

CONTRACTS AND GRANTS

Fundamentals
Presented by
the HSC
Sponsored
Projects Office
(SPO)/PreAward

CONTRACTS AND GRANTS FUNDAMENTALS

- Basics
 - Grant
 - Contract
 - Award
- Roles and Activities
 - Sponsored Projects Office
 - Contract & Grant Accounting
 - Department
- Internal Forms
 - Proposal Stage
 - Just in Time (NIH)
 - Award Stage
- Resources



WHAT IS THE DIFFERENCE BETWEEN A GRANT AND A CONTRACT?

Grant

- Idea originates with UNMHSC
- Public benefit
- Scientific freedom



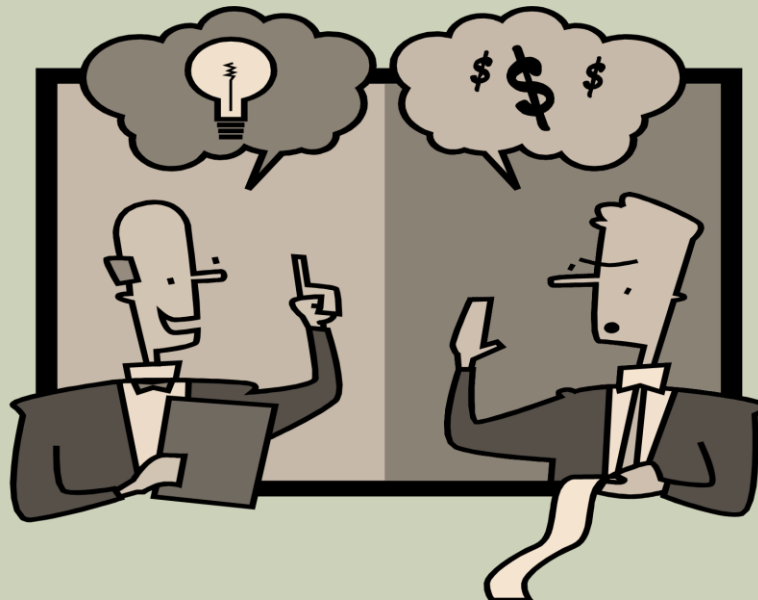
Contract

- Need originates with sponsor
- Benefits the sponsor
- Procurement mechanism



WHAT IS A PROPOSAL?

- An offer to perform certain work for a specific amount of money to be spent according to certain terms and conditions.



WHAT IS AN AWARD?

- A commitment from the sponsor, subject to certain terms and conditions
- **No money is sent until UNMHSC sends an invoice to the sponsor**
(usually)



CONTRACTS

- Signatures from both parties
- Statement of Work
- Budget
- Terms and Conditions:
 - Liability and insurance
 - Intellectual property
 - Termination
 - Invoicing and payment procedures



GRANTS

The terms and conditions of grants are standardized by the sponsor.

- **Proposal**
 - Research Plan
 - Budget

- **Notice of Award (NOA)**
 - Terms and conditions



DIFFERENT BILLING TYPES

- **Cost Reimbursement** (ex. NIH grants and many subawards)
 - Direct cost plus F&A cost
 - Detailed invoices of actual expenses
- **Fixed Price** (ex. professional services, industry sponsored research)
 - Simple invoices and payments
 - May be scheduled or tied to deliverables
 - May feature payment in advance of performance
- **Fee for Service** (ex. clinical trials and clinical services)
 - Number of services performed multiplied by a set fee
 - Typically billed monthly or quarterly

THE SPONSORED PROJECTS PROCESS



OVERVIEW OF SPONSORED PROJECT STAGES

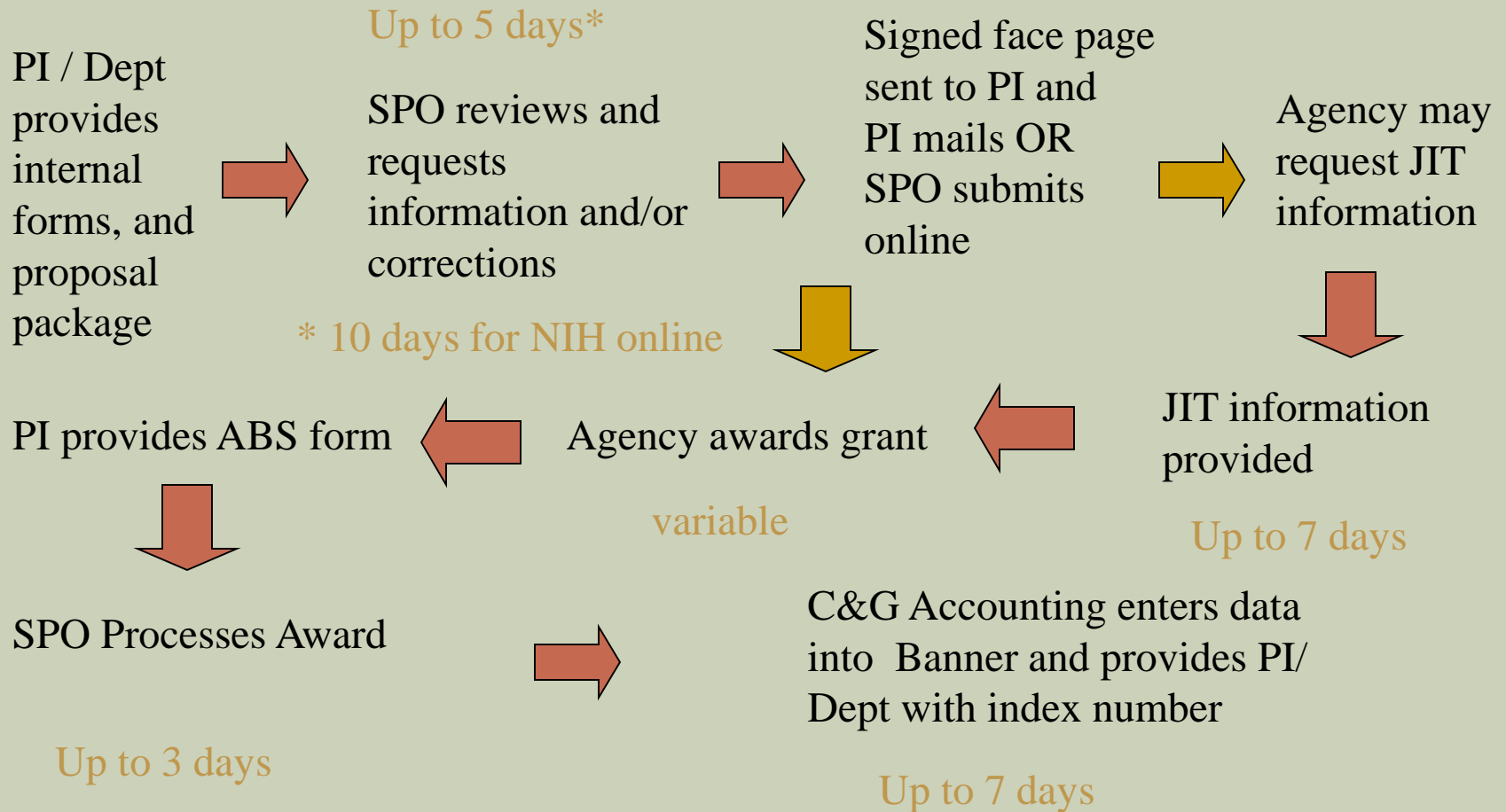
- **Proposal Stage (5 Work Days Prior to Mailing)**
 - Proposal preparation, internal review, data entry, signatures. OR
 - (10 Work Days Prior to Submission) if submitting electronically through NIH
- **Just in Time Stage**
 - Response to request from funding agency for additional information needed for their review. Not required by all agencies.
- **Award Stage**
 - Notice of Grant Award received or contract signed, budget allocated to account codes, transmittal to Post-Award, Banner account set-up.

