

AMERICAN CIVIL LIBERTIES UNION FOUNDATION

OLGA AKSELROD (NY Bar No. 4132825) (Appearance *Pro Hac Vice*)

oakselrod@aclu.org

VERA EIDELMAN (CA Bar No. 308535)**

veidelman@aclu.org

RACHEL MEEROPOL (NY Bar No. 4100954) (Appearance *Pro Hac Vice*)

rmeeropol@aclu.org

ALEXIS AGATHOCLEOUS (NY Bar No. 4227062)*

aagathocleous@aclu.org

125 Broad Street, 18th Floor

New York, NY 10004

Telephone: (212) 549-2659

Attorneys for Plaintiffs

(Additional Counsel on Following Page)

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN FRANCISCO DIVISION**

ARGHAVAN SALLES; ABIGAIL HATCHER;
ANDREA ROSSO; ANN D. COHEN-WILSON;
DOLORES ALBARRACÍN; HEIDI MOSESON;
JADE PAGKAS-BATHER; JONATHAN KYLE
DAW; KATIE EDWARDS; KELTON MINOR;
MICHAEL D. GREEN; SARA JACKSON;
SUZANNE BELL; JORDAN DOE 1; JORDAN DOE
2; JORDAN DOE 3; and JORDAN DOE 4, *on behalf
of themselves and all others similarly situated,*

Plaintiffs,

v.

NATIONAL INSTITUTES OF HEALTH; JAY
BHATTACHARYA, *in his official capacity as
Director of the National Institutes of Health*; UNITED
STATES DEPARTMENT OF HEALTH AND
HUMAN SERVICES; ROBERT F. KENNEDY, JR.,
*in his official capacity as Secretary of the United States
Department of Health and Human Services*; and
UNITED STATES DOGE SERVICE,

Defendants.

Case No. 3:26-cv-10510-SK

**DECLARATION OF
JONATHAN KYLE DAW**

* Application for *Pro Hac Vice* Admission Forthcoming

** Out-of-State Licensee Renewal Pending

(Additional Counsel on Behalf of Plaintiffs)

**AMERICAN CIVIL LIBERTIES UNION
FOUNDATION OF NORTHERN CALIFORNIA**

GRAYCE ZELPHIN (CA Bar No. 279112)

gzelphin@aclunc.org

CHESSIE THACHER (CA Bar No. 296767)

cthacher@aclunc.org

NEIL K. SAWHNEY (CA Bar No. 300130)

nsawhney@aclunc.org

39 Drumm Street

San Francisco, CA 94111

Telephone: (415) 621-2493

PROTECT DEMOCRACY PROJECT

SHALINI AGARWAL (DC Bar No. 990963) (Appearance *Pro Hac Vice*)

shalini.agarwal@protectdemocracy.org

2020 Pennsylvania Avenue, NW, Suite 163

Washington, DC 20006

KENNETH PARRENO (TX Bar No. 24130477)*

kenneth.parreno@protectdemocracy.org

15 Main Street, Suite 312

Watertown, MA 02472

Telephone: (202) 579-4582

CENTER FOR SCIENCE IN THE PUBLIC INTEREST

LISA S. MANKOFSKY (DC Bar No. 411931) (Appearance *Pro Hac Vice*)

lmankofsky@cspi.org

OSCAR HEANUE (DC Bar No. 90036939) (Appearance *Pro Hac Vice*)

oheanue@cspi.org

1250 I Street, NW, Suite 500

Washington, DC 20005

Telephone: (202) 777-8381

JACOBSON LAWYERS GROUP PLLC

DANIEL F. JACOBSON (DC Bar No. 1016621)*

dan@jacobsonlawyersgroup.com

LYNN D. EISENBERG (DC Bar No. 1017511) (Appearance *Pro Hac Vice*)

lynn@jacobsonlawyersgroup.com

STEPHEN K. WIRTH (DC Bar No. 1034038) (Appearance *Pro Hac Vice*)

stephen@jacobsonlawyersgroup.com

5100 Wisconsin Avenue, NW, Suite 301

Washington, DC 20016

Telephone: (301) 823-1148

* Application for *Pro Hac Vice* Admission Forthcoming

1 I, Jonathan Kyle Daw, declare:

2 1. I have personal knowledge of the facts set forth in this declaration, and if called to testify
3 as a witness thereto, could do so competently under oath.

4 2. I am a Professor of Sociology and Demography at the Pennsylvania State University.
5 Broadly speaking, my research focuses on how demographic, inequality, and biological processes
6 combine to influence health and well-being. The main focus of my research currently is to study the
7 causes of racial and ethnic disparities in kidney disease, kidney failure, treatments for kidney failure, and
8 kidney failure patient mortality.

9 3. I offer this declaration in my individual capacity and not on behalf of my employer.

10 4. I earned a B.A. in Sociology and Government in 2005 at the University of Texas at
11 Austin. I then earned my M.A. (in 2007) and Ph.D. (in 2011) in Sociology from the University of North
12 Carolina – Chapel Hill.

13 5. Before working at Penn State, I was an Assistant Professor of Medical Sociology at the
14 University of Alabama – Birmingham. Prior to that, I completed my postdoctoral fellowship at the
15 Institute of Behavioral Science and the Institute for Behavioral Genetics at the University of Colorado –
16 Boulder.

17 6. I am the author of over 40 peer-reviewed scientific publications, published in many top
18 medical and sociology journals, including the *American Journal of Transplantation*, *Clinical*
19 *Transplantation*, *Kidney Medicine*, *Transplant Immunology*, *Progress in Transplantation*, the *American*
20 *Journal of Public Health*, the *American Journal of Preventive Medicine*, *Proceedings of the National*
21 *Academies of Sciences*, the *American Journal of Sociology*, the *Journal of Health & Social Behavior*,
22 and *Social Science & Medicine*.

23 7. My interest in the social determinants of kidney disease and transplantation research
24 developed throughout my academic training. During that training, I realized that health research—and in
25 particular, research around kidney transplantation—layered together my interests in things like family
26 dynamics, genetics, and social outcomes. And what I observed throughout my time as a researcher is
27 that there are huge disparities between racial and ethnic groups when it comes to kidney disease, kidney
28 failure, kidney failure treatments, and kidney failure patient mortality.

1 8. Institutional grantees are the entities that host the research and receive award and funding
2 from the National Institutes of Health (NIH), and are generally universities, hospitals, and sometimes
3 non-profits and other entities. Awards also name one or more Principal Investigators, who are
4 researchers directly responsible for proposing the projects, overseeing the design and implementation of
5 studies, and managing the research from the application stage through the end of a grant. In 2022, the
6 National Institute of Diabetes and Digestive and Kidney Diseases at the NIH awarded a four-year R01
7 grant for which I was the Principal Investigator. The grant number for that award is R01DK132953, and
8 the project is titled, “The Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney
9 Disease from Healthy Population to Mortality.”

