



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS#: 5861922530000

Budget Type\*:  Project  Subaward  Consortium

Organization: Duke NUS Medical School

Start Date: \_\_\_\_\_

### C. Equipment Description

List of equipment items requested: \_\_\_\_\_

Equipment Item

Funds Requested

Total funds requested for all equipment listed in the attached file

Total: \_\_\_\_\_

Additional Equipment: File Name: \_\_\_\_\_

### D. Travel

Funds Requested (\$)

1. Domestic Travel Costs

2. Foreign Travel Costs

5,000.00

Total Travel: 5,000.00

### E. Personnel

1. Fellowships/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other: \_\_\_\_\_

Number of Participants: \_\_\_\_\_

RESEARCH & RELATED BUDGET (Funds)

**RESEARCH & RELATED BUDGET SECTIONS, Budget Period 3**

**ORGANIZATIONAL DUNS\*:** 5861922530000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** Duke NUS Medical School

**Start Date\*:** 03-01-2022

**End Date\*:** 02-28-2023

**Budget Period:** 3

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	10,329.00
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer	
5. Subawards/Consortium/Contractual Costs	
6. Equipment	
7. Alterations and Renovations	
8. Scientific services	14,500.00
<b>Total Other Direct Costs</b>	<b>24,829.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A thru F)</b>	<b>100,000.00</b>

H. Indirect Costs	Indirect Cost Rate (%)	Funds Requested (\$)*
1. Federal and Administrative Costs		
<b>Total Indirect Costs</b>		<b>8,000.00</b>
<b>Cognizant Federal Agency</b>		
(Agency Name, POC Name, and POC Phone Number)		

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>108,000.00</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fees	Funds Requested (\$)*
	<b>108,000.00</b>

L. Budget Justification*
File Name: DUKE_NUS_EIDRC_2019_Subawardbudget_Justification_v01-LW-DEA_FINAL.pdf (Only attach one file.)

RESEARCH & RELATED Budget (F-K) (Funds Requested)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS#: 5861922530000

Budget Type\*:  Project  Subaward  Consortium

Organization: Duke NUS Medical School

Start Date: 07/29/2024 Budget Period: 4

**C. Equipment Description**

List of equipment items requested for this project:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file	
<b>Total</b>	0.00

Additional Equipment: File Name:

**D. Travel**

	Funds Requested (\$)
1. Domestic Travel Costs	
2. Foreign Travel Costs	5,000.00
<b>Total Travel</b>	5,000.00

**E. Participant Budget**

1. Tuition/Fees/Health Insurance
2. Stipends
3. Travel
4. Subsistence
5. Other:

**Number of Participants:**

RESEARCH & RELATED BUDGET (Fund)

**RESEARCH & RELATED BUDGET SECTIONS, Budget Period 4**

**ORGANIZATIONAL DUNS\*:** 5861922530000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** Duke NUS Medical

**Start Date\*:** 03-01-2023

**End Date\*:** 02-29-2024

**Budget Period:** 4

<b>F. Other Direct Costs</b>		<b>Funds Requested (\$)*</b>
1. Materials and Supplies		9,236.00
2. Publication Costs		
3. Consultant Services		
4. ADP/Comp		
5. Subawards/Consortium/Contractual Costs		
6. Equipment		
7. Alterations and Renovations		
8. Scientific services		14,500.00
<b>Total Other Direct Costs</b>		<b>23,736.00</b>

<b>G. Direct Costs</b>	<b>Funds Requested (\$)*</b>
<b>Total Direct Costs (A thru F)</b>	<b>100,000.00</b>

<b>H. Indirect Costs</b>		<b>Funds Requested (\$)*</b>
Indirect Cost Type	Indirect Cost Rate (%)	
1. Facilities and administrative costs		
<b>Total Indirect Costs</b>		<b>8,000.00</b>
<b>Cognizant Federal Agency</b>		
(Agency Name, POC Name, and POC Phone Number)		

<b>I. Total Direct and Indirect Costs</b>	<b>Funds Requested (\$)*</b>
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>108,000.00</b>

<b>J. Fee</b>	<b>Funds Requested (\$)*</b>

<b>K. Total Costs and Fees</b>	<b>Funds Requested (\$)*</b>
	<b>108,000.00</b>

<b>L. Budget Justification*</b>
File Name: DUKE_NUS_EIDRC_2019_Subawardbudget_Justification_v01-LW-DEA_FINAL.pdf (Only attach one file.)

