., M.D.	Northwestern University
Elashoff, David, Ph.D.	University of California, Los Angeles
El-Ashry, Dorraya, Ph.D.	University of Miami Miller School of Medicine
El-Bayoumy, Karam E., Ph.D.	Penn State Milton S. Hershey Medical Center
El-Deiry, Wafik S., M.D., Ph.D.	Fox Chase Cancer Center
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Eley, John W., M.D., M.P.H.	Emory University
Eliason, James F., Ph.D.	Wayne State University
Ellenson, Lora H., M.D.	Weill Cornell Medical College of Cornell University
Elliott, John T., Ph.D.	National Institute of Standards & Technology
Elliott, Thomas E., M.D.	HealthPartners Institute
Ellis, Nathan A., Ph.D.	The University of Arizona
El-Rifai, Wael, M.D., Ph.D.	Vanderbilt University
El-Sayed, Ivan H., M.D.	University of California, San Francisco
Eltoum, Isameldin A., M.D.	The University of Alabama at Birmingham
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Emelianov, Stanislav Y., Ph.D.	The University of Texas at Arlington
Emens, Leisha A., M.D., Ph.D.	Johns Hopkins University
Emerson, Jane, M.D., Ph.D.	University of Southern California
Engelman, Jeffrey A., M.D., Ph.D.	Massachusetts General Hospital
Epplein, Meira, Ph.D.	Vanderbilt University

Epstein, Alan L., M.D., Ph.D.	University of Southern California
Epstein, Jennifer A., Ph.D.	Weill Cornell Medical College of Cornell University
Erdei, Esther, Ph.D., M.P.H.	The University of New Mexico Health Sciences Center
Erdman, Susan E., D.V.M., M.P.H.	Massachusetts Institute of Technology
Erickson, David, Ph.D.	Cornell University
Esser, Karyn A., Ph.D.	University of Kentucky
Essner, Jeffrey J., Ph.D.	Iowa State University
Etkin, Amit, M.D., Ph.D.	Palo Alto Veterans Institute for Research
Evans, Conor L., Ph.D.	Massachusetts General Hospital
Evers, Bernard M., M.D.	University of Kentucky
Ewing, James R., Ph.D.	Henry Ford Health System
Exner, Agata A., Ph.D.	Case Western Reserve University

**F**

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Fan, Guang, M.D., Ph.D.	Oregon Health & Science University
Fan, Hung Y., Ph.D.	University of California, Irvine
Fan, Rong, Ph.D.	Yale University
Fan, Weimin, M.D., M.P.H.	Medical University of South Carolina
Fan, Z. Hugh, Ph.D.	University of Florida
Farag, Sherif S., M.D., Ph.D.	Indiana University–Purdue University, Indianapolis
Fatatis, Alessandro, M.D., Ph.D.	Drexel University
Fearon, Eric R., M.D., Ph.D.	University of Michigan
Fedorov, Andriy, Ph.D.	Brigham and Women’s Hospital
Felding, Brunhilde, Ph.D.	Scripps Research Institute
Feleppa, Ernest J., Ph.D.	Riverside Research Institute
Fennessy, Fiona, M.D., Ph.D.	Harvard Medical School
Fernander, Anita F., Ph.D.	University of Kentucky
Ferrance, Jerome P., Ph.D.	J2F-Engineering
Ferrari, Anna C., M.D.	New York University School of Medicine
Ferrone, Soldano, M.D., Ph.D.	Massachusetts General Hospital
Festing, David S., Ph.D.	Treatment Research Institute, Inc.
Feusner, James, M.D.	Children’s Hospital & Research Center at Oakland
Figlin, Robert A., M.D.	Cedars-Sinai Medical Center
Figueiredo, Jane C., Ph.D.	University of Southern California
Fisher, Brian D., Ph.D.	Simon Fraser University
Fisher, Christopher, Ph.D.	NanoVir, LLC
Fisher, Gary J., Ph.D.	University of Michigan
Fisher, Joy D., M.A.	Johns Hopkins University
Fisher, Susan G., Ph.D.	Temple University
Fishman, David A., M.D.	The Mount Sinai Hospital
Fitzgerald-Bocarsly, Patricia, Ph.D.	Rutgers Biomedical and Health Sciences
Flaherty, Lawrence E., M.D.	Wayne State University
Flaig, Thomas W., M.D.	University of Colorado Denver
Flaumenhaft, Robert C., M.D., Ph.D.	Beth Israel Deaconess Medical Center
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Flemington, Erik K., Ph.D.	Tulane University
Florez, Karen R., Dr.P.H.	RAND Corporation
Fong, Yiu-Liang, Ph.D.	Abbott Laboratories
Fonseca, Rafael, M.D.	Mayo Clinic, Arizona
Ford, Eric C., Ph.D.	University of Washington
Ford, James M., M.D.	Stanford University
Ford, Jean G., M.D.	Johns Hopkins University
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Forrest, Marcus L., Ph.D.	University of Kansas
Forsyth, Peter A., M.D.	University of South Florida
Fortina, Paolo M., M.D., Ph.D.	Thomas Jefferson University
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Fridley, Brooke L., Ph.D.	University of Kansas Medical Center
Friedman, Debra L., M.D., R.N.	Fred Hutchinson Cancer Research Center
Fritsche, Herbert A., Ph.D.	The University of Texas MD Anderson Cancer Center
Fu, Haiyan, Ph.D.	Emory University
Fu, Jianping, Ph.D.	University of Michigan
Fu, Mei R., Ph.D., R.N., A.C.N.S.-B.C., F.A.A.N.	New York University
Fu, Pingfu, Ph.D.	Case Western Reserve University
Fu, Rongwei, Ph.D.	Oregon Health & Science University
Fu, Yang-Xin, M.D., Ph.D.	The University of Chicago
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Fujita, Mayumi, M.D., Ph.D.	University of Colorado Denver
Fukumura, Dai, M.D., Ph.D.	Massachusetts General Hospital
Fuloria, Jyotsna, M.B.B.S.	Ochsner Clinic Foundation
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Furdui, Cristina, Ph.D.	Wake Forest University Health Sciences