10 9. The goal of this project was to understand why there are racial and ethnic disparities in
11 kidney failure, kidney failure treatment receipt, and kidney failure patient mortality. Our hypothesis,
12 based on decades of theoretical and empirical research by our team and many others, was that structural
13 racism is a key driver of racial and ethnic disparities in these critical outcomes. In our view, structural
14 racism is best measured by examining area racial/ethnic disparities in key life outcomes, such as earning
15 a college degree, owning a home, being incarcerated, having health insurance, and living in poverty. A
16 key goal of the project was to construct the most comprehensive database of structural racism indicators
17 ever constructed, with the aim to construct a structural racism index comprised of 8 different
18 race/ethnicity-specific indicators on five different racial/ethnic groups at the county level over a 30-year
19 time span. Assembling and cleaning this database and using it to construct our structural racism indices
20 for each racial/ethnic comparison in each time period has constituted the bulk of our efforts on this
21 project to date, and the final steps in this process are currently finally being completed.

22 10. Attached hereto as Exhibit 1 is a true and correct copy of this R01 grant’s original Notice
23 of Award (“NOA”).

24 11. The grant application did not come together overnight. I started developing the
25 application for this grant back in 2018, collaborating with a graduate student in my department at the
26 time. The work included a broad review of literature, assessing the data sources available to us, and
27 preliminary data analysis. All that, along with collaborating with other researchers to draft and
28

1 repeatedly revise the application materials in preparation for submission, cumulatively took hundreds of
2 hours over almost three years.

3 12. A few months after the grant was awarded, I applied for a diversity supplement to the
4 award. The goal of this diversity supplement was to mentor and collaborate with a researcher whose
5 background had been in public policy, so that she could assist with the research funded through the
6 original grant and eventually propose her own kidney disease-related projects.

7 13. NIH awarded that diversity supplement on August 18, 2023. Attached hereto as Exhibit 2
8 is a true and correct copy of the original NOA of this diversity supplement.

9 14. Until May 2025, we submitted annual progress reports and sought non-competitive
10 renewal for these grants without any concerns raised by NIH officials regarding this project.

11 15. But on May 1, 2025, a colleague at Penn State informed me by email that NIH had
12 terminated the diversity supplement grant. NIH had issued a revised NOA for this grant, listing an end
13 date of April 29, 2025. Attached hereto as Exhibit 3 is a true and correct copy of the revised NOA of this
14 diversity supplement. Later that day, that same colleague informed me by email that NIH had terminated
15 the parent R01 grant. NIH had issued a revised NOA for this grant, listing an end date of April 30, 2025.
16 Attached hereto as Exhibit 4 is a true and correct copy of the revised NOA of this grant.

17 16. The revised NOAs provided no individualized explanation for why the grants were
18 canceled, and both fail to discuss the grant application, progress reports, or other related materials. The
19 project was proceeding well, and the project's annual progress reports had never prompted questioning
20 or reduction in funds from the NIH prior to this termination.

21 17. Instead, NIH provided the following statement for the termination:

22 It is the policy of NIH not to prioritize research programs related to DEI: Research
23 programs based primarily on artificial and non-scientific categories, including amorphous
24 equity objectives, are antithetical to the scientific inquiry, do nothing to expand our
25 knowledge of living systems, provide low returns on investment, and ultimately do not
26 enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and
27 inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of
28 race and other protected characteristics, which harms the health of Americans. Therefore,
it is the policy of NIH not to prioritize such research programs.

Ex. 3 at 6; Ex. 4 at 6.

18. Prior to the termination, we had made significant progress in this project. In addition to the work noted above constructing the structural racism database, we had regularly held meetings of a community advisory board based in Pittsburgh, Pennsylvania and Baltimore, Maryland, when we met with a group of community members to talk about our research findings, connect that research to the lived experiences of those individuals as patients and as community advocates, and learn from those experiences to inform our own research. This work has thus far resulted in two research manuscripts, one (Corradi *et al.*, “Development and Integration of Community Advisory Boards to Inform Research on the Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney Disease”) published in *Health Expectations*, and the other (Corradi *et al.*, “On the Back Burner: Lived Experiences of Structural Racism and End-Stage Kidney Disease”) presently under review at a peer-reviewed journal. We also published descriptive analyses comparing the treatment histories of young kidney failure patients by race/ethnicity in *Kidney Medicine* (Pessin *et al.* 2026, “Kidney Replacement Therapy Sequences: Racial/Ethnic Disparities in End-Stage Kidney Disease Patients’ 10-Year Treatment Histories”). Finally, we have presented several conference papers developed based on preliminary versions of the structural racism index and associated health disparities, including the following: “County-Level Structural Racism Predicts Black-White End-Stage Kidney Disease Patient Mortality Disparities” at the 2023 American Society of Nephrology conference, “County-Level Structural Racism and the Black-White Gap in End-Stage Renal Disease Incidence” at the 2024 Population Association of American conference, “County-Level Structural Racism Measures Beyond Black and White” at the 2025 Population Association of America conference, and “County-Level Structural Racism and Mortality Rates Among Non-Hispanic White, Non-Hispanic Black, and Hispanic Populations” at the 2025 Population Association of America conference. This work supports our project’s hypothesis that racial/ethnic disparities in kidney disease incidence and mortality are worsened in counties characterized by higher levels of structural racism (as measured by our index).

19. Unfortunately, the grant’s termination substantially slowed and in some instances even stalled the project’s progress. Following the termination, our research team sought replacement funding from the Pennsylvania State University Social Science Research Institute (PSU SSRI) and other potential funding sources, and applications for those alternative funding sources took dozens of hours

1 during that could not be used to conduct research related to this grant. Eventually, we did receive some
2 funding from PSU SSRI, for which we were very grateful, but those funds were able to cover only a
3 small percentage of the funds lost due to termination. In addition, leading up to the termination, we were
4 pursuing further data collection, refinement, and analysis before submitting further publications. That
5 takes a lot of time and labor. But because members of the research team lost funding from this grant to
6 directly support this research, some of those members had to spend more of their time on responsibilities
7 outside of the research itself, such as teaching more or taking on other non-research responsibilities at
8 their institution. What's more, to gather and analyze data for our database, we needed a programmer
9 dedicated to that task, but for one month prior to receiving the PSU SSRI funds we were unable to
10 secure one because of a lack of funding resulting from this termination, and although we were
11 eventually able to secure one, our work has been delayed as a result. As such, the research has continued
12 at a much slower pace, meaning that the medical community and the broader public have been delayed
13 in benefiting from the findings and recommendations of our research.