RESEARCH & RELATED Budget (F-K) (Funds Requested)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS#: 5861922530000

Budget Type\*:  Project  Subaward  Consortium

Organization: Duke NUS Medical School

Start Date: 01/01/2025

Budget Period: 5

### C. Equipment Description

List of equipment items requested for the project

Equipment Item

Funds Requested

Total funds requested for all equipment listed in the attached file

Total: 0.00

Additional Equipment: File Name:

### D. Travel

Funds Requested (\$)

1. Domestic Travel Costs

2. Foreign Travel Costs

5,000.00

Total Travel: 5,000.00

### E. Personnel

1. Fellowships/Grants/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Number of Participants:

RESEARCH & RELATED BUDGET (Funds)

**RESEARCH & RELATED BUDGET SECTIONS, Budget Period 5**

**ORGANIZATIONAL DUNS\*:** 5861922530000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** Duke NUS Medical

**Start Date\*:** 03-01-2024 **End Date\*:** 02-28-2025 **Budget Period:** 5

<b>F. Other Direct Costs</b>		<b>Funds Requested (\$)*</b>
1. Materials and Supplies		8,141.00
2. Publication Costs		
3. Consultant Services		
4. ADP/Comp		
5. Subawards/Consortium/Contractual Costs		
6. Equipment		
7. Alterations and Renovations		
8. Scientific services		14,500.00
<b>Total Other Direct Costs</b>		<b>22,641.00</b>

<b>G. Direct Costs</b>	<b>Funds Requested (\$)*</b>
<b>Total Direct Costs (A thru F)</b>	<b>100,000.00</b>

<b>H. Indirect Costs</b>		<b>Funds Requested (\$)*</b>
Indirect Cost Type	Indirect Cost Rate (%)	
1. Facilities and administrative costs		
<b>Total Indirect Costs</b>		<b>8,000.00</b>
<b>Cognizant Federal Agency</b>		
(Agency Name, POC Name, and POC Phone Number)		

<b>I. Total Direct and Indirect Costs</b>	<b>Funds Requested (\$)*</b>
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>108,000.00</b>

<b>J. Fee</b>	<b>Funds Requested (\$)*</b>

<b>K. Total Costs and Fees</b>	<b>Funds Requested (\$)*</b>
	<b>108,000.00</b>

<b>L. Budget Justification*</b>	
File Name:	DUKE_NUS_EIDRC_2019_Subawardbudget_Justification_v01-LW-DEA_FINAL.pdf
(Only attach one file.)	

RESEARCH & RELATED Budget (F-K) (Funds Requested)



# RESEARCH & RELATED BUDGET - Summary

	Totals (\$)	
Section A, Salary/Wages		15,884.00
Section B, Other Personnel		335,000.00
Total Number Other Personnel	5	
Total Salary/Wages		350,884.00
Section C, Equipment		0.00
Section D, Travel		
1. Domestic	0.00	
2. Foreign	25,000.00	
Section E, Participant/Trainee Support Costs		0.00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipend	0.00	
3. Travel Level	0.00	
4. Subsidies	0.00	
5. Other	0.00	
6. Number of Participants/Trainees		
Section F, Other Direct Costs		124,116.00
1. Materials and Supplies	0.00	
2. Publication Costs	0.00	
3. Consultant Services		
4. ADP/Computer Services	0.00	
5. Subawards/Contractual Costs	0.00	
6. Equipment & Facility Rental User Fees	0.00	
7. Alterations and Renovations	0.00	
8. Other 1	70,500.00	
9. Other 2	0.00	
10. Other 3	0.00	
Section G, Direct Costs		500,000.00
Section H, Indirect Costs		40,000.00
Section I, Total Direct and Indirect Costs (G + H)		540,000.00
Section J, Fee		0.00
Section K, Total Costs and Fees		540,000.00



# RESEARCH & RELATED BUDGET

ORGANIZATION: UCR

Budget Type:  Project  Subaward/Consortium

Organization: UCR

Start Date: 05-2021

Budget Period: 1

### C. Equipment Description

Equipment Description: [Empty field]

Equipment Name: [Empty field] Funds Requested: [Empty field]

Total funds requested for all equipment listed in the attached file:

Total Equipment 0.00

Additional Equipment: File Name:

### D. Travel

Funds Requested (\$)\*

1. Domestic Travel Costs (incl. Canada, Mexico, and U.S. Possessions) 300.00

2. Foreign Travel Costs 18,500.00

Total Travel Cost 18,800.00

### E. Participant Financial Support

Funds Requested (\$)