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Gabrilovich, Dmitry I., M.D., Ph.D.	The Wistar Institute
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Galban, Craig J., Ph.D.	University of Michigan
Galbraith, David W., Ph.D.	The University of Arizona
Galipeau, Jacques, M.D.	Emory University
Gallagher, Carla J., Ph.D.	Penn State Milton S. Hershey Medical Center
Gallick, Gary E., Ph.D.	The University of Texas MD Anderson Cancer Center
Galloway, Robert L., Ph.D.	Vanderbilt University

Ganapathy, Vadivel, Ph.D. ....	Georgia Regents University
Ganju, Ramesh K., Ph.D. ....	The Ohio State University
Ganz, Patricia A., M.D. ....	University of California, Los Angeles
Gao, Feng, Ph.D. ....	Washington University in St. Louis
Gao, Nan, Ph.D. ....	Rutgers, The State University of New Jersey
Gao, Shou-Jiang, Ph.D. ....	University of Southern California
Gao, Xiaohu, Ph.D. ....	University of Washington
Garbow, Joel R., Ph.D. ....	Washington University in St. Louis
Garcia, Jose M., M.D., Ph.D. ....	Baylor College of Medicine
Gartel, Andrei L., Ph.D. ....	The University of Illinois at Chicago
Gartenhaus, Ronald B., M.D. ....	University of Maryland, Baltimore
Gascoyne, Peter R. C., Ph.D. ....	The University of Texas MD Anderson Cancer Center
Gaspar, Laurie E., M.D. ....	University of Colorado Denver
Gaston, Sandra M., Ph.D. ....	Beth Israel Deaconess Medical Center
Gatenby, Robert A., M.D. ....	H. Lee Moffitt Cancer Center & Research Institute
Gatsonis, Constantine A., Ph.D. ....	Brown University
Gau, Vincent, Ph.D. ....	GeneFluidics, Inc.
Gavai, Ashvinikumar, Ph.D. ....	Bristol-Myers Squibb Pharmaceutical Research
Geacintov, Nicholas E., Ph.D. ....	New York University Langone Medical Center
Gebreyes, Wondwossen A., D.V.M., Ph.D. ....	The Ohio State University
Gee, James C., Ph.D. ....	University of Pennsylvania
Gelmann, Edward P., M.D. ....	Columbia University Health Sciences
Gelovani, Juri G., M.D., Ph.D. ....	Wayne State University
Genkinger, Jeanine M., Ph.D. ....	Columbia University Health Sciences
George, Steven C., M.D., Ph.D. ....	Washington University in St. Louis
Gerend, Mary A., Ph.D. ....	Northwestern University
Gerig, Guido, Ph.D. ....	University of Utah
Gestwicki, Jason E., Ph.D. ....	University of California, San Francisco
Gewirtz, Abigail, Ph.D. ....	University of Minnesota
Ghandehari, Hamid, Ph.D. ....	University of Utah
Ghobrial, Irene M., M.D. ....	Dana-Farber Cancer Institute
Ghosh, Paramita M., Ph.D. ....	University of California, Davis
Ghoshal, Kalpana, Ph.D. ....	The Ohio State University
Giaccia, Amato J., Ph.D. ....	Stanford University
Giaccone, Giuseppe, M.D., Ph.D. ....	Georgetown University
Giam, Chou-Zen, Ph.D. ....	U.S. Uniformed Services University of the Health Sciences
Giardina, Charles A., Ph.D. ....	University of Connecticut, Storrs
Gibson, Raymond E., Ph.D. ....	Gibson Consulting
Giger, Maryellen L., Ph.D. ....	The University of Chicago
Giguere, Jeffrey K., M.D. ....	Greenville Health System
Gilbert, David M., Ph.D. ....	Florida State University
Gilchrist, Gerald S., M.D. ....	Mayo Clinic
Gill, Steven R., Ph.D. ....	University of Rochester
Gillanders, William E., M.D. ....	Washington University in St. Louis
Gillespie, G. Yancy, Ph.D. ....	The University of Alabama at Birmingham
Gillies, Robert J., PhD. ....	H. Lee Moffitt Cancer Center & Research Institute
Gimotty, Phyllis A., Ph.D. ....	University of Pennsylvania
Girotti, Albert, Ph.D. ....	Medical College of Wisconsin

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Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