GRANT PROPOSAL ACTIVITIES

- PI selects Funding Opportunity Announcement, writes the research plan, and prepares the application
- PI or Principal Investigator's Designate (PID)
 - Prepares budget
 - Gets F&A waiver
 - Gets F&A Cross College Split Commitments
 - Assembles the pieces
 - Fills out internal forms (more on this later)
 - Gets signatures
- SPO reviews and signs
- PI or Admin Staff mails application OR
- PI or SPO submits electronic application



TIMELINE FOR GRANTS

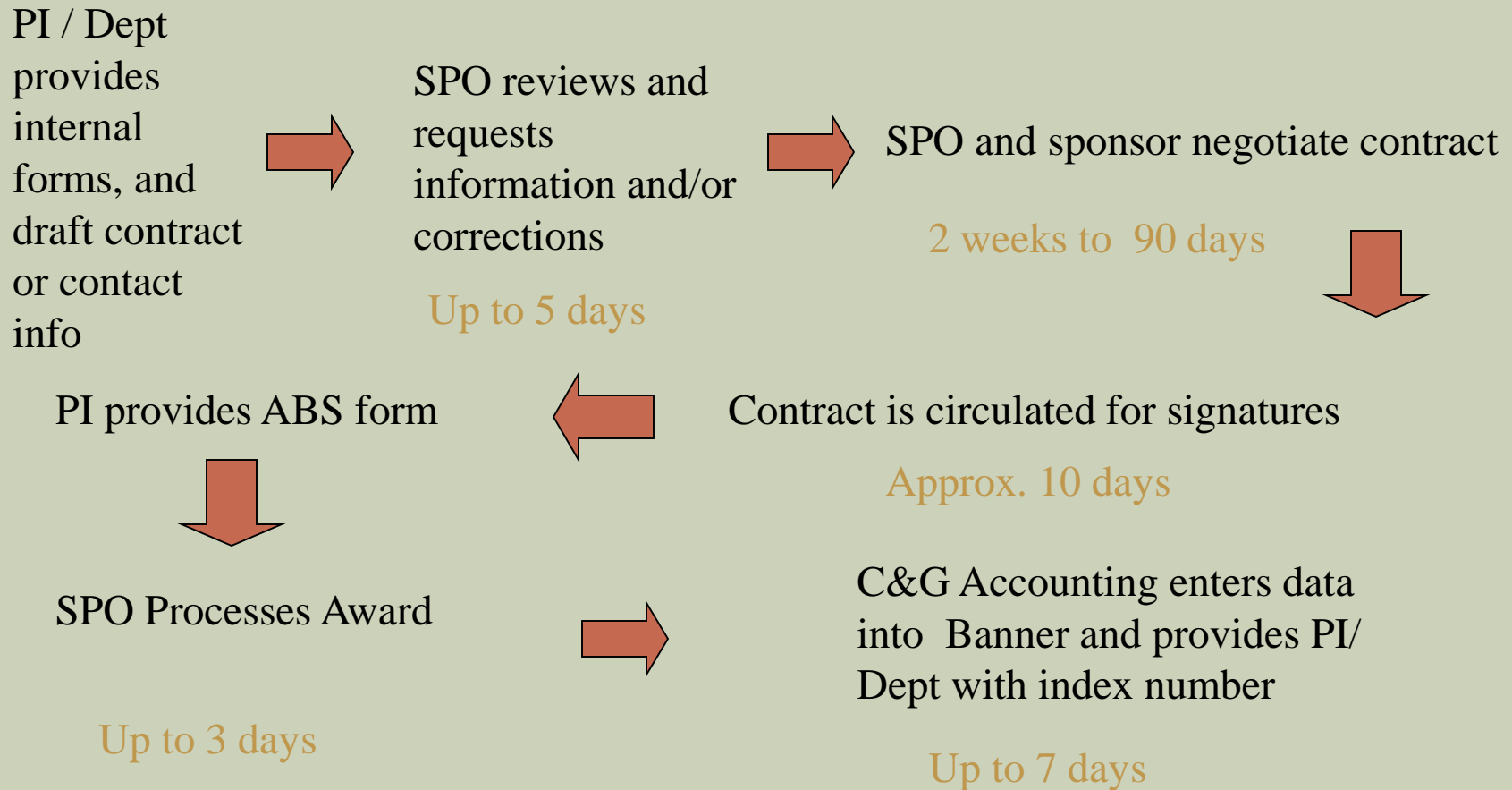


CONTRACT PROPOSAL ACTIVITIES

- Sponsor requests proposal (RFP)
- Sponsor and/or PI prepare Statement of Work (SOW)
- Sponsor and/or PI develop budget
- PI or PI's Designate (PID)
 - Fills out internal forms (more on this later)
 - Gets F&A Cross College Split Commitments
 - Gets F&A waiver
 - Gets signatures
- Sponsor usually prepares draft contract
- Sponsor and SPO negotiate terms
- SPO consults with PI re: terms as needed



TIMELINE FOR CONTRACTS



AWARD ACTIVITIES


- Sponsor signs contract or sends Notice of Award
- PI or PID prepares ABS
- SPO transfers file to Post-Award
- C&G Accounting sets up Grant and Fund and obtains index number for PI and staff



SPONSORED PROJECTS TO C&G ACCOUNTING



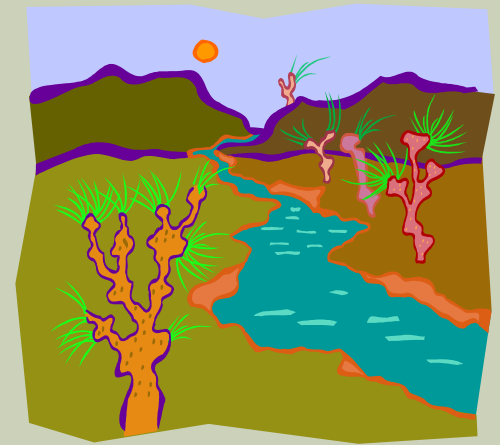
WHAT ARE ALL THESE NUMBERS FOR?

- SPO tracks each proposal with a SPO number (HSC-10258)
 - C&G Accounting tracks
 - each award with a Grant number (3R39J)
 - each budget period with a Fund number (339J1)
 - The department allocates costs to an Index number (813482)
- 

WHAT IS IN AN INDEX NUMBER?

The FOPAL stream is 36 characters long!

Fund	395P0
Organization	497C09
Program	P16R
Activity	GNAT
Location	XXXXXX

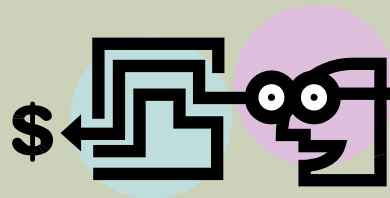


The Index number is a nickname.

The Organization and Program come from the PDS.
(more on that later)

ROLES AND ACTIVITIES

**Sponsored Projects
C&G Accounting
Department and PI**



Each department has its own way of doing things.