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Net Total: [Empty field]

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

**RESEARCH & RELATED BUDGET (F-R) (Funds Requested)**

**ORGANIZATIONAL DUNS\*:** 1446765660000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** The Henry M. Jackson Fdn. for the Adv

**Start Date\*:** 03-01-2020 **End Date\*:** 02-28-2021 **Budget Period:** 1

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	41,439.00
2. Publication Costs	
3. Construction	
4. ADP/Computer Services	
5. Subaward/Consortium/Contractor Costs	
6. Equipment/Facility Maintenance	
7. Alterations and Renovations	
8. AKTA Service Contract	4,500.00
<b>Total Other Direct Costs</b>	<b>46,939.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A + F)</b>	<b>74,999.99</b>

H. Indirect Costs	Indirect Cost Rate (%)	Indirect Cost Base	Funds Requested (\$)*
1. USU Indirect Cost Rate FY20	30.45	22,901.00	7,000.00
2. HJF Companywide G&A FY20	16.9	570,100.00	97,837.48
<b>Total Indirect Costs</b>			<b>39,372.03</b>
<b>Cognizant Federal Agency</b>	USAMRAA, Jennifer C. Jackson, 501-619-2554		
<small>(Agency Name, POC Name, and POC Phone Number)</small>			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>114,372.03</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	<b>114,372.03</b>

**L. Budget Justification\***

File Name: Budget\_Justification\_Broder\_SF Asia (1).pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-R) (Funds Requested)



# RESEARCH & RELATED

## ORGANIZATIONAL UNIT

Budget Type:  Project

Original Budget:  New

Status

**C. Equipment Description**

Equipment Description	Funds Requested
<b>Total funds requested for all equipment listed in the attached file</b>	
<b>Total Equipment</b>	<b>0.00</b>

Additional Equipment: File Name:

**D. Travel**

	Funds Requested (\$)*
1. Domestic Travel Costs ( Incl. Canada, Mexico, and U.S. Possessions)	3,500.00
2. Foreign Travel Costs	18,500.00
<b>Total Travel Cost</b>	<b>22,000.00</b>

**E. Participant Travel Support Costs**

	Funds Requested (\$)
1. Tuition/Fees/Health Insurance	
2. Stipend	
3. Travel	
4. Subsistence	
5. Other:	
<b>Total</b>	

RESEARCH & RELATED

**RESEARCH & RELATED BUDGET (F-K)**

**ORGANIZATIONAL DUNS\*:** 1446765660000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** The Henry M. Jackson Fdn. for the Adv

**Start Date\*:** 03-01-2021

**End Date\*:** 02-28-2022

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	41,439.00
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subaward/Consortium/Contractor Costs	
6. Equipment/Facility Maintenance	
7. Alterations and Renovations	
8. AKTA Service Contract	4,500.00
<b>Total Other Direct Costs</b>	<b>46,939.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A + F)</b>	<b>74,999.99</b>

H. Indirect Costs	Indirect Cost Rate (%)	Indirect Cost Base	Funds Requested (\$)*
1. USU Indirect Cost Rate FY20	30.45	74,999.99	22,837.00
2. HJF Companywide G&A FY20	16.9	97,837.48	16,534.53
<b>Total Indirect Costs</b>			<b>39,372.03</b>
<b>Cognizant Federal Agency</b>	USAMRAA, Jennifer C. Jackson, 301-619-2554		
<small>(Agency Name, POC Name, and POC Phone Number)</small>			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>114,372.03</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	<b>114,372.03</b>

**L. Budget Justification\***

File Name:  
 Budget\_Justification\_Broder\_SE Asia (1).pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-K) (Funds Requested)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS#: 1446765660000

Budget Type\*:  Project  Subaward  Consortium

Organization: Leake Henry M. Jackson Fdn. for the Adv'mt. of Leishmaniasis Med., Inc.

Start Date: 10/1/2019

**C. Equipment Description**

List of equipment items requested for this project. Attach a separate spreadsheet for each item.