Giuliano, Anna R., Ph.D. ....	H. Lee Moffitt Cancer Center & Research Institute
Gius, David, M.D., Ph.D. ....	Northwestern University
Given, Barbara A., Ph.D., R.N., F.A.A.N. ....	Michigan State University
Glatstein, Eli J., M.D. ....	University of Pennsylvania
Glazer, Peter M., M.D., Ph.D. ....	Yale University
Glorioso, Joseph C., Ph.D. ....	University of Pittsburgh
Glunde, Kristine, Ph.D. ....	Johns Hopkins Hospital
Gmeiner, William H., Ph.D. ....	Wake Forest University Health Sciences & Baptist Medical Center
Gmitro, Arthur F., Ph.D. ....	The University of Arizona
Goel, Ajay, Ph.D. ....	Baylor University Medical Center
Goetz, Matthew P., M.D. ....	Mayo Clinic
Goga, Andrei, M.D., Ph.D. ....	University of California, San Francisco
Gold, David V., Ph.D. ....	Garden State Cancer Center
Gold, Ellen B., Ph.D. ....	University of California, Davis
Goldkorn, Amir, M.D. ....	University of Southern California
Goldman, Radoslav, Ph.D. ....	Georgetown University
Goldsmith, Elizabeth J., Ph.D. ....	The University of Texas Southwestern Medical Center at Dallas
Golemis, Erica A., Ph.D. ....	Fox Chase Cancer Center
Gomer, Charles J., Ph.D. ....	Children’s Hospital Los Angeles
Gooding, Lori, Ph.D. ....	University of Kentucky
Goodwin, Edwin H., Ph.D. ....	New Mexico Consortium, Inc.
Goodwin, Pamela J., M.D. ....	University of Toronto
Gopalakrishnan, Vidya, Ph.D. ....	The University of Texas MD Anderson Cancer Center
Gospodarowicz, Mary K., M.D. ....	Princess Margaret Hospital
Gottesfeld, Joel M., Ph.D. ....	Scripps Research Institute
Gottschalk, Stephen, M.D. ....	Baylor College of Medicine
Govindan, Ramaswamy, M.D. ....	Washington University in St. Louis
Grady, William M., M.D. ....	Fred Hutchinson Cancer Research Center
Grandis, Jennifer R., M.D. ....	University of Pittsburgh
Grant, Marcia L., R.N., D.N.Sc. ....	City of Hope National Medical Center
Grant, Steven, M.D. ....	Virginia Commonwealth University
Gravekamp, Claudia, Ph.D. ....	Albert Einstein College of Medicine of Yeshiva University
Graves, Edward E., Ph.D. ....	Stanford University
Gray, Robert J., Ph.D. ....	Dana-Farber Cancer Institute
Graziano, Stephen L., M.D. ....	State University of New York Upstate Medical University
Grdina, David J., Ph.D. ....	The University of Chicago
Grdzlishvili, Valery Z., Ph.D. ....	The University of North Carolina at Charlotte
Green, Mark A., Ph.D. ....	Indiana University–Purdue University, Indianapolis
Greenberg, Daniel J., B.A. ....	Media Rez, LLC
Gregg, Jeffrey P., M.D. ....	University of California, Davis
Gregory, Richard I., Ph.D. ....	Children’s Hospital Corporation
Griffin, Robert J., Ph.D. ....	University of Arkansas for Medical Sciences
Griffin, Timothy J., Ph.D. ....	University of Minnesota
Grimes, H. Leighton, Ph.D. ....	Cincinnati Children’s Hospital Medical Center
Grippio, Paul J., Ph.D. ....	University of Illinois at Chicago
Grobin, Adam W., Ph.D. ....	Allergan Inc.

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Groden, Joanna L., Ph.D.	The Ohio State University
Gronemeyer, Suzanne A., Ph.D.	St. Jude Children’s Research Hospital
Gross, Cynthia R., Ph.D.	University of Minnesota
Gross, Mitchell E., M.D., Ph.D.	University of Southern California
Gross, Myron D., Ph.D.	University of Minnesota
Grossniklaus, Hans E., M.D.	Emory University
Groutas, William C., Ph.D.	Wichita State University
Gruber, Stephen B., M.D., Ph.D., M.P.H.	University of Southern California
Grufferman, Seymour, M.D., Dr.P.H.	The University of New Mexico
Grundfest, Warren S., M.D.	University of California, Los Angeles
Gu, Li-Qun, Ph.D.	University of Missouri
Gu, Xiaohui, Ph.D.	North Carolina State University
Gu, Xinbin, M.D., Ph.D.	Howard University
Guan, Jun-Lin, Ph.D.	University of Cincinnati
Guda, Chittibabu, Ph.D.	University of Nebraska Medical Center
Gudkov, Andrei V., D.Sc., Ph.D.	Roswell Park Cancer Institute
Guha, Chandan, Ph.D.	Albert Einstein College of Medicine of Yeshiva University
Guidry, Jeffrey J., Ph.D.	Texas A&M University
Gulley, Margaret L., M.D.	The University of North Carolina at Chapel Hill
Guo, Grace L., Ph.D.	Rutgers, The State University of New Jersey
Gupta, Sanjay, Ph.D.	Case Western Reserve University
Gutkind, J. Silvio, Ph.D.	National Institute of Dental and Craniofacial Research
Gutmann, David H., M.D., Ph.D.	Washington University in St. Louis
Guttridge, Denis C., Ph.D.	The Ohio State University

**H**

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Haase, Volker H., M.D.	Vanderbilt University
Habelhah, Hasem, Ph.D.	The University of Iowa
Hahn, Elizabeth A., M.A.	Northwestern University
Hahn, William C., M.D., Ph.D.	Dana-Farber Cancer Institute
Haimovitz-Friedman, Adriana, Ph.D.	Memorial Sloan Kettering Cancer Center
Haines, Dale S., Ph.D.	Temple University
Halabi, Susan, Ph.D.	Duke University
Hambardzumyan, Dolares, Ph.D.	Cleveland Clinic Lerner College of Medicine of Case Western Reserve University
Hamburger, Anne W., Ph.D.	University of Maryland, Baltimore
Hamilton, Ann S., Ph.D.	University of Southern California
Hamilton, Stanley R., M.D.	The University of Texas MD Anderson Cancer Center
Hamilton, Thomas C., Ph.D.	Fox Chase Cancer Center
Hammer, Daniel A., Ph.D.	University of Pennsylvania
Hammond, Scott M., Ph.D.	The University of North Carolina at Chapel Hill
Hammons, George J., Ph.D.	Philander Smith College
Han, Sang M., Ph.D.	The University of New Mexico
Hansen, Kirk C., Ph.D.	University of Colorado Denver
Hansen, Laura A., Ph.D.	Creighton University