SPO ROLE

- Proposal Review
- Contract Negotiation
- UNMHSC Approvals and Signatures



SPO ROLE: MISCELLANEOUS

- Material Transfer Agreements (MTAs)
- Confidential Disclosure Agreements (CDAs)
- Collect data
- Prepare mgmt reports
- No Cost Extensions
- Early terminations
- Amendments
- Subawards
- Adhoc Reporting



C&G ACCOUNTING ROLE

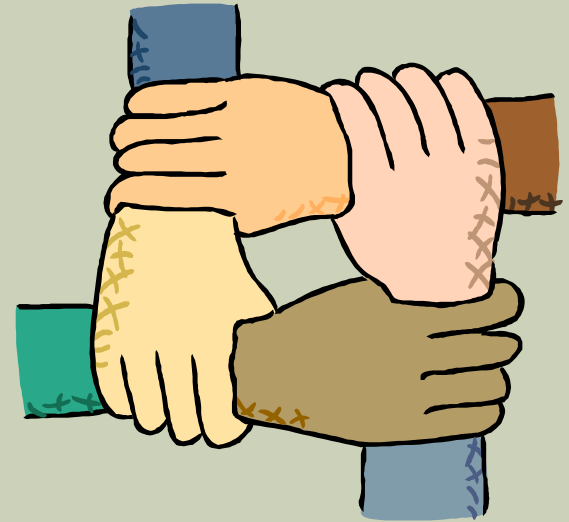
- Set-up new Grants and Funds
- Obtain index number
- Monitor restricted accounts
- Billing/ cost recovery
- Prepare financial reports
- Process Cost Share
- Carry Forward
- Pre-approval of Subaward Invoices*
- Close Out

* PI must approve



PI AND DEPARTMENTAL ROLE

- Prepare proposals and progress reports
- Conduct the research project
- Report expenditures and services provided
- Review invoices, monitor budget
- Request modifications as needed
 - Re-budgeting (C&G Accounting)
 - No cost extension (SPO)
 - Change in scope of work (SPO)
 - Change in effort > 25% (SPO)
 - Continuation/ progress report (SPO)



SPO ACTIVITIES: PROPOSAL REVIEW

- Review Proposal Data Sheet and COI forms – obtain clarification and correction as needed – and enter data into SPO database
- Review sponsor's proposed terms and conditions
- Compare proposal to sponsor's guidelines (content and format)
- Review budget details (calculations, F&A rates, cost-sharing)
- Record potential compliance issues (e.g., human/animal subjects, health and safety, conflict of interest)
- Ensure that any representations or certifications that the sponsor requires are attached
- Advise and support PI regarding errors, unusual risks, and other issues to be addressed

SPO ACTIVITIES: CONTRACT NEGOTIATION

- Review sponsor's draft contract (or prepare draft contract)
- Identify problematic terms and conditions
- Prepare revised draft contract
- Obtain review from HSC Legal if needed
- Negotiate terms and conditions
- Contact, advise, and support PI regarding unusual risks, and other issues to be addressed



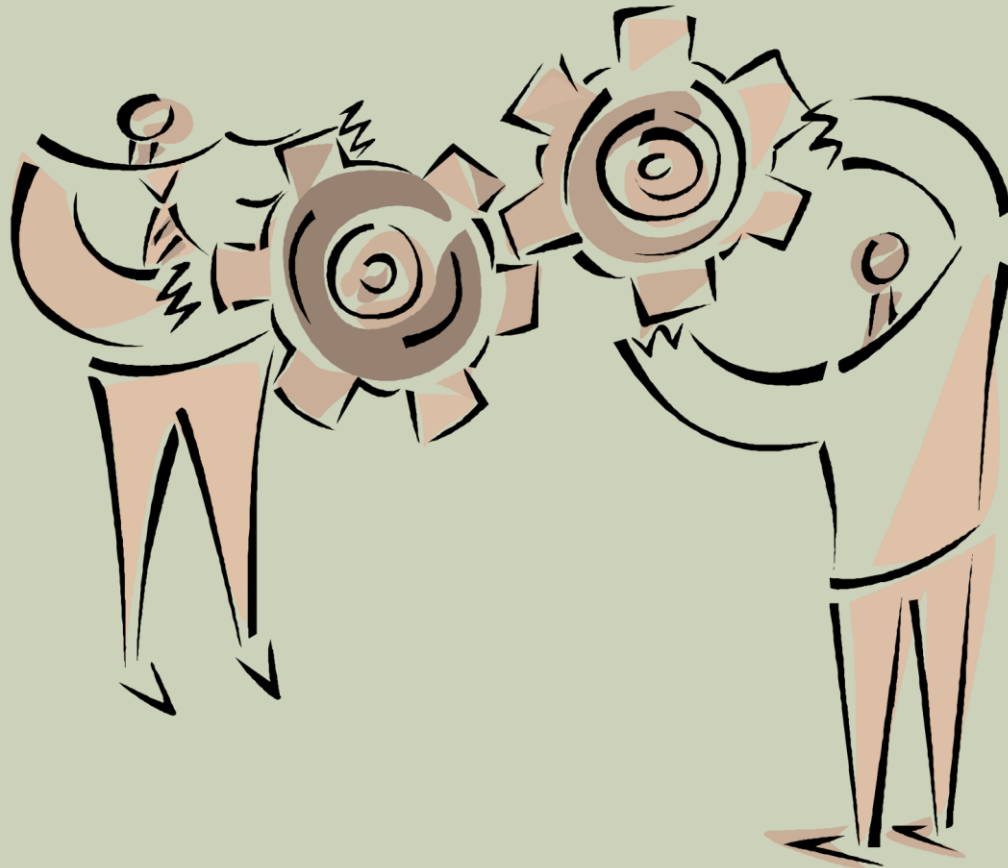
UNM POLICY MANAGES RISK

PIs are not authorized to sign:

- Proposals
- Contracts
- Clinical Trial Agreements
- Confidentiality Agreements
- Material Transfer Agreements
- Other Agreements



FROM DEPARTMENT TO SPO



OVERVIEW OF SPO STAGES

- Proposal Stage (5 Work Days Prior to Mailing and 10 days prior to NIH online)
 - Proposal preparation and internal review, data entry, signatures.

- Just in Time Stage
 - Response to request from funding agency for additional information needed for their review. Not required by all agencies.

- Award Stage
 - Notice of Grant Award received or contract signed, budget allocated to account codes, file transmitted to Post-Award, Banner Grant and Fund set-up, index number obtained.

PROPOSAL STAGE: WHAT TO SEND TO SPO

Proposal Data Sheet (PDS) signed by PI and Department Chair AND

Complete proposal, application, or progress report including budget AND

Sponsor's funding opportunity announcement and application instructions



PROPOSAL STAGE: AS NEEDED

- Conflict of Interest Cover Sheet and Conflict of Interest Forms for research projects and/or projects involving humans or animals
- F&A Waiver if less than standard F&A rate is proposed
- Letters of Support to Sponsor
- VA MOU for NIH proposals involving Joint Appointments
- Research Committee Approval for Limited Competition Proposals
- Cost Share Commitment Form(s) signed by Department Administrator or Accountant, Department Chair, and the Office of Research for projects requiring matching funds, institutional commitment, or in-kind contributions.
- Cost Share Budget(s) on the ABS form

PROPOSAL WITH SUBAWARD (CONSORTIUM)

- Face page or similar document with Subawardee's authorized signature
- Detailed budget with budget justification
- Statement of Work
- Bio-sketches for Key Personnel
- Checklist page (for proposals to NIH only)
- Subawardee's F&A Rate Agreement