14 20. Prior to the grant termination, we had been scheduled to hold two more meetings of the
15 Community Advisory Board, but those have not been held because of the termination. Due to this long
16 period of disengagement, lost information sharing, and trust, it is unclear if we will be able to reconvene
17 the same group in the future even if the funds are restored.

18 21. The delay in our research has slowed down our ability to demonstrate results from our
19 research, limiting the competitiveness of future grant applications from my colleagues who are also
20 working on this project and me. In addition, I have had to forego attending several medical conferences
21 because of a lack of sufficient funding. Our team's inability to attend these important medical
22 conferences limits our ability to keep up with the latest research presented at these conferences which is
23 often not yet published, limits our ability to share our work with our peers working on similar topics,
24 and limits our ability to network and establish new projects and collaborations with those peers, as
25 conferences are often places where new ideas for grant applications or research collaborations
26 germinate.

27 22. Given these terminations, and my understanding that research related to my grant is
28 disfavored under NIH's current policies, I do not believe it is worthwhile to submit new grants studying

1 the impact of structural racism on racial/ethnic health disparities while the present administration is in
2 power. This unfortunate situation is a loss not only for my team and myself, but also the broader medical
3 community and for public health, as research like that supported by this grant—that is, trying to discern
4 why different groups of people experience kidney disease and failure at different rates, with different
5 treatments, and different mortality outcomes—is critical not only to achieving NIH’s mission, but also to
6 making sure we have a healthier society. As an expert in population health, I know that the large health
7 disparities observed in our population by race/ethnicity, gender, socioeconomic status, and geography
8 substantially account for the large gaps between U.S. life expectancy and disease burden and those of
9 other wealthy and many middle-income countries, so this work could not be more essential to U.S.
10 public health.

11 23. Restoring this grant would be a huge benefit to our research efforts and to the broader
12 public health. That restoration would allow us to provide funding for our team members to spend more
13 time on research relating to this project. That in turn would allow us to process and analyze data more
14 quickly, as well as to produce publications at a faster rate, which would in turn allow us to distribute our
15 findings more quickly than without this funding.

16 24. I understand that, as a class representative, I represent the interests of everyone in the
17 class, and not just myself. I am prepared to stay informed about what is happening with my case and
18 stay in touch with my attorneys to give them information they need. I am committed to being a class
19 representative because I do not want other researchers to be subjected to the same unlawful policies and
20 actions that I have experienced. I have never served as a class representative in any prior action.

21
22 I declare under penalty of perjury that the foregoing is true and correct, and that this declaration
23 was executed at State College, Pennsylvania this 21st day of September 2026.

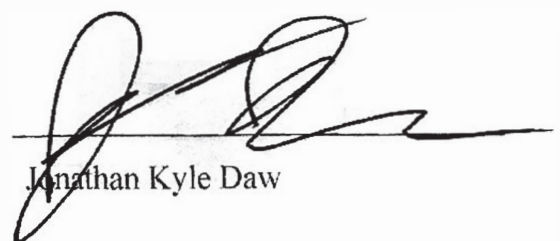
24
25
26
27
28

Jonathan Kyle Daw

Exhibit 1



National Institutes of Health

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND

KIDNEY DISEASES

FAIN# R01DK132953

Federal Award Date

10/13/2022

Recipient Information**1. Recipient Name**PENNSYLVANIA STATE UNIVERSITY, THE
201 OLD MAIN

UNIVERSITY PARK, 16802

2. Congressional District of Recipient

12

3. Payment System Identifier (ID)

1246000376A1

4. Employer Identification Number (EIN)

246000376

5. Data Universal Numbering System (DUNS)

003403953

6. Recipient's Unique Entity Identifier

NPM2J7MSCF61

7. Project Director or Principal Investigator

Jonathan Kyle Daw, PHD

Associate Professor

jud36@psu.edu

814-863-0096

8. Authorized Official

Ms. Barbara E Rigg

Federal Agency Information**9. Awarding Agency Contact Information**

Norma G DeGuzman

Senior Grants Management Specialist

NATIONAL INSTITUTE OF DIABETES AND

DIGESTIVE AND KIDNEY DISEASES

norma.deguzman@nih.gov

301-480-1810

10. Program Official Contact Information

JENNIFER MICHELLE Norton

NATIONAL INSTITUTE OF DIABETES AND

DIGESTIVE AND KIDNEY DISEASES

jenna.norton@nih.gov

301-451-7314

Federal Award Information**11. Award Number**

1R01DK132953-01

12. Unique Federal Award Identification Number (FAIN)

R01DK132953

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project TitleThe Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney
Disease from Healthy Population to Mortality**15. Assistance Listing Number**

93.847

16. Assistance Listing Program Title

Diabetes, Digestive, and Kidney Diseases Extramural Research

17. Award Action Type

New Competing (REVISED)

18. Is the Award R&D?

Yes

Summary Federal Award Financial Information**19. Budget Period Start Date 08/01/2022 – End Date 05/31/2023****20. Total Amount of Federal Funds Obligated by this Action** \$0

20 a. Direct Cost Amount \$0

20 b. Indirect Cost Amount \$0

21. Authorized Carryover**22. Offset****23. Total Amount of Federal Funds Obligated this budget period** \$756,925**24. Total Approved Cost Sharing or Matching, where applicable** \$0**25. Total Federal and Non-Federal Approved this Budget Period** \$756,925**26. Project Period Start Date 08/01/2022 – End Date 05/31/2026****27. Total Amount of the Federal Award including Approved Cost** \$756,925

Sharing or Matching this Project Period

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Diana T Ly

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

**RESEARCH**

Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

SECTION I – AWARD DATA – 1R01DK132953-01 REVISED
Principal Investigator(s):

Jonathan Kyle Daw, PHD

Award e-mailed to: osp@psu.edu

Dear Authorized Official:

The National Institutes of Health hereby revises this award (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to PENNSYLVANIA STATE UNIVERSITY in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as “Research reported in this publication was supported by the National Institute Of Diabetes And Digestive And Kidney Diseases of the National Institutes of Health under Award Number R01DK132953. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.” Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator’s Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Diana T Ly

Grants Management Officer

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)

Salaries and Wages	\$234,614
Fringe Benefits	\$77,337
Personnel Costs (Subtotal)	\$311,951
Consultant Services	\$21,000
Travel	\$16,692
Other	\$47,730
Subawards/Consortium/Contractual Costs	\$90,377