Hansen, Marc F., Ph.D.	University of Connecticut School of Dental Medicine
Hardman, Wanda E., Ph.D.	Marshall University
Hardy, Jerry L.	Us TOO International, Inc.
Harhaj, Edward W., Ph.D.	Johns Hopkins University
Harismendy, Olivier, Ph.D.	University of California, San Diego
Harpole, David H., M.D.	Duke University
Harrington, Maureen A., Ph.D.	Indiana University School of Medicine
Harris, Eleanor E., M.D.	East Carolina University
Hartford, Alan C., M.D., Ph.D.	Dartmouth-Hitchcock Medical Center
Hartshorn, Kevan L., M.D.	Boston Medical Center
Haura, Eric B., M.D.	H. Lee Moffitt Cancer Center & Research Institute
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He, Jiang, Ph.D.	University of Virginia
Heckman, Carolyn J., Ph.D.	Fox Chase Cancer Center
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Held, Jason M., Ph.D.	Washington University in St. Louis
Held, Kathryn D., Ph.D.	Massachusetts General Hospital
Hellstrom, Ingegerd E., M.D., Ph.D.	University of Washington
Helzlsouer, Kathy J., M.D.	Mercy Health Services
Henikoff, Steven, Ph.D.	Fred Hutchinson Cancer Research Center
Herbst, Roy S., M.D., Ph.D., M.P.H.	Yale University
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Hersch, Rebekah K., Ph.D.	Isa Associates, Inc.
Hesketh, Peter J., Ph.D.	Georgia Institute of Technology
Heslop, Helen E., M.D.	Baylor College
Heston, Warren D., Ph.D.	Cleveland Clinic Foundation
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Hilakivi-Clarke, Leena A., Ph.D.	Georgetown University
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Hillhouse, Joel J., Ph.D.	East Tennessee State University
Hinds, Philip W., Ph.D.	Tufts University
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Hlatky, Lynn, Ph.D.	Genesys Research Institute, Inc.
Hlavacek, William S., Ph.D.	Los Alamos National Laboratory
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Ho, Shuk-Mei, Ph.D.	University of Cincinnati

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Hoering, Antje, Ph.D. ....	Cancer Research and Biostatistics
Hoffman, Amy J., Ph.D., R.N. ....	Michigan State University
Hogan, Michael E., Ph.D. ....	GMSbiotech, Inc.
Hohl, Raymond J., M.D., Ph.D. ....	Penn State Milton S. Hershey Medical Center
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Holford, Theodore R., Ph.D. ....	Yale University
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Holl, Mark R., Ph.D. ....	Arizona State University, Tempe
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Holmen, Sheri L., Ph.D. ....	The University of Utah
Holsworth, Daniel, Ph.D. ....	Stemnext, LLC
Holt, Jeffrey T., M.D. ....	Commonwealth Medical College
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Hooper, Douglas C., Ph.D. ....	Thomas Jefferson University
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Houghton, Peter J., Ph.D. ....	St. Jude Children’s Research Hospital
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Hsieh, Jer-Tsong, Ph.D. ....	The University of Texas Southwestern Medical Center
Hsu, Chun-Nan, Ph.D. ....	University of California, San Diego
Hu, Guanghui, Ph.D. ....	Merck & Co, Inc.
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Hung, Chien-Fu, Ph.D. ....	Johns Hopkins University
Hung, Mien-Chie, Ph.D. ....	The University of Texas MD Anderson Cancer Center
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### Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

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Ittmann, Michael M., M.D., Ph.D. .... Baylor College of Medicine  
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### Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

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Wondrak, Georg T., Ph.D.	The University of Arizona
Wong, David T., D.M.D., D.M.Sc.	University of California, Los Angeles
Wong, Lee-Jun C., Ph.D.	Baylor College of Medicine
Wong, Lucas, M.D.	Scott and White Memorial Hospital
Wong, Richard J., M.D.	Memorial Sloan Kettering Cancer Center
Wood, Marie E., M.D.	The University of Vermont and State Agricultural College
Woods, Erik J., Ph.D.	General Biotechnology, LLC
Woods, William G., M.D.	Children's Healthcare of Atlanta, Inc.
Woodward, Wendy A., M.D., Ph.D.	The University of Texas MD Anderson Cancer Center
Worsham, Maria J., Ph.D.	Henry Ford Health System
Woster, Patrick M., Ph.D.	Medical University of South Carolina
Wright, Dennis L., Ph.D.	University of Connecticut, Storrs
Wu, Catherine J., M.D.	Dana-Farber Cancer Institute
Wu, Dianqing, Ph.D.	Yale University
Wu, Gen S., Ph.D.	Wayne State University
Wu, Guojun, Ph.D.	Wayne State University
Wu, Jennifer D., Ph.D.	Medical University of South Carolina
Wu, Mingming, Ph.D.	Cornell University
Wu, Thomas D., M.D., Ph.D.	Genentech, Inc.
Wu, Tzyy-Choou, M.D., Ph.D., M.P.H.	Johns Hopkins University
Wu, Xifeng, M.D., Ph.D.	The University of Texas MD Anderson Cancer Center
Wyatt, Michael D., Ph.D.	University of South Carolina