PROPOSAL STAGE: PROPOSAL DATA SHEET (PDS)

UNM HEALTH SCIENCES CENTER PROPOSAL DATA SHEET (PDS) (INTERNAL USE ONLY)

PROPOSAL # HSC-	DEPARTMENT (Lead department if multiple departments)	PI's ORG CODE	CURRENT INDEX#	CURRENT FUND#
PRINCIPAL INVESTIGATOR (PI)	PI's E-MAIL	PI's DEGREE	Location – On Campus, unless PI certifies one of these choices are true <input type="checkbox"/> Off Campus rate because <input type="checkbox"/> In a leased facility where rent/utilities & maintenance is charged to proposed program <input type="checkbox"/> In a facility made available at NO-COST to the program by a Non-University Organization	
CO-PI (if more than one, attach sheet)	Co-PI's E-MAIL	Co-PI's DEGREE		
DEPARTMENT CONTACT		DEPARTMENT E-MAIL		PHONE
SPONSOR: (agency/company/collaborator)		SOLICITATION NUMBER or PROGRAM NAME		DATE PROPOSAL IS DUE TO AGENCY:
AGENCY CONTACT		AGENCY E-MAIL		AGENCY TELEPHONE
PROJECT TITLE (No Abbreviations – 75 Character Limit)				
Proposal Type (SELECT ONE) <input type="checkbox"/> NEW <input type="checkbox"/> SUPPLEMENT <input type="checkbox"/> COMPETING RENEWAL <input type="checkbox"/> REVISION TO PAF <input type="checkbox"/> NON-COMPETE <input type="checkbox"/> TRANSFER FROM				
PROPOSAL/PROJECT CLASSIFICATIONS INSTRUMENT TYPE: (Select One) <input type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT <input type="checkbox"/> CLINICAL TRIAL <input type="checkbox"/> CLINICAL TRIAL - SUBAWARD <input type="checkbox"/> CONTRACT <input type="checkbox"/> SUBAWARD – originating sponsor (i.e. NIH, HRSA, FDA, etc)				
COSTS for Initial or New Budget Period: From _____ To _____ DIRECT COSTS \$ _____ F&A RATE % _____ F&A COSTS \$ _____ Total for Budget Period \$ _____				
COSTS for Entire Project: (Award Cycle) From _____ To _____ Total for Entire Period \$ _____				
CLINICAL TRIALS ONLY: Enrollment Start Date: _____ FDA Phase: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III or <input type="checkbox"/> IV Multi Center Study <input type="checkbox"/> YES <input type="checkbox"/> NO Inventions are Anticipated <input type="checkbox"/> YES <input type="checkbox"/> NO PI Waives Intellectual Property Ownership <input type="checkbox"/> YES <input type="checkbox"/> NO				
FACULTY ACTIVITY DATABASE (FAD) – SOM & COP ONLY (SELECT ONE) <input type="checkbox"/> RESEARCH <input type="checkbox"/> CLINICAL <input type="checkbox"/> EDUCATION <input type="checkbox"/> NON MISSION SPECIFIC				
DOES THIS PROJECT SERVE: <input type="checkbox"/> NATIVE AMERICANS <input type="checkbox"/> HISPANICS <input type="checkbox"/> OTHER UNDERSERVED POPULATIONS				
IF THIS PROPOSAL INVOLVES ITEMS LISTED BELOW, CHECK ALL BOX(ES) THAT APPLY <input type="checkbox"/> HUMAN SUBJECTS <input type="checkbox"/> LABORATORY ANIMALS <input type="checkbox"/> SUBCONTRACTORS <input type="checkbox"/> CONSULTANTS <input type="checkbox"/> VA EMPLOYEES—MOV NEEDED (NIH) <input type="checkbox"/> HSC F&A SPLIT <input type="checkbox"/> HSC/MAIN SPLIT <input type="checkbox"/> COST SHARE or MATCHING FUNDS <input type="checkbox"/> REQUIRES BUILDING MODIFICATIONS <input type="checkbox"/> RECOMBINANT DNA, RADIOACTIVE/HAZARDOUS MATERIALS or WASTE – Contact Safety Officer <input type="checkbox"/> EXPORT CONTROL / SELECT AGENTS <input type="checkbox"/> FOREIGN NATIONAL UNM PERSONNEL <input type="checkbox"/> FOREIGN COLLABORATORS <input type="checkbox"/> UNM PERSONNEL WITH DUAL CITIZENSHIPS <input type="checkbox"/> RESTRICTIONS ON PUBLICATIONS <input type="checkbox"/> FUNDING from a FOREIGN-OWNED AGENCY/COMPANY List Country: _____ <input type="checkbox"/> FOREIGN TRAVEL, List Country: _____ <input type="checkbox"/> PROPRIETARY, CLASSIFIED or SENSITIVE INFORMATION				
<small>IN SIGNING THIS DOCUMENT, THE PI AND CHAIR DO HEREBY AGREE THAT ALL INFORMATION CONTAINED WITHIN THE APPLICATION/PROPOSAL IS TRUE, COMPLETE AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE. THE DEPARTMENT HEREBY ACCEPTS ALL RESPONSIBILITY FOR THE BUDGET, COST SHARE COMMITMENTS, F&A SPLIT AGREEMENT(S), COMPLETION OF TIMELY & ACCURATE EFFORT CERTIFICATIONS, AUTHORIZATIONS FOR USE OF UH, MIND IMAGING, CANCER CENTER, AND LIBRARY FACILITIES, CURRICULUM CHANGES, THE COST OF REQUIRED BUILDING MODIFICATIONS, AND COORDINATION WITH OTHER UNM DEPARTMENTS, CONSULTANTS, COLLABORATORS, AND SUBCONTRACTORS, INVOLVED WITH THIS PROJECT. THE PI AND CHAIR ALSO AGREE TO SECURE HIRC & AWP APPROVALS PRIOR TO BEGINNING THE RESEARCH AND WILL WORK WITH INDUSTRIAL SECURITY TO DEVELOP A COMPLIANCE PLAN FOR EXPORT CONTROL, IF APPLICABLE. THE PI ACCEPTS RESPONSIBILITY FOR THE SCIENTIFIC CONDUCT OF THE PROJECT. SUBMISSION OF THE REQUIRED PROGRESS REPORTS, COMPLIANCE WITH FEDERAL REGULATIONS INCLUDING FCOI AND PROHIBITING DEBARRED/SUSPENDED PERSONNEL, FROM PARTICIPATING ON FEDERALLY FUNDED PROJECTS, AND HEREBY ACKNOWLEDGES THAT ANY FALSE, FICTITIOUS, OR FRAUDULENT STATEMENTS OR CLAIMS MADE IN THIS PROPOSAL/APPLICATION MAY SUBJECT THE PI TO CRIMINAL, CIVIL, OR ADMINISTRATIVE PENALTIES.</small>				
SIGNATURE OF PI _____ DATE _____				
SIGNATURE OF PI's CHAIR OR CENTER DIRECTOR _____ DATE _____				
SIGNATURE OF PreAward/Sponsored Projects Reviewer _____ DATE _____				
FOR PREAWARD USE ONLY: <input type="checkbox"/> RESEARCH <input type="checkbox"/> TRAINING / T-Grants <input type="checkbox"/> FELLOWSHIP / F-Grants <input type="checkbox"/> INSTRUCTION <input type="checkbox"/> OTHER SPONSORED PROJECTS				
For further information please click on the link below: http://hsc.unm.edu/finance/services/preaward/docs/Research_Instruction_OtherSponsored.docx				
<input type="checkbox"/> PAPER SUBMISSION WILL BE RETURNED TO DEPARTMENT FOR SUBMISSION TO SPONSOR				

PROPOSAL STAGE: PDS - BASIC FIELDS

■ PIs Org Code

- Each PI is assigned an individual org code. This code drives setup of award.