Federal Direct Costs	\$487,750
Federal F&A Costs	\$269,175
Approved Budget	\$756,925
Total Amount of Federal Funds Authorized (Federal Share)	\$756,925
TOTAL FEDERAL AWARD AMOUNT	\$756,925

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$756,925	\$756,925
2	\$658,335	\$658,335
3	\$651,574	\$651,574
4	\$580,038	\$580,038

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

Fiscal Information:

Payment System Identifier: 1246000376A1
Document Number: RDK132953A
PMS Account Type: P (Subaccount)
Fiscal Year: 2022

IC	CAN	2022	2023	2024	2025
DK	8472279	\$756,925	\$658,335	\$651,574	\$580,038

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

NIH Administrative Data:

PCC: KJN KHE / OC: 41021 / Released: Ly, Diana 10/13/2022

Award Processed: 10/14/2022 12:03:44 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 1R01DK132953-01 REVISED

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 1R01DK132953-01 REVISED

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- c. 45 CFR Part 75.
- d. National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- f. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of "Research and Development" at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01DK132953. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in

the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income:

Additional Costs

SECTION IV – DK SPECIFIC AWARD CONDITIONS – 1R01DK132953-01 REVISED

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

REVISION #1:

Revised to add subaward to Georgia Southern University (GSU) and revised the budget to Florida State University (FSU) per request dated 09/15/2022.

Georgian Southern University in the amount of \$ 42,730 (\$ 30,092 direct costs + \$12,638 facilities and administrative costs).

Florida State University in the amount of \$25,909 (\$16,824 direct costs + \$9,085 facilities and administrative costs). Budget revision applied.

Consortiums are to be established and administered as described in the [NIH Grants Policy Statement](#).

The following terms from the previous notice of award also apply to this award:

Budget Period Adjustment

Although the initial budget period for this award is 08/01/2022 – 05/31/2023, the award includes funds for 12 months of support. Future year budget periods will cycle each year on 06/01.

The recycling of this award may have changed the receipt date for the next competing continuation (Type 2) application. Please consult the [NIH Grants and Funding Application Cycle](#) for the established deadline date.

Award Budget

The award is based on the IRG recommendations as noted on the Summary Statement and no further administrative reductions have been taken.

See the budget information below for additional information.

Period of Support

To achieve an average competitive segment of 4 years for all NIDDK awards, the duration of the recommended competitive segment for this grant has been administratively reduced.

Salary Cap

None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the current salary cap (Executive Level II). Therefore, this award and/or future

years are adjusted accordingly, if applicable. See the [Salary Cap Summary](#) for the current and historical record of the salary cap, including effective dates.

Consortium Involvement

This award includes funds awarded for consortium activity with the following:

Temple University in the amount of \$20,343 (\$12,835 direct costs + \$7,508 facilities and administrative costs).

Johns Hopkins University in the amount of \$50,171 (\$30,639 direct costs + \$19,532 facilities and administrative costs).

Consortiums are to be established and administered as described in the [NIH Grants Policy Statement](#).

Graduate Student Compensation

In accordance with the NIH Grants Policy Statement (NIH GPS) [Section 2.3.7.9 Graduate Student Compensation](#), total direct costs (salary, fringe benefits and tuition remission) for graduate students must not exceed the Ruth L. Kirschstein National Research Service Award (NRSA) zero-level stipend in effect at the time of the competing award. Support recommended for future years has been adjusted accordingly, if applicable. See the NIH GPS for full details and a link to the schedule for NRSA stipends.

Human Subjects Enrollment Reporting

The NIH is mandated by law (Public Health Service Act sec. 492B, 42 U.S.C. sec. 289a-2) to ensure the inclusion of women and minority groups in clinical research. The goal is to ensure that individuals are included in clinical research in a manner that is appropriate to the scientific question under study.

Investigators must report sex/gender, race, and ethnicity information using the Human Subjects System (HSS) module in the eRA Commons.

For more information see the NIH Guide Notice [NOT-OD-18-179](#)

Milestones

Future year support is contingent on satisfactory achievement of approved performance milestones. If approved milestones are not achieved fully, NIDDK may request development of a remedial plan and more frequent monitoring of progress or take other remedial actions.

Grantees can determine which progress reports are due through the website located at <https://public.era.nih.gov/chl/public/search/index.jsp> and should periodically check the site, which is updated on or around the 30th of each month. Progress report due dates are also available in the eRA Commons Status system. In addition, automatic e-mail notifications are sent to the PD/PI prior to due date.

As of October 17, 2014, the National Institutes of Health (NIH) requires grantees to submit all type 5 progress reports using the eRA Research Performance Progress Report (RPPR) module. Annual progress reports submitted in any format other than the RPPR will not be processed by the NIH and will require resubmission through the RPPR module in accordance with NIH Guide Notice [NOT-OD-15-014](#) released October 16, 2014.

SPREADSHEET SUMMARY**AWARD NUMBER:** 1R01DK132953-01 REVISED**INSTITUTION:** PENNSYLVANIA STATE UNIVERSITY

Budget	Year 1	Year 2	Year 3	Year 4
Salaries and Wages	\$234,614	\$232,097	\$238,259	\$204,860
Fringe Benefits	\$77,337	\$76,295	\$78,472	\$66,678
Personnel Costs (Subtotal)	\$311,951	\$308,392	\$316,731	\$271,538
Consultant Services	\$21,000	\$17,250	\$13,500	\$13,500
Travel	\$16,692	\$17,302	\$17,302	\$17,302
Other	\$47,730	\$2,080	\$2,080	\$1,500
Subawards/Consortium/Contractual Costs	\$90,377	\$90,377	\$82,928	\$82,928
Publication Costs		\$2,500	\$2,500	\$2,500
TOTAL FEDERAL DC	\$487,750	\$437,901	\$435,041	\$389,268
TOTAL FEDERAL F&A	\$269,175	\$220,434	\$216,533	\$190,770
TOTAL COST	\$756,925	\$658,335	\$651,574	\$580,038

Facilities and Administrative Costs	Year 1	Year 2	Year 3	Year 4
F&A Cost Rate 1	58.19%	58.19%	58.19%	58.19%
F&A Cost Base 1	\$462,579	\$378,818	\$372,113	\$327,840
F&A Costs 1	\$269,175	\$220,434	\$216,533	\$190,770

Exhibit 2



National Institutes of Health
NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND
KIDNEY DISEASES