**X**

Xi, Yaguang, M.D., Ph.D.	University of South Alabama
Xiao, Gutian, Ph.D.	University of Pittsburgh
Xiao, Hua, M.D., Ph.D.	Michigan State University
Xie, Jingwu, Ph.D.	Indiana University–Purdue University, Indianapolis
Xie, Keping, M.D., Ph.D.	The University of Texas MD Anderson Cancer Center
Xu, Dong, Ph.D.	University of Missouri
Xu, Liang, M.D., Ph.D.	University of Kansas
Xu, Xiangxi M., Ph.D.	University of Miami Miller School of Medicine
Xu, Xiaowei, M.D., Ph.D.	University of Pennsylvania
Xu, Yan, Ph.D.	Indiana University–Purdue University, Indianapolis
Xuan, Jason J., Ph.D.	Virginia Polytechnic Institute and State University

**Y**

Yamamoto, Masato, M.D., Ph.D.	University of Minnesota
Yamashiro, Darrell J., M.D., Ph.D.	Columbia University Health Sciences Campus

Yamashita, Yukiko, Ph.D.	University of Michigan
Yan, Hai, M.D., Ph.D.	Duke University
Yang, Chung S., Ph.D.	Rutgers, The State University of New Jersey
Yang, Hu, Ph.D.	Virginia Commonwealth University
Yang, Lily, M.D., Ph.D.	Emory University
Yang, Vincent W., M.D., Ph.D.	The State University of New York at Stony Brook
Yang, Wancai, M.D.	University of Illinois at Chicago
Yang, Xiaowei, Ph.D.	Bayessoft, Inc.
Yannelli, John R., Ph.D.	University of Kentucky
Ybarra, Michele, Ph.D., M.P.H.	Center for Innovative Public Health Research
Yee, Douglas, M.D.	University of Minnesota
Yeh, Jen J., M.D.	The University of North Carolina at Chapel Hill
Yen, Yun, M.D., Ph.D.	City of Hope National Medical Center
Yeo, Yoon, Ph.D.	Purdue University
Yeudall, William A., Ph.D.	Virginia Commonwealth University
Yi, Qing, M.D., Ph.D.	Cleveland Clinic Lerner College of Medicine of Case Western Reserve University
Yi, Richard, Ph.D.	University of Maryland, College Park
Ying, Shao-Yao, Ph.D.	University of Southern California
Yothers, Greg, Ph.D.	University of Pittsburgh
Young, Damian W., Ph.D.	Baylor College of Medicine
Young, James W., M.D.	Memorial Sloan Kettering Cancer Center
Young, Jeanne P., B.A.	Childhood Brain Tumor Foundation
Yu, Cedric X., D.Sc.	University of Maryland, Baltimore
Yu, Dihua, M.D., Ph.D.	The University of Texas MD Anderson Cancer Center
Yu, Qin, Ph.D.	Icahn School of Medicine at Mount Sinai
Yu, Weikuan, Ph.D.	Auburn University at Auburn
Yu, Xue-Zhong, M.D.	Medical University of South Carolina
Yuan, Zhi-Min, M.D., Ph.D.	The University of Texas Health Science Center at San Antonio
Yun, Changhyon C., Ph.D.	Emory University

**Z**

Zacharias, Wolfgang, Ph.D.	University of Louisville
Zahrbock, Cary A.C., M.S.W.	National Coalition for Cancer Survivorship
Zaia, John A., M.D.	City of Hope National Medical Center
Zaia, Joseph, Ph.D.	Boston University Medical Campus
Zarbl, Helmut, Ph.D.	Rutgers Biomedical and Health Sciences
Zaren, Howard A., M.D.	St. Joseph's/Candler Health System, Inc.
Zarour, Hassane M., M.D.	University of Pittsburgh
Zehnder, James L., M.D.	Stanford University
Zeleniuch-Jacquotte, Anne, M.D.	New York University School of Medicine
Zelevnik-Le, Nancy J., Ph.D.	Loyola University, Chicago
Zhang, David Y., M.D., Ph.D., M.P.H.	Icahn School of Medicine at Mount Sinai
Zhang, Donna D., Ph.D.	The University of Arizona
Zhang, Huang-Ge, D.V.M., M.D., Ph.D.	The University of Alabama at Birmingham
Zhang, Hui, Ph.D.	Johns Hopkins University
Zhang, Lin, M.D.	University of Pennsylvania