■ Current Index # and Current Fund

- For proposals that are non-competing or competing continuations or supplements. Leave blank if the proposal is new or a revision of an unfunded prior proposal.

■ Funding Agency

- The sponsor to which the proposal is being submitted. In the case of incoming subawards, the direct funder is the funding agency.

■ Solicitation#/Program Name

- The designation given to the project by the sponsor. For clinical trials, use the protocol number. For State of New Mexico contracts, use the contract number.

PROPOSAL STAGE: PDS – PROPOSAL TYPE

■ Grant

- The idea for the work originates with the PI and no substantial involvement of the sponsor is anticipated.

■ Contract

- A procurement mechanism for the purpose of acquiring services and/or property for the direct benefit or use of the sponsor. Typically, the idea for a contract originates with the sponsor.

■ Cooperative Agreement

- Somewhere along a spectrum between a grant and a contract – the sponsor is more involved than in a grant.

■ Subaward

- When the Funding Agency is the recipient of a primary award, specify the agency which will grant the primary award to the Funding Agency.

■ Clinical Trial

- A research project involving human subjects.

PROPOSAL STAGE: PDS – THIS ACTION IS

- **New**
 - A proposal never proposed before
- **Revision to #___**
 - A revised version of a proposal that was previously submitted to the same agency. Specify the proposal number that was assigned to the previous version so that its status can be recorded in the database.
- **Non-competing Continuation**
 - A progress report to be submitted so that the funding agency will award the funds already promised for the next funding period.
- **Competing Renewal**
 - A proposal for an additional funding cycle that competes for funding with other proposals.
- **Supplement**
 - A request for additional funding for the current funding period.
- **Transfer From**
 - A proposal to transfer an existing award to UNMHSC from another institution .

PROPOSAL STAGE: PDS – OTHER FIELDS

- Project Category
- Project Cost = Direct Cost + F&A
- Project Period – anticipated dates
- Clinical Trials – all considered RESEARCH
- Faculty Activity Database
- Special Issues – Subawards, Cost Share, F&A split, Export Control, Consultants

Signatures - proof of departmental approval




PROPOSAL STAGE: PDS – EXPORT CONTROLS

- Select Agents
- Key technologies re: national security
- Proposals require special handling
- Awards require security measures
- Potential fines and criminal prosecution for non-compliance




PROPOSAL STAGE: CONFLICT OF INTEREST (COI) COVER SHEET

UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER
DISCLOSURE STATEMENT OF FINANCIAL INTERESTS AND OUTSIDE PROFESSIONAL ACTIVITIES
COVER SHEET

Name of Principal Investigator _____ Department _____

Funding Agency _____ Dates of Project _____

































Project Title _____ 

INSTRUCTIONS:

1. The principal investigator must complete and attach this cover sheet to the disclosure forms submitted for each proposal or protocol that involves research whether the activity is supported by external or internal funding or is unfunded.

2. All personnel named on the budget list of a Preaward research grant/contract submission and/or as an investigator in a HRRG (IRB) submission (including data managers/statisticians) must submit a disclosure form and be added to the list below.

3. Everyone on this list is required to complete the online HSC Financial Conflicts of Interest (FCOI) Training (HSC 104-002) *prior to* proposal/protocol submissions. The course is available for HSC investigators in Learning Central under "Grants & Research". *Non-UNM investigators may indicate they have taken their institute's course (check "Other") or take the HSC FCOI course available in Moodle at <https://hsc-moodle.health.unm.edu/>. Re-certification is required every 4 years.*

Personnel/Investigator Name	Personnel/Investigator Affiliation	FCOI Course Taken	Date Course Taken
1. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
2. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
3. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
4. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
5. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
6. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
7. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
8. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
9. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
10. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
11. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
12. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
13. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
14. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
15. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	
16. 	<input type="checkbox"/> UNM HSC <input type="checkbox"/> UNM Main <input type="checkbox"/> Other	<input type="checkbox"/> HSC FCOI <input type="checkbox"/> Other	

Sources: For more information on conflict of interest disclosure policy, refer to the UNM HSC Conflicts of Interest website for federal regulations, <http://hsc.unm.edu/research/coi/federalregs.shtml>, and for UNM HSC COI and related policies, <http://hsc.unm.edu/research/coi/unmpolicies.shtml>.

Version //10/12

- A list of investigators
- An _____ is any person (whether faculty, staff, student, consultant, or collaborator) who is responsible for the design, conduct, or reporting of a UNM research activity and/or any personnel listed on the budget
- Required only for research projects and other projects involving humans or animals

PROPOSAL STAGE: COI FORM

- Investigators and those being paid off the Sponsored Project must complete and sign this form

UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER
DISCLOSURE STATEMENT OF FINANCIAL INTERESTS AND OUTSIDE PROFESSIONAL ACTIVITIES

Investigator's Name (print or type) _____ Department _____ proposal/protocol # (if known) _____

I. Do you (including your spouse, domestic partner, and dependent children) have any of the financial interests described below that reasonably appears to be related to your institutional responsibilities (check all that apply)? Institutional responsibilities include the following:
(1) research; (2) research consultation; (3) teaching; (4) professional practice; (5) institutional committee memberships; and (6) service on panels such as Institutional Review Boards, Data and Safety Monitoring Boards, or study section/grant review committees.

Y ☐ N ☐ 1. Any salary or payment for services (e.g. consulting fees, honoraria, paid authorship), other than through UNM, from a publicly traded entity in the preceding 12 months?

Y ☐ N ☐ 2. Currently, any equity interest (e.g. stocks, stock options, other ownership interest) in a publicly traded entity?

Y ☐ N ☐ 3. Does the total combined payment/income from items 1 and 2 exceed \$5,000 for any single publicly traded entity?

Y ☐ N ☐ 4. Any salary or payment for services (e.g. consulting fees, honoraria, paid authorship) from a non-publicly traded entity in the preceding 12 months that exceeds \$5,000?

Y ☐ N ☐ 5. On this disclosure date, any equity interests (e.g. stocks, stock options, other ownership interest) in a non-publicly traded entity?

Y ☐ N ☐ 6. Intellectual property rights (e.g. patents, copyrights or royalties from these rights) other than through UNM or STC?

If you checked "Y" (yes) on any of the items above, please describe the financial interest in expandable text box below:

II. Do you have or have received any of the following in the past or next twelve months (check all that apply):

Y ☐ N ☐ 7. Any reimbursed or sponsored travel related to your institutional responsibilities (listed above in section I) from an entity that is not a federal, state, or local government agency or associated with an institution of higher education? Describe the purpose and duration of the trip, the identity of the sponsor/organizer, and the destination in the text box below this section.

Y ☐ N ☐ 8. A position as a director, executive officer, board member, advisory or review panel member, partner, trustee, manager or employee of an outside entity?

Y ☐ N ☐ 9. Any income from seminars, lectures, teaching engagements, participation in a speakers bureau, or for-for-profit entity(ies) or non-profit entity(ies) that is not a federal, state, or local government agency or associated with an institution of higher education?

Y ☐ N ☐ 10. Any other situation not described in any of the above items that may be a potential or actual conflict of interest in this research?