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file: _____	
<b>Total Equipment</b>	<b>0.00</b>

Additional Equipment: File Name: \_\_\_\_\_

**D. Travel**

Description	Funds Requested (\$)
1. Domestic Travel Costs (including Alaska, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	18,500.00
<b>Total Travel Cost</b>	<b>22,000.00</b>

**E. Participant Support**

Description	Funds Requested (\$)
1. Tuition/Fees/Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other:	
<b>Number of Participants</b>	

RESEARCH & RELATED BUDGET SUMMARY

**RESEARCH & RELATED BUDGET (F-R) (Funds Requested)**

**ORGANIZATIONAL DUNS\*:** 1446765660000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** The Henry M. Jackson Fdn. for the Adv

**Start Date\*:** 03-01-2022

**End Date\*:** 02-28-2023

**Budget Period:** 3

F. Other Direct Cost	Funds Requested (\$)*
1. Materials and Supplies	41,439.00
2. Publication Costs	
3. Construction	
4. ADP/Computer Services	
5. Subaward/Consortium/Contractor Costs	
6. Equipment/Facility Maintenance	
7. Alterations and Renovations	
8. AKTA Service Contract	4,500.00
<b>Total Other Direct Costs</b>	<b>46,939.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A + F)</b>	<b>74,999.99</b>

H. Indirect Costs	Indirect Cost Rate (%)	Indirect Cost Base	Funds Requested (\$)*
1. USU Indirect Cost Rate FY20	30.45	22,901.00	7,000.00
2. HJF Companywide G&A FY20	16.9	572,156.88	97,837.48
<b>Total Indirect Costs</b>			<b>39,372.03</b>
<b>Cognizant Federal Agency</b>	USAMRAA, Jennifer C. Jackson, 501-619-2554		
<small>(Agency Name, POC Name, and POC Phone Number)</small>			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>114,372.02</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	<b>114,372.02</b>

**L. Budget Justification\***

File Name:  
 Budget\_Justification\_Broder\_SF Asia (1).pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-R) (Funds Requested)





**RESEARCH & RELATED BUDGET (F-R) (Funds Requested)**

**ORGANIZATIONAL DUNS\*:** 1446765660000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** The Henry M. Jackson Fdn. for the Adv

**Start Date\*:** 03-01-2023

**End Date\*:** 02-29-2024

**Budget Period:**

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	41,439.00
2. Publication Costs	
3. Construction	
4. ADP/Computer Services	
5. Subaward/Consortium/Contractor Costs	
6. Equipment/Facility Maintenance	
7. Alterations and Renovations	
8. AKTA Service Contract	4,500.00
<b>Total Other Direct Costs</b>	<b>46,939.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A + F)</b>	<b>74,999.99</b>

H. Indirect Costs	Indirect Cost Rate (%)	Indirect Cost Base	Funds Requested (\$)*
1. USU Indirect Cost Rate FY20	30.45	22,901.00	6,973.00
2. HJF Companywide G&A FY20	16.9	572,100.00	97,837.48
<b>Total Indirect Costs</b>			<b>39,372.03</b>
<b>Cognizant Federal Agency</b>	USAMRAA, Jennifer C. Jackson, 501-619-2554		
<small>(Agency Name, POC Name, and POC Phone Number)</small>			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>114,372.02</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	<b>114,372.02</b>

**L. Budget Justification\***

File Name:  
 Budget\_Justification\_Broder\_SF\_Asia\_(1).pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-R) (Funds Requested)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS#: 1446765660000

Budget Type\*:  Project  Subaward  Consortium

Organization: The Henry M. Jackson Fdn. for the Adv'mt. of M., Inc.

Start Date:

**C. Equipment Description**

List of equipment items requested for this project:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file: _____	
<b>Total Equipment</b>	<b>0.00</b>

Additional Equipment: File Name: \_\_\_\_\_

**D. Travel**

Travel Category	Funds Requested (\$)
1. Domestic Travel Costs (including Alaska, Mexico, & U.S. Possessions)	
2. Foreign Travel Costs	18,500.00
<b>Total Travel Cost</b>	<b>22,000.00</b>

**E. Participant Support**

Participant Support Category	Funds Requested (\$)
1. Tuition/Fees/Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other:	
<b>Number of Participants</b>	

RESEARCH & RELATED BUDGET

**RESEARCH & RELATED BUDGET (F-R) (Funds Requested)**

**ORGANIZATIONAL DUNS\*:** 1446765660000

**Budget Type\*:**  Project  Subaward/Consortium

**Organization:** The Henry M. Jackson Fdn. for the Adv

**Start Date\*:** 03-01-2024 **End Date\*:** 02-28-2025 **Budget Period:** 5

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	41,439.00
2. Publication Costs	
3. Construction	
4. ADP/Computer Services	
5. Subaward/Consortium/Contractor Costs	
6. Equipment/Facility Maintenance	
7. Alterations and Renovations	
8. AKTA Service Contract	4,500.00
<b>Total Other Direct Costs</b>	<b>46,939.00</b>