Appendix D-3: Consultants Serving on Special Emphasis Panels (SEPs) in FY2015

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Zhang, Lin, Ph.D. ....	University of Pittsburgh
Zhang, Ming, Ph.D. ....	Northwestern University
Zhang, Ruiwen, M.D., Ph.D. ....	Texas Tech University Health Sciences Center
Zhang, Xiao-Kun, Ph.D. ....	Krex Pharmaceuticals, Inc.
Zhang, Xiaoliu, M.D., Ph.D. ....	University of Houston
Zhang, Zhiguo, Ph.D. ....	Mayo Clinic
Zhang, Zhong-Yin, Ph.D. ....	Indiana University–Purdue University, Indianapolis
Zhao, Dawen, M.D., Ph.D. ....	The University of Texas Southwestern Medical Center at Dallas
Zhao, Ming, Ph.D. ....	Northwestern University
Zhao, Shaying, Ph.D. ....	The University of Georgia
Zheng, Bin, Ph.D. ....	The University of Oklahoma
Zheng, Gang, Ph.D. ....	University Health Network
Zheng, Tongzhang, M.D. ....	Yale University
Zheng, Wei, M.D., Ph.D., M.P.H. ....	Vanderbilt University
Zheng, Xiaofeng S., Ph.D. ....	Rutgers Biomedical and Health Sciences
Zhou, Jin-Rong, Ph.D. ....	Beth Israel Deaconess Medical Center
Zhou, Pengbo, Ph.D. ....	Weill Cornell Medical College of Cornell University
Zhu, Liang, M.D., Ph.D. ....	Albert Einstein College of Medicine of Yeshiva University
Zhu, Shu-Hong, Ph.D. ....	University of California, San Diego
Zhu, Weimo, Ph.D. ....	University of Illinois at Urbana-Champaign
Zhu, Wenge, Ph.D. ....	George Washington University
Zhu, Xiaofeng, Ph.D. ....	Case Western Reserve University
Zhu, Yong, Ph.D. ....	Yale University
Zhu, Zongjian, M.D., Ph.D. ....	Colorado State University
Zimmers, Teresa A., Ph.D. ....	Indiana University–Purdue University, Indianapolis
Zlotnik, Albert, Ph.D. ....	University of California, Irvine
Zondlo, Neal J., Ph.D. ....	University of Delaware
Zong, Wei-Xing, Ph.D. ....	The State University of New York at Stony Brook
Zou, Weiping, M.D., Ph.D. ....	University of Michigan
Zu, Youli, M.D., Ph.D. ....	The Methodist Hospital Research Institute
Zuna, Rosemary E., M.D. ....	University of Oklahoma Health Sciences Center

**Total Number of Reviewers: 2,098**

## Appendix E: 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 <http://deainfo.nci.nih.gov/flash/awards.htm>.

### C Series: 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 Series: 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 Series: 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.

<b>K Series: Career Development Programs</b>	
<b>K01</b>	<p><b>The Howard Temin Award (no longer supported through use of the K01 by the NCI; see the K99/R00)</b></p> <p>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.</p>
<b>K01</b>	<p><b>Mentored Career Development Award for Underrepresented Minorities</b></p> <p>To support scientists committed to research who are in need of both advanced research training and additional experience.</p>
<b>K05</b>	<p><b>Established Investigator Award in Cancer Prevention, Control, Behavioral, and Population Research</b></p> <p>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.</p>
<b>K07</b>	<p><b>Cancer Prevention, Control, Behavioral, and Population Sciences Career Development Award</b></p> <p>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.</p>
<b>K08</b>	<p><b>Mentored Clinical Scientists Development Award</b></p> <p>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.</p>
<b>K08</b>	<p><b>Mentored Clinical Scientists Development Award—Minorities in Clinical Oncology</b></p> <p>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.</p>

<b>K12</b>	<b>Institutional Clinical Oncology Research Career Development Award</b> 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.
<b>K18</b>	<b>The Career Enhancement Award</b> 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.
<b>K22</b>	<b>The NCI Transition Career Development Award for Underrepresented Minorities</b> 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.
<b>K22</b>	<b>The NCI Scholars Program</b> 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.
<b>K23</b>	<b>Mentored Patient-Oriented Research Career Development Award</b> 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.
<b>K23</b>	<b>Mentored Patient-Oriented Research Career Development Award for Underrepresented Minorities</b> 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.
<b>K24</b>	<b>Mid-Career Investigator Award in Patient-Oriented Research</b> 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.

<b>K25</b>	<b>Mentored Quantitative Research Career Development Award</b> 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.
<b>K99/ R00</b>	<b>NIH Pathway to Independence (PI) Award</b> 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.
<b>L Series: Loan Repayment Program</b>	
<b>L30</b>	<b>Loan Repayment Program for Clinical Researchers</b> 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.
<b>L32</b>	<b>Loan Repayment Program for Clinical Researchers From Disadvantaged Backgrounds</b> 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.
<b>L40</b>	<b>Loan Repayment Program for Pediatric Research</b> 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 <a href="http://www.lrp.nih.gov/index.aspx">http://www.lrp.nih.gov/index.aspx</a> .)
<b>L50</b>	<b>Loan Repayment Program for Contraception and Infertility Research</b> 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.
<b>L60</b>	<b>Loan Repayment Program for Health Disparities Research</b> 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.

<b>P Series: Research Program Projects and Centers</b>	
<b>P01</b>	<p><b>Research Program Projects</b></p> <p>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.</p>
<b>P20</b>	<p><b>Exploratory Grants</b></p> <p>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.</p>
<b>P30</b>	<p><b>Center Core Grants</b></p> <p>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.</p>
<b>P41</b>	<p><b>Biotechnology Resource Grants</b></p> <p>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.</p>
<b>P50</b>	<p><b>Specialized Center Grants</b></p> <p>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&amp;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.</p>

<b>R Series: Research Projects</b>	
<b>R01</b>	<p><b>Research Project</b></p> <p>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.</p>
<b>R03</b>	<p><b>Small Research Grants</b></p> <p>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.</p>
<b>R13</b>	<p><b>Conferences</b></p> <p>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.</p>
<b>R15</b>	<p><b>The NIH Academic Research Enhancement Awards (AREA)</b></p> <p>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.</p>
<b>R21</b>	<p><b>Exploratory/Developmental Grants</b></p> <p>To encourage the development of new research activities in categorical program areas. (Support generally is restricted in the level of support and duration.)</p>
<b>R24</b>	<p><b>Resource-Related Research Projects</b></p> <p>To support research projects that will enhance the capability of resources to serve biomedical research.</p>