If you checked "Y" (yes) on any items in section II, please provide a description in the expandable text box below:

III. If you checked "Y" (yes) on any items on this form, please provide in the expandable text box below a thorough description of your responsibilities (not only title such as PI or study coordinator) in this research project.

I certify that the above information is true to the best of my knowledge. I know of no other potential or actual conflict of interest situations in this research. I will report any change within 30 days of occurrence.

Signature of Investigator _____ Date _____


Version 6/29/12

- For projects requiring matching funds, institutional commitment, or in-kind contributions

- Signed by Department Administrator or Accountant, Department Chair, and the Office of Research

Pre-Award 8-16-12

PROPOSAL STAGE: F&A WAIVER

 **UNM HEALTH SCIENCES CENTER**
SOM, COP, CON: Department of XXXX
Office of the Chair
272-XXXX (PI's Phone No.)

Select the Appropriate Approver:
To: ☐ Richard Larson, MD, PhD, Vice Chancellor for Research, BMSB B61
☐ Nancy Ridenour, PhD, RN, Dean, College of Nursing
☐ Lynda Welage, PharmD, Dean, College of Pharmacy

Date: May 3, 2012

Through: (Insert Chair's Name), Chair Sign Here
From: (Insert PI/ Faculty Member's Name) Sign Here
PI's Contact Person to Call for pick up: (Name) (Tele)
RE: F&A Reduction for - (Insert Project Title that Matches Proposal Data Sheet)

Name of Funding Sponsor: _____
If Subaward, indicate name of Federal Funding Sponsor: _____ (example: NIH, HRSA, or CDC)
Indicate Estimated Direct Cost for Number of Years PI is Seeking Waiver \$ _____
Check all that apply:
☐ Check if this is a NEW project, where no F&A history exists.
☐ Check if this is a competing continuation, or supplement, and enter last F&A percentage that was used: _____ %
☐ Check here if this waiver is for a multiple year award cycle (ex: R01 5-year grant) & indicate the number of years you are seeking approval for: _____ Years. (Otherwise 1 Year is assumed)
☐ Check if the Sponsor does not allow full F&A, and ATTACH proof from a website or a page from the RFA or Announcement.
☐ Check here if this is a pre-approved specially negotiated rate State/City/Local from website
<http://hsc.unm.edu/funding/services/preaward/docs/F&A%20-%20State-Local%20Guidance%20Rate%203-24-11.pdf>

Type of Funds ☐ Federal ☐ Federal Pass Through (Subaward) ☐ Industry or For-Profit ☐ Non-Profit or Foundation ☐ State/City/Other Local ☐ Other: _____

PI is seeking:
☐ F&A Waiver to Zero Percent (not recommended in most cases)
☐ F&A Reduction to _____ percent
☐ Graduated or Modified F&A plan as explained in justification

Justification: Discuss why you believe F&A should be waived or reduced.
(Must be filled in)

If Multi-Disciplinary, Multiple Signatures May Be Necessary:
APPROVED or DENIED *

Richard Larson, MD, PhD, Vice Chancellor for Research
Nancy Ridenour, PhD, RN, Dean, College of Nursing
Lynda Welage, PharmD, Dean, College of Pharmacy

Date

* **Explanation for Denial - if necessary:**
☐ Not having sufficient direct costs is not a reason to reduce F&A. Please reduce the scope of the project and include appropriate F&A.
☐ Appropriate Documentation to support reduction or waiver was not attached. Need page from the announcement, RFA, or print from website.
☐ The Prime Awardee's F&A Rate is not UNM/HSC's F&A Rate. Find out if the Prime Sponsor (such as NIH) limited the F&A and attach documentation from that agency.
☐ Call me if you'd like to discuss
☐ Other _____

Return to HSC PreAward with the Proposal; HSSB Room 102, 272-6264, HSC-PreAward@salud.unm.edu

For any new or competing renewal that proposes less than the full F&A rate:

PI requests F&A Waiver from:

- Dean of the College of Pharmacy
- Dean of the College of Nursing
- Sr. Associate Dean for Research, SOM

REQUEST TO SPEND FUNDS FORM

After proposal is completed and before the award is awarded...

Need \$? so-called “shell” account

Department Chair approval needed.

Dean approval may be needed.

■ New or competing applications

OR

■ Department unable to cover expenses

UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER	
REQUEST FOR APPROVAL TO SPEND FUNDS (RTSF) <i>Send to Financial Services/PreAward, MSC09 5220, HSSB Room 102</i>	
1. Principal Investigator <input type="text"/> Enter PI's Name	2. PreAward Proposal# <input type="text"/> HSC <input type="text"/> Enter 5 Digit Proposal Number
3. Department <input type="text"/> Enter Department Name	PI's Org Code <input type="text"/> Enter PI Specific Org Code
4. Funding Agency <input type="text"/> Enter Funding Agency	5. Project Title <input type="text"/> Enter Project Title
6. Anticipated Award will be: (Please select one (1)) REQUIRED Type of Award - select one (1)	7. Anticipated Award is a: (Please select one (1)) REQUIRED Award Cycle - select one (1)
8. If this request pertains to a currently active project, indicate the UNM Grant / Fund or Index number <input type="text"/> Enter Grant/Fund or Index	
9. The anticipated award is to begin <input type="text"/> Enter Begin Date and end <input type="text"/> Enter End Date Funds anticipated \$ <input type="text"/> Enter Funds Anticipated	
10. Approval is requested to spend \$ <input type="text"/> Enter amount during the period beginning <input type="text"/> Enter Begin date and ending <input type="text"/> Enter End date.	
11. 2 nd Person(s) to contact for questions concerning this request <input type="text"/> Enter Contact Name Email: <input type="text"/> Enter Contact Email	
<input type="text"/> Enter Other Contact Name <input type="text"/> Enter Other Contact Email	
12. PI's Description of request and justification. Include discussion on level of certainty of award. <small>Please enter request and justification. This is required.</small>	
Processing Steps:	
1. PI is to initiate this form when a shell index is necessary and an Open Proposal is in progress & filed in PreAward (Minimum of PDS is required).	
2. PI will submit to Department Chair for Signature.	
3. If the Department Chair will not agree to provide funding in the event the award is not received, this form must be signed by the Dean.	
Submit to HSC Financial Services for processing AFTER Dean's signature. The SOM Dean's Office reserves the right to monitor specific Department's risks on a case-by-case basis. Those departments will be notified separately, and will route RTSF to SOM Dean's Office for approval until otherwise notified.	
4. PI is to obtain the signature from PreAward that a proposal has been filed. PreAward will verify questions 2, 3, 4, 6, & 7, enter the program type, and sign then forward to Contract & Grant Accounting. Allow up to 2 business days for a reply unless other arrangements have been made.	
PreAward Signature <input type="text"/>	Program Type <input type="text"/>
5. Contract & Grant Accounting will verify all above steps and set up shell Grant & Fund	
6. Contract & Grant Accounting will email PI and contact person in #11 after receipt of index number from Finance Systems Mgt.	
7. Contract & Grant Accounting will pass this form back to PreAward for placement in the proposal file.	
REQUIRED: PI Must Sign this Box Only This request has been prepared in accordance with policy dated March 5, 1990. An urgent need exists to expend funds prior to receipt of a fully executed award	
Principal Investigator <input type="text"/>	Date <input type="text"/>
REQUIRED: Department Chair Must Sign this Box Only <input type="checkbox"/> In the event that the award described above is not received, or does not coincide with the period of performance identified above, I will provide funding for any losses incurred as a consequence of the approval of this request. <input type="checkbox"/> I am unable to provide funding for losses incurred as a consequence of the approval of this request. However, I endorse the request and recommend in approval by the Dean.	
Department Chair or Director <input type="text"/>	Date <input type="text"/>
IF DEAN'S SIGNATURE REQUIRED <small>Dean Must Sign this Box Only:</small> <input type="checkbox"/> Approved however, Department Chair is responsible for any losses. <input type="checkbox"/> The Department Chair has endorsed this request but is unable to provide funding for losses incurred as a consequence of the approval of this request. I concur with the Department Chair's recommendation and will provide such funding if required. <input type="checkbox"/> The Dean's Office does not have available funds to cover. The request is denied.	
Dean <input type="text"/>	Date <input type="text"/>
Contract & Grant Accounting Confirmation of all approvals: To Fiscal Monitor (name) <input type="text"/> <input type="checkbox"/> Approved by Fiscal Monitor. Initial <input type="text"/> Date <input type="text"/> <input type="checkbox"/> Grant/Fund Set up. Index Requested. Initial <input type="text"/> Date <input type="text"/> <input type="checkbox"/> Email of Index to PI & Contact(s) in #11. Initial <input type="text"/> Date <input type="text"/> <input type="checkbox"/> Return to PreAward to file with Proposal until Award. Initial <input type="text"/> Date <input type="text"/> Assigned Grant/Fund/Index Numbers <input type="text"/> PreAward Name <input type="text"/>	