G. Direct Costs	Funds Requested (\$)*
<b>Total Direct Costs (A + F)</b>	<b>74,999.99</b>

H. Indirect Costs	Indirect Cost Rate (%)	Indirect Cost Base	Funds Requested (\$)*
1. USU Indirect Cost Rate FY20	30.45	22,901.00	6,973.83
2. HJF Companywide G&A FY20	16.9	57,098.99	9,632.67
<b>Total Indirect Costs</b>			<b>39,372.03</b>
<b>Cognizant Federal Agency</b>	USAMRAA, Jennifer C. Jackson, 501-619-2554		
<small>(Agency Name, POC Name, and POC Phone Number)</small>			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>114,372.02</b>

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	<b>114,372.02</b>

**L. Budget Justification\***

File Name: Budget\_Justification\_Broder\_SF\_Asia\_(1).pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-R) (Funds Requested)



*Service agreement*

We request support for a 500 kDa protein purification system is critical

**H. HJF FY2020 Fringe Benefit and Indirect Cost**

The HJF indirect cost is calculated based on the value-added cost base and overhead rates. The IDC rate applied is 30.45% USU on-site overhead rate. A 30% allowable indirect cost rate is applied on the total cost.

The HJF fringe benefit rate is 30.75% for Tier 1 employees and 4.81% for Tier 2 employees. The HJF employees on this project are all Tier 1 employees.

The above fringe benefits and indirect cost provisional billing rates for FY 2020 were approved by the U.S. Army Medical Research Acquisition Activity on May 7, 2019.

## RESEARCH & RELATED BUDGET - SUMMARY

	Totals (\$)	
Section A, Personnel		0.00
Section B, Other Personnel		35,304.95
Total Number Other Personnel	5	
Total Salary, wages (A+B)		35,304.95
Section C, Equipment		0.00
Section D, Travel		
1. Domestic	92,500.00	
2. Foreign	0.00	
Section E, Participant/Trainee Support Costs		0.00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipend	0.00	
3. Travel	0.00	
4. Subsistence	0.00	
5. Other	0.00	
6. Number of Participants/Trainees		
Section F, Other Direct Costs		229,695.00
1. Materials and Supplies	229,695.00	
2. Publication Costs	0.00	
3. Consultant Fees	0.00	
4. ADP/Computer Services	0.00	
5. Subawards/Contractual Costs	0.00	
6. Equipment & Facility Rental User Fees	0.00	
7. Alterations and Renovations	0.00	
8. Other 1	0.00	
9. Other 2	0.00	
10. Other 3	0.00	
Section G, Direct Costs (A thru F)		374,999.95
Section H, Indirect Costs		196,860.15
Section I, Total Direct and Indirect Costs (G + H)		571,860.10
Section J, Fee		0.00
Section K, Total Costs and Fees (I + J)		571,860.10



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS\*: 6081952770

Budget Type\*:  Project

Organization: The University of North Carolina at Chapel Hill

Start Date:

**C. Equipment Depreciation**

List of equipment items to be purchased:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file	
<b>Total Equipment</b>	

Additional Equipment:  File

**D. Travel**

Category	Funds Requested (\$)
1. Domestic Travel Costs (including Canada, Mexico, and U.S. Possessions)	1,000.00
2. Foreign Travel	
<b>Total Travel Cost</b>	1,000.00

**E. Personnel Support**

- Tuition/Fees/Health Insurance
- Stipends
- Travel
- Subsistence
- Other

**Number of Participants**

RESEARCH & RELATED Budget (C-E) Funds Requested

# RESEARCH & RELATED BUDGET SUMMARY

ORGANIZATION: **UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL**

Budget Type\*:  Project  Subaward

Organization: **The University of North Carolina at Chapel Hill**

Start Date\*: 03-01-2020

End Date\*: 02-28-2021

Budget Period: 1

F. Other Direct Costs	
1. Materials	
2. Publication Costs	500.00
3. Contract Services	
4. ADP/Computational	
5. Subwards/Consulting/Contractual Calls	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Animal Housing	
<b>Total Other Direct Costs</b>	<b>32,085.00</b>

G. Direct Costs	Funds Requested (\$)

H. Indirect Costs	
Indirect Cost Type	Indirect Cost Rate (%)
1. UNC Indirect Cost Rate	55.00
<b>Total Indirect Costs</b>	<b>17,500.00</b>

I. Total Direct and Indirect Costs	Funds Requested (\$)
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>49,585.00</b>