<b>R25E</b>	<p><b>Cancer Education Grant Program (CEGP)</b></p> <p>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.</p>
<b>R25T</b>	<p><b>Cancer Education and Career Development Program</b></p> <p>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.</p>
<b>R33</b>	<p><b>Exploratory/Developmental Grants, Phase II</b></p> <p>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.</p>
<b>R35</b>	<p><b>Outstanding Investigator Award (OIA)</b></p> <p>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.</p>
<b>R37</b>	<p><b>Method to Extend Research in Time (MERIT) Award</b></p> <p>To provide long-term grant support to investigators whose research competence and productivity are distinctly superior and who are highly likely to continue to perform in an outstanding manner. Investigators may not apply for a MERIT Award. Program staff and/or members of the cognizant National Advisory Council/Board will identify candidates for the MERIT Award during the course of reviewing competing research grant applications prepared and submitted in accordance with regular Public Health Service (PHS) requirements.</p>

<p><b>R55</b></p>	<p><b>James A. Shannon Director's Award</b>                  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.</p>
<p><b>R56</b></p>	<p><b>High-Priority, Short-Term Project Award</b>                  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.</p>

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

The NIH welcomes grant applications from small businesses in any biomedical or behavioral research

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.

<b>R41</b>	<b>STTR Grants, Phase I</b> 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.
<b>R42</b>	<b>STTR Grants, Phase II</b> 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.
<b>R43</b>	<b>SBIR Grants, Phase I</b> 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.
<b>R44</b>	<b>SBIR Grants, Phase II</b> 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.
<b>S Series: Research-Related Programs</b>	
<b>SC1</b>	<b>Research Enhancement Award</b> 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).
<b>SC2</b>	<b>Pilot Research Project</b> Individual investigator-initiated pilot research projects for faculty at minority-serving institutions (MSIs) to generate preliminary data for a more ambitious research project.
<b>S06</b>	<b>Minority Biomedical Research Support (MBRS)</b> To strengthen the biomedical research and research training capability of ethnic minority institutions and thus establish a more favorable milieu for increasing the involvement of minority faculty and students in biomedical research.

<b>S07</b>	<p><b>Biomedical Research Support Grants (NCRR BRSG)</b></p> <p>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).</p>
<b>S10</b>	<p><b>Biomedical Research Support Shared Instrumentation Grants (NCRR SIG)</b></p> <p>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.</p>
<b>S21</b>	<p><b>Research and Institutional Resources Health Disparities Endowment Grants—Capacity Building</b></p> <p>To strengthen the research and training infrastructure of the institution, while addressing current and emerging needs in minority health and other health disparities research.</p>
<b>T Series: Training Programs</b>	
<b>T15</b>	<p><b>Continuing Education Training Grants</b></p> <p>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.</p>
<b>T32</b>	<p><b>NIH National Research Service Award—Institutional Research Training Grants</b></p> <p>To enable institutions to make National Research Service Awards to individuals selected by them for predoctoral and postdoctoral research training in specified shortage areas.</p>
<b>T34</b>	<p><b>Undergraduate NRSA Institutional Research Training Grants</b></p> <p>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.</p>

<b>U Series: Cooperative Agreements</b>	
<b>U01</b>	<b>Research Projects—Cooperative Agreements</b> To support a discrete, specified, circumscribed project to be performed by the named investigators in an area representing their specific interests and competencies.
<b>U10</b>	<b>Cooperative Clinical Research—Cooperative Agreements</b> 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.
<b>U13</b>	<b>Conference—Cooperative Agreements</b> 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.
<b>U19</b>	<b>Research Program—Cooperative Agreements</b> 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.
<b>U24</b>	<b>Resource-Related Research Projects—Cooperative Agreements</b> To support research projects contributing to improvement of the capability of resources to serve biomedical research.
<b>U42</b>	<b>Animal (Mammalian and Nonmammalian) Model, and Animal and Biological Materials Resource Cooperative Agreements</b> 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.
<b>U43</b>	<b>Small Business Innovation Research (SBIR) Cooperative Agreements—Phase I</b> 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.
<b>U44</b>	<b>Small Business Innovation Research (SBIR) Cooperative Agreements—Phase II</b> 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.

<b>U54</b>	<p><b>Specialized Center—Cooperative Agreements</b></p> <p>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&amp;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.</p>
<b>U56</b>	<p><b>Exploratory Grants—Cooperative Agreements</b></p> <p>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.</p>
<b>UH2/ UH3</b>	<p><b>Exploratory/Developmental Cooperative Agreement Phase I/II</b></p> <p>To support the development of new research activities in categorical program areas. (Support generally is restricted in level of support and in time.)</p> <p>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.</p>
<b>UM1</b>	<p><b>Research Project With Complex Structure Cooperative Agreement</b></p> <p>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.</p>