JUST IN TIME STAGE

A Sponsor (NIH) may request the following:

- Updated “Other Support” – current and pending
- Updated “Key Personnel”
- Human subject education statement
- Subcontracting plan - if over \$500,000
- Revised budget & justification



JUST IN TIME ON NIH ERA COMMONS


Commons Status Query - Just In Time - Microsoft Internet Explorer provided by HSLIC

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites

Address <https://commons.era.nih.gov/commons/status/jit/jit.jsp> Go Links

Google

 NATIONAL INSTITUTES OF HEALTH
eRA Commons
Version 2.7.3.10

Welcome jfedor
Institution: UNIVERSITY OF NEW MEXICO ALBUQUERQUE
Authority: AA SO [Log-out](#)

Home Admin Institution Profile Personal Profile **Status** eSNAP Links Help

Status Result

Just In Time

Just in Time allows the Principal Investigator or Signing Official to provide Other Support, IACUC, IRB, and Human Subject Assurances Just in Time information directly to the NIH when that information is requested. **Although a PI may save this information through Commons, only an SO may submit it to NIH.** Once the information has been submitted to the NIH, it will be available for viewing in Status in the Other Relevant Documents section.

Other Support Documentation is always required. If the application involves care and use of vertebrate animals or involves Human Subjects, verification of the date of the respective IACUC or IRB approval is required on this "Just in Time" page. If the specific date(s) is not available, you may not use this automated submission feature at this time. This version for electronic submission requires all data elements to be submitted at the same time. If some pieces of the requested information are delayed, all of the information must be submitted directly to the appropriate NIH Grants Management Office.

Application Information	
Grant Number:	1U01HS014677-01
PI Name:	SAPIEN, ROBERT
Proposal Title:	School Nurses

Please provide active and pending support for all key personnel. **Other Support includes all financial resources, whether Federal, non-Federal, commercial or institutional, available in direct support of an individual's research endeavors, including but not limited to research grants, cooperative agreements, contracts, and/or institutional awards.** Training awards, prizes, or gifts do not need to be included.

To provide the NIH Other Support, follow the suggested format available at <http://grants1.nih.gov/grants/funding/phs399/other-support.doc> and upload the document using the Import button provided below.

Files	File Name	Date Created	Status
Other Support File:			NOT UPLOADED

IRB Date: (MM/DD/YYYY)

Your Institution must certify to NIH that the research described in this application has received Institutional Review Board (IRB) approval by an IRB registered at OHRP under your Human Subjects Assurance Number. If the required IRB approval has been obtained, enter the IRB approval date. By specifying a Date and saving this form, you certify that you have IRB approval for this research. The OHRP Human Subjects Assurance Number listed for your Institution is **FWA0003255**.

Human Subject Education: Required only for key personnel (all individuals responsible for the design and conduct of the study) that are involved in human subject research. In the space below provide the following information: include the names of the key personnel who are responsible for the design and conduct of the study; the title of the education program completed by each named person plus a brief description of the program. Note: If research meeting the criteria for Exemption 4 is proposed, documentation is recommended, but not required.

Done

start 2 N... 3 W... 3 Mi... Micros... Micros... 3 Mi... Com... Internet 12:40 PM

AWARD STAGE

1. Award Budget Sheet (ABS)

- **F&A Cross College Split Percentage Commitments**
- **New Conflict of Interest forms if COI information has changed for any individual investigator**



AWARD STAGE: AWARD BUDGET SHEET (ABS)

PROPOSAL NO.	DATE SUBMITTED	PROJECT/BUDGET PERIOD:	F & A COSTS				
	12/4/2013	---	The Following should be used to calculate F&A costs unless the sponsor has specified a different F&A cost rate in writing.				
PRINCIPAL INVESTIGATOR'S NAME:	FUNDING AGENCY:		As of:	On Campus			
			7/1/18	7/1/18			
			7/1/18	7/1/18			
TITLE:			Research	51% 51.5% 26% 26%			
REVENUE CODES:			Instruction	52% 52% 26% 26%			
H&C F&D'S USE ONLY			Other Sponsored Programs	43.5% 43.5% 26% 26%			
Federal & Federal Flow Through			DoD Contracts	54% 54% 29% 29%			
State of New Mexico			Clinical Trials (Non-Federal)	28% 28% 26% 26%			
Local			F&A's	9.75% 9.75%			
Non-Government			Standard Calculation for F&A Costs Excludes:				
Cost Share			Enter "x" Here				
For more information on preparing budgets for contracts and grants, see the Principal Investigator's Guide or visit the Research web site at: http://research.unm.edu/policy_procedures/processing.html			To Apply F&A Rate to All Budget Categories				
Budget Category	Acct. Code	Continuation Year or Year 1	Year 2 Amount	Year 3 Amount	Year 4 Amount	Year 5 Amount	Total Amount
Faculty	(2000)						\$0
RA, TA, GA, PA	(2040)						\$0
Secretary/Clerical	(2060)						\$0
Technician	(2040)						\$0
Temporary/Student	(2070)						\$0
RA & PA Tuition Compensation	(2041)						\$0
Professional	(2020)						\$0
Post Doctoral	(2020)						\$0
Private Benefits, Include RA Insurance	(2110)						\$0
Other Supply Costs	(3720)						\$0
Computer Software	(3140)						\$0
Computer Supplies	(3160)						\$0
Telephone	(8020)						\$0
Equipment Warranty/Service Contracts	(7001)						\$0
Equipment Maintenance	(7050)						\$0
Equipment Hardware Maintenance	(7060)						\$0
Equipment Software Maintenance	(7081)						\$0
Equipment Rentals	(7090)						\$0
Cell Phone	(8080)						\$0
Postage/Shipping	(3140)						\$0
Operation/Supply Services	(6920)						\$0
Sponsor Approved FOOD	(3190)						\$0
Temp Services	(6960)						\$0
Non-Capital Equipment <\$5001	(1180)						\$0
Computers & Servers < \$5001	(1185)						\$0
Equipment - Capital > \$5000	(6000)						\$0
Computer Hardware > \$5000	(6020)						\$0
Equipment Fabricated	(6090)						\$0
Fixed Equipment	(6030)						\$0
Equipment - Non-Unit Travel	(3240)						\$0
Travel - In-State	(3600)						\$0
Travel-Out of State	(3620)						\$0
Travel-Foreign	(3640)						\$0
BSA, Reservations/Airfare/etc	(6020)						\$0
Participant Costs	(4960)						\$0
Participant Travel	(5020)						\$0
Participant Incentives	(4940)						\$0
IN-Patient Care	(5000)						\$0
OUT-Patient Care	(5020)						\$0
Animal Care	(4900)						\$0
Lab Supplies	(3180)						\$0
Consultants	(6930)						\$0
University Hospital (UH)	(6370)						\$0
Professional Services - Other	(6920)						\$0
Student Fees/Tuition	(4000)						\$0
Student Stipend	(4060)						\$0
Student Travel	(4080)						\$0
Student Costs - Other	(4070)						\$0
Subaward	(87 -)						\$0
Subaward	(87 -)						\$0
Subaward	(87 -)						\$0
Subaward	(87 -)						\$0
Subaward	(87 -)						\$0
Big Rate - If Off Campus Rate Used	(7090)						\$0
User Defined(1)							\$0
User Defined(2)							\$0
Other Research Costs	(4920)						\$0
Other Operating Costs	(8060)						\$0
Modified Direct Costs for Rate 1		\$0	\$0	\$0	\$0	\$0	\$0
Modified Direct Costs for Rate 2		\$0	\$0	\$0	\$0	\$0	\$0
Total Modified Direct Costs		\$0	\$0	\$0	\$0	\$0	\$0
TOTAL DIRECT COSTS		\$0	\$0	\$0	\$0	\$0	\$0
F&A Costs - Rate 1 @	(8620)	\$0	\$0	\$0	\$0	\$0	\$0
F&A Costs - Rate 2 @	(8620)	\$0	\$0	\$0	\$0	\$0	\$0
GRAND TOTALS		\$0	\$0	\$0	\$0	\$0	\$0