J. Fee	Funds Requested (\$)

K. Total Costs and Fees	Funds Requested (\$)
	<b>194,375.00</b>

L. Budget Justification: [UNC\\_Budget\\_Justification\\_FINAL.pdf](#)  
 (Only attach one file)

RESEARCH & RELATED Budget (F-K) Funds Requested:



# RESEARCH

ORGANIZATIONAL DUNS\*: 6081952770000

Budget: Subaward/Consortium

Organization: The University of

Start Date\*: 03-01-2021

End Date: 03-31-2021

C. Equipment		Description	Funds Requested (\$)*1
List all equipment requested in the attached proposal.			
Equipment Item			Funds Requested (\$)*1
Total funds requested for all equipment listed in the attached proposal			
Total Equipment			0.00
Additional Equipment: Name:			

D. Travel		Funds Requested (\$)*1
List all travel costs requested in the attached proposal.		
1. Domestic Travel Costs (U.S. Canada, etc.)		
2. Foreign Travel Costs		
Total Travel Cost		1,000.00

E. Participant Support		Funds Requested (\$)*1
List all participant support costs requested in the attached proposal.		
1. Tuition/Fees/Health Insurance		
2. Stipends		
3. Travel		
4. Subsistence		
Number of Participants/Trainees		
Total Participant Trainee Support Costs		0.00

RESEARCH & RELATED (Funds Requested)

# RESEARCH

ORGANIZATIONAL DUNS\*: 6081952770000

Budget Type\*:  Project  Subaward/Contract

Organization: The University of North Carolina at Chapel Hill

Start Date: 08/01/2021 End Date: 07/31/2022

F. Other Direct Costs	Funds
1. Materials	
2. Publication Costs	500.00
3. Consultant Services	
4. ADP/Computer Services	
5. Subaward/Contract/Intergovernmental Costs	
6. Equipment or Facility Rental/Lease Fees	
7. Alterations and Renovations	
8. Animal Housing	
<b>Total Other Direct Costs</b>	<b>32,335.00</b>

G. Direct Costs	Funds requested (\$)
<b>Total Direct Costs (A thru F)</b>	

H. Indirect Costs	Funds requested (\$)
Indirect Costs	
1. UNC Indirect Cost Rate	55.5 125,000.00 69,375.00
<b>Total Indirect Costs</b>	
Contact Name, POC Name, and POC Phone Number	

I. Total Direct and Indirect Costs	Funds requested (\$)
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>101,375.00</b>

J. Fee	Funds requested (\$)

K. Total Costs and Fee	Funds requested (\$)

L. Budget Justification

UNC\_Budget\_Justification\_FINAL.pdf  
(Only attach one file.)

RESEARCH & RELATED Budget (F-K) Funds P=



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS\*: 6081952770

Budget Type\*:  Project

Organization: The University of North Carolina at Chapel Hill

Start Date:

**C. Equipment Depreciation**

List of equipment items requested:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file	
<b>Total Equipment</b>	

Additional Equipment:  File

**D. Travel**

Category	Funds Requested (in \$)
1. Domestic Travel Costs (including Canada, Mexico, and U.S. Possessions)	1,000.00
2. Foreign Travel	
<b>Total Travel Cost</b>	
1,000.00	

**E. Personnel Support**

- Tuition/Fees/Health Insurance
- Stipends
- Travel
- Subsistence
- Other

**Number of Participants**

RESEARCH & RELATED Budget (C-E) Funds Requested

# RESEARCH & RELATED

ORGANIZATIONAL DUNS\*: 6081952770000

Budget Type\*:  Project  Subaward/Consortium/Contractual Costs

Organization: The University of North Carolina at Chapel Hill

Start Date: 08/01/2022 End Date: 07/31/2023

F. Other Direct Costs		Funds
1. Materials and Supplies		30,585.00
2. Publication Costs		500.00
3. Consultant Services		
4. ADP/Computer Services		
5. Subawards/Consortium/Contractual Costs		
6. Equipment or Facility Rental Sec. Fees		
7. Alterations and		
8. Animal Housing		
<b>Total Other Direct Costs</b>		<b>32,085.00</b>

G. Direct Costs	Funds requested (\$)
<b>Total Direct Costs (A thru F)</b>	<b>125,000.00</b>

H. Indirect Costs	
Indirect Costs	
1. UNC Indirect Cost Rate	55.5% of 125,000.00 = 69,375.00
<b>Total Indirect Costs</b>	<b>69,375.00</b>
Comments (Agency Name, POC Name, and POC Phone Number)	