FAIN# R01DK132953

Federal Award Date

08/18/2023

Recipient Information**1. Recipient Name**

THE PENNSYLVANIA STATE UNIVERSITY
201 OLD MAIN
UNIVERSITY PARK, PA 16802

2. Congressional District of Recipient

15

3. Payment System Identifier (ID)

1246000376A1

4. Employer Identification Number (EIN)

246000376

5. Data Universal Numbering System (DUNS)

003403953

6. Recipient's Unique Entity Identifier

NPM2J7MSCF61

7. Project Director or Principal Investigator

Jonathan Kyle Daw, PHD
Associate Professor
jud36@psu.edu
814-863-0096

8. Authorized Official

Ms. Barbara E Rigg

Federal Agency Information**9. Awarding Agency Contact Information**

Norma G DeGuzman
Senior Grants Management Specialist
NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
norma.deguzman@nih.gov
301-480-1810

10. Program Official Contact Information

JENNIFER MICHELLE Norton

NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
jenna.norton@nih.gov
301-451-7314

Federal Award Information**11. Award Number**

3R01DK132953-02S1

12. Unique Federal Award Identification Number (FAIN)

R01DK132953

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project Title

The Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney
Disease from Healthy Population to Mortality

15. Assistance Listing Number

93.847

16. Assistance Listing Program Title

Diabetes, Digestive, and Kidney Diseases Extramural Research

17. Award Action Type

Supplement

18. Is the Award R&D?

Yes

Summary Federal Award Financial Information**19. Budget Period Start Date 08/01/2023 – End Date 05/31/2024**

20. Total Amount of Federal Funds Obligated by this Action	\$119,808
20 a. Direct Cost Amount	\$74,740
20 b. Indirect Cost Amount	\$45,068

21. Authorized Carryover**22. Offset**

23. Total Amount of Federal Funds Obligated this budget period	\$119,808
---	-----------

24. Total Approved Cost Sharing or Matching, where applicable	\$0
--	-----

25. Total Federal and Non-Federal Approved this Budget Period	\$119,808
--	-----------

26. Project Period Start Date 08/01/2022 – End Date 05/31/2026

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$1,535,068
--	-------------

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Tommy Gunter

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

**RESEARCH**

Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

SECTION I – AWARD DATA – 3R01DK132953-02S1
Principal Investigator(s):

Jonathan Kyle Daw, PhD

Award e-mailed to: osp@psu.edu

Dear Authorized Official:

The National Institutes of Health hereby awards a grant in the amount of \$119,808 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to PENNSYLVANIA STATE UNIVERSITY in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Institute Of Diabetes And Digestive And Kidney Diseases of the National Institutes of Health under Award Number R01DK132953. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator's Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Tommy Gunter
Grants Management Officer
NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)

Salaries and Wages	\$48,865
Fringe Benefits	\$17,542
Personnel Costs (Subtotal)	\$66,407
Travel	\$8,333

Federal Direct Costs	\$74,740
Federal F&A Costs	\$45,068
Approved Budget	\$119,808
Total Amount of Federal Funds Authorized (Federal Share)	\$119,808
TOTAL FEDERAL AWARD AMOUNT	\$119,808

AMOUNT OF THIS ACTION (FEDERAL SHARE) **\$119,808**

SUMMARY TOTAL FEDERAL AWARD AMOUNT YEAR (2) (for this Document Number)	
AWARD NUMBER	TOTAL FEDERAL AWARD AMOUNT
3R01DK132953-02S1	\$119,808
5R01DK132953-02	\$658,335
TOTAL	\$778,143

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
2	\$119,808	\$778,143
3	\$144,270	\$795,844
4	\$24,462	\$604,500

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

Fiscal Information:

Payment System Identifier: 1246000376A1
Document Number: RDK132953A
PMS Account Type: P (Subaccount)
Fiscal Year: 2023

IC	CAN	2023	2024	2025
DK	8472280	\$119,808	\$144,270	\$24,462

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

NIH Administrative Data:

PCC: KJN KHE / **OC:** 41023 / **Released:** Gunter, Tommy 08/17/2023

Award Processed: 08/18/2023 12:38:00 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 3R01DK132953-02S1

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 3R01DK132953-02S1

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- c. 45 CFR Part 75.
- d. National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- f. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of “Research and Development” at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01DK132953. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

Recipients must administer the project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age, and comply with applicable conscience protections. The recipient will comply with applicable laws that prohibit discrimination on the basis of sex, which includes discrimination on the basis of gender identity, sexual orientation, and pregnancy. Compliance with these laws requires taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on an institution's specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment; see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>. For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm>.
- For guidance on administering programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income:

Additional Costs

SECTION IV – DK SPECIFIC AWARD CONDITIONS – 3R01DK132953-02S1

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

Supplement Funding

This award provides support for **Research Supplements to Promote Diversity in Health-Related Research** for Niki Von Lockette beginning August 1, 2023. These funds are restricted for the above purpose only and may not be transferred to any other individual. Funds awarded are available for carryover for awards given carryover authority as reflected

in Section III of this award notice. However, the funds remain restricted for the individual and the purpose for which the supplement is awarded.

In future years, a separate progress report for this supplement is required as part of the [Research Performance Progress Report \(RPPR\)](#) of the parent grant. In addition, unless this award is included under the Streamlined Non-Competing Award Process (SNAP), a detailed budget page must be submitted.

Should the **Diversity Investigator** not initiate or complete this experience, please inform the awarding office immediately.

SPREADSHEET SUMMARY

AWARD NUMBER: 3R01DK132953-02S1

INSTITUTION: PENNSYLVANIA STATE UNIVERSITY

Budget	Year 2	Year 3	Year 4
Salaries and Wages	\$48,865	\$58,868	\$10,002
Fringe Benefits	\$17,542	\$21,132	\$3,591
Personnel Costs (Subtotal)	\$66,407	\$80,000	\$13,593
Travel	\$8,333	\$10,000	\$1,667
TOTAL FEDERAL DC	\$74,740	\$90,000	\$15,260
TOTAL FEDERAL F&A	\$45,068	\$54,270	\$9,202
TOTAL COST	\$119,808	\$144,270	\$24,462

Facilities and Administrative Costs	Year 2	Year 3	Year 4
F&A Cost Rate 1	60.3%	60.3%	60.3%
F&A Cost Base 1	\$74,740	\$90,000	\$15,260
F&A Costs 1	\$45,068	\$54,270	\$9,202

