AURA Meeting Agenda
Wednesday, July 27, 2011
10:00 a.m. – 11:30 a.m.
MSB 2.135

• Introductions    Karen Niemeier

• CPRIT Awards    Keith Kaptchinskie

• NIH 2% Inflation    Whitney Houston

• Revised Forms    Whitney Houston
   o R&A Form
   o PI Certification

• ECERT    Ashley Popham

• Staffing Updates    Jodi Ogden

• Next Meeting    Jodi Ogden
AURA
The University of Texas Health Science Center at Houston

JULY 27, 2011
10-11:30
MSB 2.135
Introductions
CPRIT Awards

KEITH KAPTCHINSKIE
CPRIT Guidelines:

- Carry-forward for all awards require agency approval.
- Budget modifications of 10% or less of the total award are allowed, but require a Budget Transfer Notification Form (submitted online by the department).
- Financial reports are for expenses only. Accruals and Encumbrances will not be reflected on financial reports. This makes it very important to get expenses processed as soon as possible.
CPRIT Guidelines:

- When you upload forms/reports into the system for the annual report, please do not submit to the agency until PAF reviews. (Some require institutional signatures. We will get these before they are submitted) Once reports have been submitted, we cannot change them. The files have to be unlocked by CPRIT before a revision can be made.

- Salary cap of $200,000 is applied to all CPRIT awards.
Qtrly report: (submitted via e-mail)
  - Financial (expenses only)
Quarterly and Annual reports are required by the agency:

- **Annual Reports:** (will be reported online only)
  - Annual Report Certification form
    - This form will be completed by PAF. The agency requires that it is signed by an institutional official. PAF will e-mail the PI and ask them to certify to the truth and accuracy of the progress report before the institutional official is asked to sign.
Certification

By signing below, I certify that the information provided in this Final Annual Progress Report is true and correct and that grant recipient is in compliance with each obligation as set forth in the grant contract.

<table>
<thead>
<tr>
<th>Signature:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Grants Contract/Sponsored Projects Office:</td>
</tr>
<tr>
<td>Title:</td>
</tr>
<tr>
<td>Grant Number:</td>
</tr>
</tbody>
</table>
Quarterly and Annual reports are required by the agency:

- **Financial Status Report (Form 269A)**
  - Will be completed by PAF. Only expenses can be reported, no accruals or encumbrances.
CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS
FINANCIAL STATUS REPORT
Form 269A
PO Box 12097, Capitol Station              512-463-3190
Austin, TX 78711                        512-475-2563 (Fax)

Contractor Name:  [Blank]
CPRIT Project No.: [Blank]

Project Title: [Blank]
Payee Name: [Blank]
Address: [Blank]
City, State, Zip: [Blank]
Payee Vendor ID No.: [Blank]

Contract Term: ( Month / Day / Year ): [Blank]
From: mm/dd/yy To: mm/dd/yy
Period Covered by this Report: [Blank]

Final Report? Yes                 No mm/dd/yy through mm/dd/yy

<table>
<thead>
<tr>
<th>CATEGORIES</th>
<th>APPROVED BUDGET</th>
<th>(iii.) PROJECT COSTS THIS PERIOD</th>
<th>CUMULATIVE PROJECT COSTS</th>
<th>(v.) Remaining Budget Balance (ii minus iv)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. PERSONNEL</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>b. FRINGE BENEFITS</td>
<td>0.00</td>
<td>0.00</td>
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<td>c. TRAVEL</td>
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<td>d. EQUIPMENT</td>
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<td>e. SUPPLIES</td>
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<td>f. CONTRACTUAL</td>
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<td>g. OTHER</td>
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<tr>
<td>h. Total Direct Charges</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>i. Indirect Charges (research awards only)</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>j. Total Charges</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>k. Program Income Expended</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>l. In-Kind Contributions (prevention awards only)</td>
<td>0.00</td>
<td>0.00</td>
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</tbody>
</table>

Prepared by:
Title: [Blank]
Telephone No.: [Blank]

CERTIFICATION: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.