I. Total Direct and Indirect Institutional Costs (C + H)	Funds requested (\$)
<b>Total Direct and Indirect Institutional Costs (C + H)</b>	<b>194,375.00</b>

J. Fee	Funds

K. Total Costs	Funds
	194,375.00

L. Budget Justification File Name: UNC\_Budget\_Justification\_FINAL.pdf  
 (Only attach one file.)

RESEARCH & RELATED Budget (F-K)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS\*: 6081952770

Budget Type\*:  Project

Organization: The University of North Carolina at Chapel Hill

Start Date:

**C. Equipment Depreciation**

List of equipment items to be depreciated:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file	
<b>Total Equipment</b>	

Additional Equipment:  File

**D. Travel**

Category	Funds Requested (\$)
1. Domestic Travel Costs (including Canada, Mexico, and U.S. Possessions)	1,000.00
2. Foreign Travel	
<b>Total Travel Cost</b>	
	1,000.00

**E. Personnel Support**

- Tuition/Fees/Health Insurance
- Stipends
- Travel
- Subsistence
- Other

**Number of Participants:**

RESEARCH & RELATED Budget (C-E) Funds Requested

# RESEARCH & RELATED

ORGANIZATIONAL DUNS\*: 6081952770000

Budget Type\*:  Project  Subaward/Consortium

Organization: The University of North Carolina at Chapel Hill

Start Date: 10/01/2020

F. Other Direct Costs		Funds
1. Materials and Supplies		30,585.00
2. Publication Costs		500.00
3. Consultant Services		
4. ADP/Computer Services		
5. Subawards/Consortium/Contractual Costs		
6. Equipment or Facility Rental Sec. Fees		
7. Alterations and		
8. Animal Housing		
<b>Total Other Direct Costs</b>		<b>32,085.00</b>

G. Direct Costs	Funds requested (\$)
<b>Total Direct Costs (A thru F)</b>	<b>125,000.00</b>

H. Indirect Costs	
1. UNC Indirect Cost Rate	55.5%
<b>Total Indirect Costs</b>	<b>69,375.00</b>

Costs (Agency Name, POC Name, and POC Phone Number)

I. Total Direct and Indirect Institutional Costs (C + H)	Funds requested (\$)
<b>Total Direct and Indirect Institutional Costs (C + H)</b>	<b>194,375.00</b>

J. Fee	Funds

K. Total Costs	Funds
	<b>194,375.00</b>

L. Budget Justification

UNC\_Budget\_Justification\_FINAL.pdf  
(Only attach one file.)

RESEARCH & RELATED Budget (F-K)



# RESEARCH & RELATED BUDGET

ORGANIZATIONAL DUNS\*: 6081952770

Budget Type\*:  Project

Organization: The University of North Carolina at Chapel Hill

Start Date:

**C. Equipment Depreciation**

List of equipment items to be purchased:

Equipment Item	Funds Requested
Total funds requested for all equipment listed in the attached file	
<b>Total Equipment</b>	

Additional Equipment:  File

**D. Travel**

Category	Funds Requested (\$)
1. Domestic Travel Costs (including Canada, Mexico, and U.S. Possessions)	1,000.00
2. Foreign Travel	
<b>Total Travel Cost</b>	
	1,000.00

**E. Personnel Support**

- Tuition/Fees/Health Insurance
- Stipends
- Travel
- Subsistence
- Other

**Number of Participants:**

RESEARCH & RELATED Budget (C-E) Funds Requested

# RESEARCH & RELATED BUDGET SUMMARY

ORGANIZATION: **UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL**

Budget Type\*:  Project  Subaward

Organization: **University of North Carolina at Chapel Hill**

Start Date\*: 03-01-2024

End Date\*: 02-28-2025

Budget Period: 5

F. Other Direct Costs	
1. Materials	
2. Publication Costs	500.00
3. Contract Services	
4. ADP/Computational	
5. Subwards/Consulting/Contractual Calls	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Animal Housing	
<b>Total Other Direct Costs</b>	<b>32,085.00</b>

G. Direct Costs	Funds Requested (\$)

H. Indirect Costs	
Indirect Cost Type	Indirect Cost Rate (%)
1. UNC Indirect Cost Rate	55.00
<b>Total Indirect Costs</b>	<b>17,500.00</b>

I. Total Direct and Indirect Costs	Funds Requested (\$)
<b>Total Direct and Indirect Institutional Costs (G + H)</b>	<b>49,585.00</b>