Exhibit 3



Recipient Information

1. Recipient Name

THE PENNSYLVANIA STATE UNIVERSITY
201 OLD MAIN
UNIVERSITY PARK, PA 16802

2. Congressional District of Recipient

15

3. Payment System Identifier (ID)

1246000376A1

4. Employer Identification Number (EIN)

246000376

5. Data Universal Numbering System (DUNS)

003403953

6. Recipient's Unique Entity Identifier

NPM2J7MSCF61

7. Project Director or Principal Investigator

Jonathan Kyle Daw
Associate Professor
jud36@psu.edu
814-863-0096

8. Authorized Official

Ms. Barbara E Rigg

Federal Agency Information

9. Awarding Agency Contact Information

Lesley Whipp
Grants Specialist
NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
whipplic2@niddk.nih.gov
301-443-9360

10. Program Official Contact Information

JENNIFER MICHELLE Norton

NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
jenna.norton@nih.gov
301-451-7314

Federal Award Information

11. Award Number

3R01DK132953-03S1

12. Unique Federal Award Identification Number (FAIN)

R01DK132953

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project Title

The Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney
Disease from Healthy Population to Mortality

15. Assistance Listing Number

93.847

16. Assistance Listing Program Title

Diabetes, Digestive, and Kidney Diseases Extramural Research

17. Award Action Type

Supplement (REVISED)

18. Is the Award R&D?

Yes

Summary Federal Award Financial Information

19. Budget Period Start Date 06/01/2024 – End Date 04/29/2025

20. Total Amount of Federal Funds Obligated by this Action

\$0

20 a. Direct Cost Amount

\$0

20 b. Indirect Cost Amount

\$0

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

\$144,270

24. Total Approved Cost Sharing or Matching, where applicable

\$0

25. Total Federal and Non-Federal Approved this Budget Period

\$144,270

26. Project Period Start Date 08/01/2022 – End Date 04/29/2025

27. Total Amount of the Federal Award including Approved Cost

\$2,304,849

Sharing or Matching this Project Period

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Dee Doherty

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

**RESEARCH**

Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

SECTION I – AWARD DATA – 3R01DK132953-03S1 REVISED
Principal Investigator(s):

Jonathan Kyle Daw

Award e-mailed to: osp@psu.edu

Dear Authorized Official:

The National Institutes of Health hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to PENNSYLVANIA STATE UNIVERSITY in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Institute Of Diabetes And Digestive And Kidney Diseases of the National Institutes of Health under Award Number R01DK132953. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator's Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Dee Doherty
Grants Management Officer
NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)

Salaries and Wages	\$58,868
Fringe Benefits	\$21,132
Personnel Costs (Subtotal)	\$80,000
Travel	\$10,000

Federal Direct Costs	\$90,000
Federal F&A Costs	\$54,270
Approved Budget	\$144,270
Total Amount of Federal Funds Authorized (Federal Share)	\$144,270
TOTAL FEDERAL AWARD AMOUNT	\$144,270

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

SUMMARY TOTAL FEDERAL AWARD AMOUNT YEAR (3) (for this Document Number)	
AWARD NUMBER	TOTAL FEDERAL AWARD AMOUNT
3R01DK132953-03S1	\$144,270
5R01DK132953-03	\$625,511
TOTAL	\$769,781

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
3	\$144,270	\$769,781
4	\$0	\$580,038

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

Fiscal Information:

Payment System Identifier: 1246000376A1
Document Number: RDK132953A
PMS Account Type: P (Subaccount)
Fiscal Year: 2024

IC	CAN	2024
DK	8472280	\$144,270

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

NIH Administrative Data:

PCC: KJN KEPT / **OC:** 41023 / **Released:** 04/29/2025
Award Processed: 04/30/2025 12:04:36 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 3R01DK132953-03S1 REVISED

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 3R01DK132953-03S1 REVISED

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- The grant program legislation and program regulation cited in this Notice of Award.
- Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- 45 CFR Part 75.
- National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of "Research and Development" at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01DK132953. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

This award represents the final year of the competitive segment for this grant. See the NIH Grants Policy Statement Section 8.6 Closeout for complete closeout requirements at: <http://grants.nih.gov/grants/policy/policy.htm#gps>.

A final expenditure Federal Financial Report (FFR) (SF 425) must be submitted through the Payment Management System (PMS) within 120 days of the period of performance end date; see the NIH Grants Policy Statement Section 8.6.1 Financial Reports, <http://grants.nih.gov/grants/policy/policy.htm#gps>, for additional information on this submission requirement. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the real-time cash drawdown data in PMS. NIH will close the awards using the last recorded cash drawdown level in PMS for awards that do not require a final FFR on expenditures. It is important to note that for financial closeout, if a grantee fails to submit a required final expenditure FFR, NIH will close the grant using the last recorded cash drawdown level.

A Final Invention Statement and Certification form (HHS 568), (not applicable to training, construction, conference or cancer education grants) must be submitted within 120 days of the expiration date. The HHS 568 form may be downloaded at: <http://grants.nih.gov/grants/forms.htm>. This paragraph does not apply to Training grants, Fellowships, and certain other programs—i.e., activity codes C06, D42, D43, D71, DP7, G07, G08, G11, K12, K16, K30, P09, P40, P41, P51, R13, R25, R28, R30, R90, RL5, RL9, S10, S14, S15, U13, U14, U41, U42, U45, UC6, UC7, UR2, X01, X02.

Unless an application for competitive renewal is submitted, a Final Research Performance Progress Report (Final RPPR) must also be submitted within 120 days of the period of performance end date. If a competitive renewal application is submitted prior to that date, then an Interim RPPR must be submitted by that date as well. Instructions for preparing an Interim or Final RPPR are at: https://grants.nih.gov/grants/rppr/rppr_instruction_guide.pdf. Any other specific requirements set forth in

the terms and conditions of the award must also be addressed in the Interim or Final RPPR. *Note that data reported within Section I of the Interim and Final RPPR forms will be made public and should be written for a lay person audience.*

NIH requires electronic submission of the final invention statement through the Closeout feature in the Commons.

NOTE: If this is the final year of a competitive segment due to the transfer of the grant to another institution, then a Final RPPR is not required. However, a final expenditure FFR is required and must be submitted electronically as noted above. If not already submitted, the Final Invention Statement is required and should be sent directly to the assigned Grants Management Specialist.

Recipients must administer the project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age, and comply with applicable conscience protections. The recipient will comply with applicable laws that prohibit discrimination on the basis of sex, which includes discrimination on the basis of gender identity, sexual orientation, and pregnancy. Compliance with these laws requires taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on an institution's specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment; see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>. For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm>.
- For guidance on administering programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income: Additional Costs

SECTION IV – DK SPECIFIC AWARD CONDITIONS – 3R01DK132953-03S1 REVISED

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

REVISION 1: TERMINATE AWARD

It is the policy of NIH not to prioritize research programs related to DEI: Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs. Therefore, no additional funding will be awarded for this project, and all future years have been removed PENNSYLVANIA STATE UNIVERSITY, THE may request funds to support patient safety and orderly closeout of the project, and remaining funds will be deobligated. Funds used to support any other research activities will be disallowed and recovered. Please be advised that your organization, as part of the orderly closeout process will need to submit the necessary closeout documents (i.e., Final Research Performance Progress Report, Final Invention Statement, and the Final Federal Financial Report (FFR), as applicable) within 120 days of the end of this grant.