Updated 10/03/13

- Match the Notice of Award or the Budget in the contract
- Use account codes to suit the Sponsored Project needs
- List each Subaward's total costs
- Enter the appropriate F&A rate
- Calculate F&A amount as a percentage of Total Direct Costs OR based on the funding source, follow the guidelines of the Federal F&A Rate Agreement - see next slide
- Tools, Protection, Unprotect Sheet

AWARD STAGE: ABS - MTDC

For Federal sponsors and subawards from a federal primary grant:

Calculate F&A amount as a percentage of Modified Total Direct Costs.

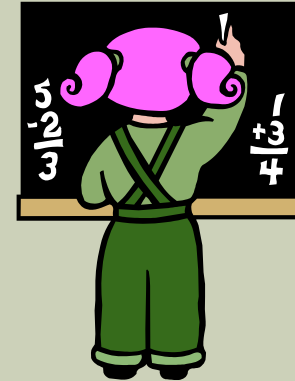
The account codes in yellow are excluded.



AWARD STAGE: ABS – MTDC MODIFIERS

Items excluded from
Modified Direct Total Costs:

- The cost of patient care
- Student tuition
- Rental and maintenance costs of off-campus facilities if off campus F&A rate is used
- Equipment or computer hardware that costs over \$5000 each
- The cost of each subaward after the first \$25,000 per competitive cycle.



INTERDEPARTMENTAL COOPERATION



SPO ADMINISTRATION

Staff of 12 in HSSB Room 102

- Director: Rena Vinyard
- Managers: Stacy Bigbie, Jenni LeBlanc
- 2 Sr. Sponsored Project Officers
- 3 Sponsored Project Officers
- 3 Sponsored Project Specialists
- Admin Assistance



C&G ACCT. ADMINISTRATION

Staff of 18 in HSSB Room 102

- Associate Controller: Shirley Mitchell
- 1 Supervisor
- 2 Sr. Fiscal Services Techs
- 8 Fiscal Monitors
- 3 Special Projects
- 2 Billing Clerks
- Admin Assistant



MORE TRAINING AND TOOLS

Sponsored Projects Website

- Guide for Principle Investigators
- Q&A
- Internal Forms & Procedures
- SPO Processes Flowcharted




Learning Central

- Submitting NIH Applications Online Lecture
- Submitting NIH Applications Online Lab
- Grants Management Program: General Workshop
- Grants Management-Recertification (Online)
- Banner Fundamentals and Navigation
- Banner Contract & Grant Fundamentals
- Advanced Banner Functionality and Navigation (Web Course)

PREAWARD WEBSITE

THE UNIVERSITY of NEW MEXICO

Health Sciences Center UNM A-Z Directory FastInfo myUNM

 **UNM** | HEALTH SCIENCES CENTER

Students Patients Researchers School of Medicine Library

College of Nursing College of Pharmacy UNM Hospitals UNM Medical Group, Inc. UNM Cancer Center

Sponsored Projects Office (SPO) / Preaward

[Contact Us](#) [Whom to Contact](#) [Directions](#)

WHAT WE DO

We are the birthplace of Grants, Contracts and Other Agreements that benefit the UNM Health Science Center in its Research, Public Service and Educational goals. The role of the Sponsored Projects Office (SPO) / PreAward is reviewing, approving, negotiating, and advising HSC Principal Investigators, Faculty & Staff members who seek external funding from federal, state, local, and business entities. SPO also negotiates [Material Transfer Agreements](#) (MTA) and [Confidential Disclosure Agreements](#) (CDA) and Clinical Trial Agreements (CTA) with pharma. Contact us and let us help you with your funding needs today!

SPO / PreAward News & Info

- [New F&A Rates](#)
- [New DHHS Salary Cap](#)
- [Implementation of Cap Chart](#)
- [What Agencies are DHHS](#)
- [NRSA 2012 Stipend Amounts \(use for 2013 Also\)](#)

HSC SPO / PreAward Reports

- [FY14 HSC Summary Chart](#)
- [FY14 SOM Summary Chart](#)
- [FY14 CON Summary Chart](#)
- [FY14 COP Summary Chart](#)
- [FY13 HSC Awards Booklet Listing](#)

Tips from the HSC SPO / PreAward Director

- Ask Lots of Questions - We are here to help you!
- Check PreAward Website frequently for policy updates
- Comply. Comply. Comply

HSC SPO / PreAward Guide for Departments

This guide will assist with completing internal forms, defining roles and answering FAQ's

SUBMISSION DATES to PreAward (BUSINESS DAYS)

Sponsored Projects Office
Home
Internal Forms & Proposal Procedures
Just the Forms
Electronic Submission
Just In Time (JIT)
UNMHSC Numbers
UNMHSC Guidance & Documents
HSC Policy & Memos
Clinical Trial Info
Material Transfer Agreements
Confidential Disclosure Agreements
Q & A
Preaward Processes Flowcharted
Training Opportunities
Funding Opportunities
SubAward Guidance
PCORI Info **NEW******

Create Your Own Report/Query
[Query Instructions](#)
[Awards](#)
[Pending](#)
[Ancillary Agreements i.e. MTA's](#)
[CDA's DUA's](#)

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Sponsored Projects Office / PreAward, HSC
MBC09 5220
1 University of New Mexico
Albuquerque, NM 87131-0001
Phone: (505) 272-6264
Fax: (505) 272-0159
Email: hscpreaward@salud.unm.edu
[Sponsored Projects Office / PreAward Internal](#)
[Grant Transmittal Form](#)

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[Links to Funding Agencies](#)