Signature of Authorized Certifying Official: [Blank]
Telephone No.: [Blank]
Fax No.: [Blank]

Typed or Printed Name and Title of Certifying Official: [Blank]
Date Submitted: [Blank]
FSR Receipt Date: [Blank]

12a. Prior Years Program Income
Carryover............................................................................................................... $ -

12b. Current Year Program Income
Collected.................................................................................................................. $ -

12c. Total Program Income (prior year carryover & current year collected)........................................ $ -

Item 11k © must be equal to or greater than Item 12a by the end of the contract. ( ) indicate with an X each category where Program Income (PI) has been expended.
Quarterly and Annual reports are required by the agency:

- **Budget Transfer Notification Form**
  - This will be completed online by the department anytime a budget modification needs to be processed (even if it is under the 10% rule and does not require agency approval.) PAF will check for this online form before we approve the budget transfer.
**Entity:**

**PI:**

**Grant Number:**

### Budget Changes:

<table>
<thead>
<tr>
<th>Budget Categories</th>
<th>Approved Budget</th>
<th>Budget Change in Categories (10% Cap)</th>
<th>Revised Budget</th>
<th>Total Transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
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<td>Fringe Benefits</td>
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<td>Travel</td>
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<td>Equipment</td>
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<td>Supplies</td>
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<td>Contractual</td>
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<tr>
<td>Other</td>
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<tr>
<td>Indirect Costs</td>
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<tr>
<td><strong>Total</strong></td>
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Briefly explain how this transfer fits into the scope of the project:

Will this transfer materially change the nature, performance level, or project scope or work plan? If yes, briefly explain.  
Yes  
No

Will this transfer affect your ability to meet your performance measure projection? If yes, briefly explain.  
Yes  
No

Signature of Authorized Project Representative  
Printed Name  
Date
Quarterly and Annual reports are required by the agency:

- Carry-forward Fund Notification
  - Is required on all annual reports. This form will need to be completed by the PI once the annual report is completed. If this is not submitted, Carry-forward will not be awarded.
CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS
CARRY FORWARD FUNDS NOTIFICATION

ORGANIZATION/AGENCY:  
PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR:  
PROJECT/GRANT NUMBER:  

Budget with Carry Forward Balances:

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>ANNUAL APPROVED BUDGET</th>
<th>CARRY FORWARD FUNDS FROM YEAR ONE</th>
<th>SUBSEQUENT YEARS ANNUAL APPROVED BUDGET</th>
<th>SUBSEQUENT YEARS REVISED ANNUAL BUDGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSONNEL</td>
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<tr>
<td>FRINGE BENEFITS</td>
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<td>OTHER</td>
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<tr>
<td>INDIRECT COSTS</td>
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<tr>
<td>TOTAL</td>
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Percentage of Carry Forward Funds (if over 25%, requires approval from CPRIT):  

Briefly explain how the carry forward of funds fits into the scope of the project:

Will the carry forward funds materially change the nature, performance level, or project scope or work plan? If yes, briefly explain.  
Yes  No

Will the carry forward of funds affect your ability to meet your performance measure projection? If yes, briefly explain.  
Yes  No

Signature of Authorized Project Representative | Printed Name | Date
Quarterly and Annual reports are required by the agency:

- These reports will be completed by PAF

- Historically Underutilized Business (HUB) Form
  - Will be completed by PAF

- Annual Inventory Report form
  - Will be completed by PAF

- Single Audit Determination Form
  - Will be completed by PAF
If you are asked by the agency for any reporting and you are unsure who processes the report, please contact PAF.

For more information please see the link below for frequently asked questions on CPRIT’s web page

http://www.cprit.state.tx.us/funding-opportunities/grant-faq/
NIH 2% Inflation
Non-competing Awards

- Inflationary adjustments for recurring costs on non-competing research grants in FY 2012 and beyond will be set at the **2 percent** level.
- This policy does not apply to projects supported by Career Awards, SBIR/STTRs, and Ruth L. Kirschstein-National Research Service Award (NRSA) Individual Fellowships & Institutional Training Grants.
- Awards that have already been made in FY 2011 which are impacted by this policy may be revised.
Competing Research Awards

- Consistent with the policy for non-competitive awards, future inflationary adjustments for recurring costs on competing research grants will be provided at 2 percent.
- Awards that have already been made in FY 2011 which are affected by this policy may be revised in accordance with the guidelines in this Notice.

Resource: Notice Number: NOT-OD-11-068
Revised Forms

WHITNEY HOUSTON
Review & Approval Form

- Begin using new forms August 1, 2011
- We will accept older versions of the R&A through August 31st
- After September 1, 2011 the new R&A must be used for all proposals submitted through OSP.

https://inside.uthouston.edu/finance/sponsored-projects/
PI Certification Form

- Effective September 1, 2011
- Renamed R&A Addendum
ECERT

ASHLEY POPHAM
AURA Schedule for 2011

- January 26
- March 23
- May 25
- July 27
- September 28
- November 30

All meetings will be held in MSB 2.135 at 10:00 a.m.