NIH is taking this enforcement action in accordance with 2 C.F.R. § 200.340 as implemented in NIH GPS Section 8.5.2. This revised award represents the final decision of the NIH. It shall be the final decision of the Department of Health and Human Services (HHS) unless within 30 days after receiving this decision you mail or email a written notice of appeal to Dr. Matthew Memoli. Please include a copy of this decision, your appeal justification, total amount in dispute, and any material or documentation that will support your position. Finally, the appeal must be signed by the institutional official authorized to sign award applications and must be dated no later than 30 days after the date of this notice.

Supplement Funding

This award provides support for **Research Supplements to Promote Diversity in Health-Related Research** for Niki Von Lockette beginning August 1, 2023. These funds are restricted for the above purpose only and may not be transferred to any other individual. Funds awarded are available for carryover for awards given carryover authority as reflected in Section III of this award notice. However, the funds remain restricted for the individual and the purpose for which the supplement is awarded.

In future years, a separate progress report for this supplement is required as part of the [Research Performance Progress Report \(RPPR\)](#) of the parent grant. In addition, unless this award is included under the Streamlined Non-Competing Award Process (SNAP), a detailed budget page must be submitted.

Should the **Diversity Investigator** not initiate or complete this experience, please inform the awarding office immediately.

SPREADSHEET SUMMARY

AWARD NUMBER: 3R01DK132953-03S1 REVISED

INSTITUTION: PENNSYLVANIA STATE UNIVERSITY

Budget	Year 3	Year 4
Salaries and Wages	\$58,868	
Fringe Benefits	\$21,132	
Personnel Costs (Subtotal)	\$80,000	
Travel	\$10,000	
TOTAL FEDERAL DC	\$90,000	
TOTAL FEDERAL F&A	\$54,270	
TOTAL COST	\$144,270	\$0

Facilities and Administrative Costs	Year 3	Year 4
F&A Cost Rate 1	60.3%	
F&A Cost Base 1	\$90,000	
F&A Costs 1	\$54,270	

Exhibit 4



Recipient Information

1. Recipient Name

THE PENNSYLVANIA STATE UNIVERSITY
201 OLD MAIN
UNIVERSITY PARK, PA 16802

2. Congressional District of Recipient

15

3. Payment System Identifier (ID)

1246000376A1

4. Employer Identification Number (EIN)

246000376

5. Data Universal Numbering System (DUNS)

003403953

6. Recipient's Unique Entity Identifier

NPM2J7MSCF61

7. Project Director or Principal Investigator

Jonathan Kyle Daw, PHD
Associate Professor
jud36@psu.edu
814-863-0096

8. Authorized Official

Ms. Barbara E Rigg

Federal Agency Information

9. Awarding Agency Contact Information

Lesley Whipp
Grants Specialist
NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
whipplic2@niddk.nih.gov
301-443-9360

10. Program Official Contact Information

JENNIFER MICHELLE Norton

NATIONAL INSTITUTE OF DIABETES AND
DIGESTIVE AND KIDNEY DISEASES
jenna.norton@nih.gov
301-451-7314

Federal Award Information

11. Award Number

5R01DK132953-03

12. Unique Federal Award Identification Number (FAIN)

R01DK132953

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project Title

The Impact of Structural Racism on Racial/Ethnic Disparities in End-Stage Kidney
Disease from Healthy Population to Mortality

15. Assistance Listing Number

93.847

16. Assistance Listing Program Title

Diabetes, Digestive, and Kidney Diseases Extramural Research

17. Award Action Type

Non-Competing Continuation (REVISED)

18. Is the Award R&D?

Yes

Summary Federal Award Financial Information

19. Budget Period Start Date 06/01/2024 – End Date 04/30/2025

20. Total Amount of Federal Funds Obligated by this Action

\$0

20 a. Direct Cost Amount

\$0

20 b. Indirect Cost Amount

\$0

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

\$625,511

24. Total Approved Cost Sharing or Matching, where applicable

\$0

25. Total Federal and Non-Federal Approved this Budget Period

\$625,511

26. Project Period Start Date 08/01/2022 – End Date 04/30/2025

27. Total Amount of the Federal Award including Approved Cost

\$2,304,849

Sharing or Matching this Project Period

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Dee Doherty

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

**RESEARCH**

Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

SECTION I – AWARD DATA – 5R01DK132953-03 REVISED
Principal Investigator(s):

Jonathan Kyle Daw, PhD

Award e-mailed to: osp@psu.edu

Dear Authorized Official:

The National Institutes of Health hereby revises this award (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to PENNSYLVANIA STATE UNIVERSITY in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the “Terms and Conditions,” is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as “Research reported in this publication was supported by the National Institute Of Diabetes And Digestive And Kidney Diseases of the National Institutes of Health under Award Number R01DK132953. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.” Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator’s Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Dee Doherty
Grants Management Officer
NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)

Salaries and Wages	\$228,729
Fringe Benefits	\$75,333
Personnel Costs (Subtotal)	\$304,062
Consultant Services	\$12,960
Travel	\$16,610
Other	\$1,997
Subawards/Consortium/Contractual Costs	\$79,611
Publication Costs	\$2,400
 Federal Direct Costs	 \$417,640
Federal F&A Costs	\$207,871
Approved Budget	\$625,511
Total Amount of Federal Funds Authorized (Federal Share)	\$625,511
TOTAL FEDERAL AWARD AMOUNT	\$625,511
 AMOUNT OF THIS ACTION (FEDERAL SHARE)	 \$0

SUMMARY TOTAL FEDERAL AWARD AMOUNT YEAR (3) (for this Document Number)	
AWARD NUMBER	TOTAL FEDERAL AWARD AMOUNT
5R01DK132953-03	\$625,511
3R01DK132953-03S1	\$144,270
TOTAL	\$769,781

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
3	\$625,511	\$769,781

Fiscal Information:

Payment System Identifier: 1246000376A1
Document Number: RDK132953A
PMS Account Type: P (Subaccount)
Fiscal Year: 2024

IC	CAN	2024
DK	8472279	\$625,511

NIH Administrative Data:

PCC: KJN KEPT / **OC:** 41025 / **Released:** 04/30/2025
Award Processed: 05/01/2025 12:04:53 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 5R01DK132953-03 REVISED

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 5R01DK132953-03 REVISED

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- c. 45 CFR Part 75.
- d. National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- f. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of "Research and Development" at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01DK132953. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

This award represents the final year of the competitive segment for this grant. See the NIH Grants Policy Statement Section 8.6 Closeout for complete closeout requirements at: <http://grants.nih.gov/grants/policy/policy.htm#gps>.