J. Fee	Funds Requested (\$)

K. Total Costs and Fees	Funds Requested (\$)
	<b>194,375.00</b>

L. Budget Justification
UNC_Budget_Justification_FINAL.pdf
(Only attach one file)

RESEARCH & RELATED Budget (F-K) Funds Requested:



**C. Materials and Supplies** A variety of culture media, recombinant DNA supplies, antibiotics and enzymes (~\$1,000), miscellaneous supplies and disposables (~\$1,500) are used for cell culture, and perform virus growth. Funds are also requested for collaborative cross and strain laboratory mice (\$5000) used to develop improved animal models of human disease. Equipment (PPE), portal breathing apparatus (PAPR), gloves and protective setting (\$3,000).

**D. Travel (\$1,000)**

*Domestic*

Travel to EcoHealth Alliance and return to EcoHealth Alliance. Dr. Banc requests international meeting.

*International*

No international travel is requested.

**E. Other Direct Costs**

Funds are requested for meeting room rental (~\$1,000) as well as other direct costs.

**F. Indirect Costs**

In accordance with DHHS dated 11/23/2010, 55.5% of modified total direct costs.

## RESEARCH & RELATED BUDGET - CURRENT

	Totals (\$)	
Section A, Personnel		210,785.00
Section B, Other Personnel		210,785.00
Total Number Other Personnel	10	
Total Salary, wages (A+B)		459,337.50
Section C, Equipment		0.00
Section D, Travel		0.00
1. Domestic	5,000.00	
2. Foreign	0.00	
Section E, Participant/Trainee Support Costs		0.00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipend	0.00	
3. Travel	0.00	
4. Subsidies	0.00	
5. Other	0.00	
6. Number of Participants/Trainees		160,425.00
Section F, Other Direct Costs		160,425.00
1. Materials and Supplies	152,925.00	
2. Publication Costs	8,500.00	
3. Consultant Services	0.00	
4. ADP/Computer Services	0.00	
5. Subawards/Contractual Costs	0.00	
6. Equipment & Facility Rental User Fees	0.00	
7. Alterations and Renovations	0.00	
8. Other 1	5,000.00	
9. Other 2	0.00	
10. Other 3	0.00	
Section G, Direct Costs (A thru F)		625,000.00
Section H, Indirect Costs		346,875.00
Section I, Total Direct and Indirect Costs (G + H)		971,875.00
Section J, Fee		0.00
Section K, Total Costs and Fees (I + J)		971,875.00



1. Vertebrate Animals

Are vertebrate animals used in your research project?

If "Yes" to euthanasia

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

Yes  No

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

.....

2. \*Program Income Section

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

Yes  No

If you checked "Yes" (with the exception of indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave blank.

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

3. Human Embryonic Stem Cells Section

\*Does the proposed project involve human embryonic stem cells?

If the proposed project involves human embryonic stem cells, please follow the registration process on the following list: <http://grants.nih.gov/...> check the box indicating that one from the following list will be used:

- Specific stem cell line to match performance of the cell line. One from the following list will be used:

Cell Line(s) (Example: 0004):

4. Inventions and Patents Section (Renewal applications)

\*Inventions and Patents:  Yes  No

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

\*Previously Reported:

5. Change of Investigator/Change of Institution

Change of Project Director/Principal Investigator

Name of former Project Director/Principal Investigator:

First Name:

Last Name:

\*First Name:

\*Last Name:

Suffix:

Change of Grantee Institution

\*Name of former institution:

# PHS 398 Research Plan

Intro	
1. Introduction to Application (for Resubmission and Revision applications)	
Research Plan Section	
2. Specific Aims	EIDRC_Specific_Aims_FINAL.pdf
3. Research Strategy*	EIDRC_Research_Strategy_FINAL.pdf
4. Progress Report Publication List	
Other Research Plan Section	
5. Vertebrate Animals	Vertebrate_Animals_Section_FINAL.pdf
6. Select	EIDRC_Select_FINAL.pdf
7. Multiple PD/PI Leadership Plan	
8. Consortium/Co-PI	EIDRC_Consortium_COPI_FINAL.pdf
9. Letters of Support	EIDRC_LOS_FINAL.pdf
10. Resource Sharing Plan(s)	EIDRC_Resource_Sharing_Document_FINAL.pdf
11. Authentication of Key Biological and/or Chemical Resources	EIDRC_Search_Authentication_of_Key_Reagents.pdf
Appendix	
12. Appendix	