## Appendix F: Glossary of Acronyms

ABTC	Adult Brain Tumor Consortium	DCCPS	Division of Cancer Control and Population Sciences
AHRQ	Agency for Healthcare Research and Quality	DCEG	Division of Cancer Epidemiology and Genetics
AIDS	Acquired Immune Deficiency Syndrome	DCLG	Director's Consumer Liaison Group (now NCRA)
AISB	Applied Information Systems Branch	DCP	Division of Cancer Prevention
AMC	AIDS Malignancy Clinical Trials Consortium	DCTD	Division of Cancer Treatment and Diagnosis
ARA	Awaiting Receipt of Application	DEA	Division of Extramural Activities
AREA	Academic Research Enhancement Award	DEAS	Division of Extramural Activities Support
BRSB	Biomedical Research Support Grant	DEAIS	DEA Information System
BSA	Board of Scientific Advisors	DFO	Designated Federal Officer
BSC	Board of Scientific Counselors	DHHS	U.S. Department of Health and Human Services (now HHS)
CAM	Complementary and Alternative Medicine	DPIC	Detection of Pathogen-Induced Cancer
CATS	Concept to Award Tracking System	DRR	Division of Receipt and Referral
CBIIT	NCI Center for Biomedical Informatics and Information Technology	EDRN	Early Detection Research Network
CCCT	Coordinating Center for Clinical Trials	EEC	Electronic Early Concurrence
CCG	Center for Cancer Genomics	EPMC	Extramural Program Management Committee
CCR	Center for Cancer Research	eRA	Electronic Research Administration
CCSG	Cancer Center Support Grant	ESA	Extramural Support Assistant
CCT	Center for Cancer Training	ESATTS	Extramural Officer Science Administrator Training – Tracking System
CD	Career Development	ETCTN	Experimental Therapeutics Clinical Trials Network
CDC	Centers for Disease Control and Prevention	eTUG	NIH eRA Technical Users Group
CEGP	Cancer Education Grant Program	FACA	Federal Advisory Committee Act
CGCHR	Center for Global Cancer Health Research	FDA	Food and Drug Administration
CGH	Center for Global Health	FFRDC	Federally Funded Research and Development Center
CHTN	Collaborative Human Tissue Network	FIC	Fogarty International Center
CISNET	Cancer Intervention and Surveillance Modeling Network	FLARE	Fiscal Linked Analysis of Research Emphasis
CIT	Center for Information Technology	FNLAC	Frederick National Laboratory Advisory Committee
CMO	Committee Management Office	FNLCR	Frederick National Laboratory for Cancer Research
COI	Conflict of Interest	FOA	Funding Opportunity Announcements
CPACHE	Comprehensive Partnerships to Advance Cancer Health Equity	FOIA	Freedom of Information Act
CRCHD	Center to Reduce Cancer Health Disparities	FY	Fiscal Year
CRP	Collaborative Research Partnership	HHS	Department of Health and Human Services (replaces DHHS)
CSO	Common Scientific Outline	IC	Institute/Center
CSPPC	Consortium of the Study of Chronic Pancreatitis, Diabetes, and Pancreatic Cancer	ICRP	International Cancer Research Partnership
CSR	Center for Scientific Review	IdEA	Institutional Development Award
CSSI	Center for Strategic Scientific Initiatives	IMAT	Innovative Molecular Analysis Technologies
CTAC	Clinical Trials and Translational Research Advisory Committee		
DCB	Division of Cancer Biology		

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

## Appendix G: 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 <http://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 the Advisory Boards and groups supported by the DEA.

Links to the individual DEA Web pages via the DEA home page are listed below.

#### Advisory Boards and Groups

<http://deainfo.nci.nih.gov/advisory/boards.htm>

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

<http://deainfo.nci.nih.gov/advisory/pcp/pcp.htm>

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

<http://deainfo.nci.nih.gov/advisory/ncab/ncab.htm>

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

<http://deainfo.nci.nih.gov/advisory/ncab/ncabmeetings.htm>

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

<http://deainfo.nci.nih.gov/advisory/bsa/bsa.htm>

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

<http://deainfo.nci.nih.gov/advisory/bsa/bsameetings.htm>

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

<http://deainfo.nci.nih.gov/advisory/fac/fac.htm>

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

<http://deainfo.nci.nih.gov/advisory/bsc/bs/bs.htm>

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

<http://deainfo.nci.nih.gov/advisory/bsc/cse/cse.htm>

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

<http://deainfo.nci.nih.gov/advisory/ctac/ctac.htm>

Clinical Trials and Translational Research Advisory Committee Charter, members, minutes, and agendas.

<http://deainfo.nci.nih.gov/advisory/ncra/ncra.htm>

NCI Council of Research Advocates (NCRA) Charter, functional statement, members, and meeting information.

<http://deainfo.nci.nih.gov/advisory/irg/irg.htm>

NCI Initial Review Group (IRG) Charter, functional statement, and members.

<http://deainfo.nci.nih.gov/advisory/sep/sep.htm>

Special Emphasis Panel Charter, functional statement, and rosters of most recent review meetings.

## Funding Opportunities/Policies

<http://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.

<http://deais.nci.nih.gov/foastatus/RFA-PA.jsp?nt=P>

Active PAs, with links to detailed descriptions.

<http://deais.nci.nih.gov/foastatus/RFA-PA.jsp>

Active RFAs, with links to detailed descriptions.

<http://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 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*).

[http://grants.nih.gov/grants/new\\_investigators/index.htm](http://grants.nih.gov/grants/new_investigators/index.htm)

New and Early Stage Investigator Policies.

<http://www.cancer.gov/researchandfunding/training>

The Center for Cancer Training (CCT).

<http://report.nih.gov/index.aspx>

Research Portfolio Online Reporting Tools (RePORT): Reports, Data, and Analyses of NIH Research Activities.

## Other NIH Websites

<http://www.nih.gov>

NIH Homepage

<http://grants.nih.gov/grants/ElectronicReceipt/>  
Grants & Funding – Applying electronically

<http://grants.nih.gov/grants/policy/policy.htm>

Grants & Funding – Grants policies and guidance

<http://grants.nih.gov/grants/guide/index.html>

Grants & Funding – Funding opportunities and notices

<http://grants.nih.gov/training/extramural.htm>

Extramural training mechanisms

**An electronic version of this document can be viewed and downloaded  
from the Internet at <http://deainfo.nci.nih.gov/>**



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