A final expenditure Federal Financial Report (FFR) (SF 425) must be submitted through the Payment Management System (PMS) within 120 days of the period of performance end date; see the NIH Grants Policy Statement Section 8.6.1 Financial Reports, <http://grants.nih.gov/grants/policy/policy.htm#gps>, for additional information on this submission requirement. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the real-time cash drawdown data in PMS. NIH will close the awards using the last recorded cash drawdown level in PMS for awards that do not require a final FFR on expenditures. It is important to note that for financial closeout, if a grantee fails to submit a required final expenditure FFR, NIH will close the grant using the last recorded cash drawdown level.

A Final Invention Statement and Certification form (HHS 568), (not applicable to training, construction, conference or cancer education grants) must be submitted within 120 days of the expiration date. The HHS 568 form may be downloaded at: <http://grants.nih.gov/grants/forms.htm>. This paragraph does not apply to Training grants, Fellowships, and certain other programs—i.e., activity codes C06, D42, D43, D71, DP7, G07, G08, G11, K12, K16, K30, P09, P40, P41, P51, R13, R25, R28, R30, R90, RL5, RL9, S10, S14, S15, U13, U14, U41, U42, U45, UC6, UC7, UR2, X01, X02.

Unless an application for competitive renewal is submitted, a Final Research Performance Progress Report (Final RPPR) must also be submitted within 120 days of the period of performance end date. If a competitive renewal application is submitted prior to that date, then an Interim RPPR must be submitted by that date as well. Instructions for preparing an Interim or Final RPPR are at: https://grants.nih.gov/grants/rppr/rppr_instruction_guide.pdf. Any other specific requirements set forth in

the terms and conditions of the award must also be addressed in the Interim or Final RPPR. *Note that data reported within Section I of the Interim and Final RPPR forms will be made public and should be written for a lay person audience.*

NIH requires electronic submission of the final invention statement through the Closeout feature in the Commons.

NOTE: If this is the final year of a competitive segment due to the transfer of the grant to another institution, then a Final RPPR is not required. However, a final expenditure FFR is required and must be submitted electronically as noted above. If not already submitted, the Final Invention Statement is required and should be sent directly to the assigned Grants Management Specialist.

Recipients must administer the project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age, and comply with applicable conscience protections. The recipient will comply with applicable laws that prohibit discrimination on the basis of sex, which includes discrimination on the basis of gender identity, sexual orientation, and pregnancy. Compliance with these laws requires taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on an institution's specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment; see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>. For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm>.
- For guidance on administering programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income:
Additional Costs

SECTION IV – DK SPECIFIC AWARD CONDITIONS – 5R01DK132953-03 REVISED

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

Award Termination:

It is the policy of NIH not to prioritize research programs related to DEI: Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.. Therefore, no additional funding will be awarded for this project, and all future years have been removed. The Pennsylvania State University may request funds to support patient safety and orderly closeout of the project, and remaining funds will be deobligated. Funds used to support any other research activities will be disallowed and recovered. Please be advised that your organization, as part of the orderly closeout process will need to submit the necessary closeout documents (i.e., Final Research Performance Progress Report, Final Invention Statement, and the Final Federal Financial Report (FFR), as applicable) within 120 days of the end of this grant.

NIH is taking this enforcement action in accordance with 2 C.F.R. § 200.340 as implemented in NIH GPS Section 8.5.2. This revised award represents the final decision of the NIH. It shall be the final decision of the Department of Health and Human Services (HHS) unless within 30 days after receiving this decision you mail or email a written notice of appeal to Dr. Matthew Memoli. Please include a copy of this decision, your appeal justification, total amount in dispute, and any material or documentation that will support your position. Finally, the appeal must be signed by the institutional official authorized to sign award applications and must be dated no later than 30 days after the date of this notice.

In accordance with [NOT-OD-24-109](#), and the availability of FY2024 appropriated funds, this award provides funding at the 96% committed level.

Other Support

NIDDK has received the updated other support information provided for all key personnel as identified by the applicant. Only other support information for the PD/PI(s) and any individual(s) named as key personnel on the Notice of Grant Award have been reviewed for overlap. It is the responsibility of the recipient to make sure no overlap of budget, effort, or aims exist for all personnel devoted to this grant.

Salary Cap

None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the current salary cap (Executive Level II). Therefore, this award and/or future years are adjusted accordingly, if applicable. See the [Salary Cap Summary](#) for the current and historical record of the salary cap, including effective dates.

Consortium Involvement

This award includes funds awarded for consortium activity with Temple University, Johns Hopkins University, Georgian Southern University, Florida State University and CRESTENSAE/GENES of France. Consortiums are to be established and administered as described in the [NIH Grants Policy Statement](#).

Human Subjects Enrollment Reporting

The NIH is mandated by law (Public Health Service Act sec. 492B, 42 U.S.C. sec. 289a-2) to ensure the inclusion of women and minority groups in clinical research. The goal is to ensure that individuals are included in clinical research in a manner that is appropriate to the scientific question under study.

Investigators must report sex/gender, race, and ethnicity information using the Human Subjects System (HSS) module in the eRA Commons.

For more information see the NIH Guide Notice [NOT-OD-18-179](#)

Milestones

Future year support is contingent on satisfactory achievement of approved performance milestones. If approved milestones are not achieved fully, NIDDK may request development of a remedial plan and more frequent monitoring of progress or take other remedial actions.

SPREADSHEET SUMMARY

AWARD NUMBER: 5R01DK132953-03 REVISED

INSTITUTION: PENNSYLVANIA STATE UNIVERSITY

Budget	Year 3
Salaries and Wages	\$228,729
Fringe Benefits	\$75,333
Personnel Costs (Subtotal)	\$304,062
Consultant Services	\$12,960
Travel	\$16,610
Other	\$1,997
Subawards/Consortium/Contractual Costs	\$79,611
Publication Costs	\$2,400
TOTAL FEDERAL DC	\$417,640
TOTAL FEDERAL F&A	\$207,871
TOTAL COST	\$625,511

Facilities and Administrative Costs	Year 3
F&A Cost Rate 1	58.19%
F&A Cost Base 1	\$357,228
F&A Costs 1	\$207,871