

NIH RPPR Summary Form (RSF)

The RSF is an internal form to be submitted to your BU Sponsored Programs (SP) Research Administrator (RA) when the ANNUAL NIH Progress Report (RPPR) has been finalized and routed to SP for final review and submission. Please note, RPPRs follow BU's standard proposal submission policy. Plan accordingly to meet sponsor deadlines.

SNAP? YES NO "Streamlined Noncompeting Award Procedures (SNAP) - The Notice of Award (NoA) Section III - Terms and Conditions will detail if the award is SNAP eligible. Awards generally eligible for SNAP provide for automatic carryover."

A. GENERAL PROJECT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Principal Investigator- First Name	Principal Investigator- Last Name	Department Name	Internal SAP Grant Number

Project Title

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sponsor Award Number	Sponsor Deadline	Start Date of Continuation Year	End Date of Continuation Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
Department Administrator Name	DA Phone Number	DA Email Address

YES NO

<input type="checkbox"/>	Are there outgoing subcontracts?* If yes, how many? <input type="text"/>
<input type="checkbox"/>	Will subcontracts be continuing into the next year?* If yes, please list the names of the sub sites below
<input type="checkbox"/>	If yes to above, will there be any changes to the subcontract (budget, scope of work) in the next year? Please include changes as an attachment
<input type="checkbox"/>	Is there a change in cost share in the next budget period? If yes, obtain additional necessary signatures in section D
<input type="checkbox"/>	Is the unspent balance >25% of the current year award? If yes, provide explanation in RPPR and enter unspent balance <input type="text"/>
<input type="checkbox"/>	If no to above, does the current BW Budget vs Actuals report show >25% unspent balance? If yes, provide justification below on how remaining budget in excess of 25% will be spent before the end of the budget period.
<input type="checkbox"/>	Has effort been reduced by 25% or more from previously reported? If yes, please provide justification below if this was due to rounding, and if this was previously approved by NIH

Any additional comments:

B. ASSURANCES

YES	NO	Assurances	Protocol Number(s)	Most Recent Approval Date for Each Protocol
<input type="checkbox"/>	<input type="checkbox"/>	IRB	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	IACUC	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	IBC (biohazards, rDNA, select agents)	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Radioisotopes	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Laser	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Human embryonic stem cells	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	SCUBA/Snorkeling/Boats	<input type="text"/>	<input type="text"/>

C. PRINCIPAL INVESTIGATOR: CERTIFICATIONS

PI Assurance: I certify that: (1) in conducting the proposed program, I am familiar with and will adhere to applicable [Boston University policies](#) including, but not limited to, human and animal research, conflict of interest, misconduct in research, and patents and technology transfer; (2) the information submitted within the report is true, complete, and accurate to the best of my (the PI's) knowledge; (3) any false, fictitious, or fraudulent statements or claims may subject me (as the PI) to criminal, civil, or administrative penalties; (4) I (as the PI) agree to accept responsibility for the administrative and scientific conduct of the project and to provide the required progress reports as a result of the application; and (5) I will abide, as applicable, by the [Federal clinical trials](#), the [NIH Grants Policy Statement](#) and [NIH Public Access](#) regulations.

YES	NO	NOT APPLICABLE	
			Subcontract Certification: I certify that I received all report documents from subrecipient as required in subaward agreement
			Data Management and Sharing Plan: Investigator certifies this project is compliant with the approved plan Data Repository being used is:

D. PRINCIPAL INVESTIGATOR: DISCLOSURES

NIH issued a notice on Reminders of NIH Policies on Other Support and of Policies related to Financial Conflicts of Interest and Foreign Components (July 10, 2019): [NOT-OD-19-114](#)

APPLICABLE AND DISCLOSED	NOT APPLICABLE	
		Section D1: Requires you to list who has worked on the project at least one-person month per year and identify if the individuals' primary affiliation is with a foreign organization.
		Section D2: Requires you to report if there are will be new/senior key personnel or if there has been a change in other support of senior/key personnel since the last reporting period.
		Section E4: Requires you to report the dollar amount from the budget that is being spent in foreign countries.
		Section G8: Requires you to report changes to the project/performance site(s) including any new sites where either human subjects or vertebrate animals will be involved.
		Section G9: Requires you to report on Foreign Components (note — Foreign Components require prior approval).
		Biosketch: Investigators should list the foreign affiliations (e.g., positions, honors) they hold in their Biosketches. NIH currently is recommending that any foreign affiliation be disclosed as "relevant" to the proposal.
		Other Support: Other support includes all financial resources, whether Federal, non-Federal, commercial, or institutional, available in direct support of an individual's research endeavors, including but not limited to research grants, cooperative agreements, contracts, and/or institutional awards. Training awards, prizes, or gifts are not included.
		Foreign Subcontractors: PI has been provided access to copies of foreign subcontractors' lab notebooks, data, and all documentation associated with the research described in the RPPR. (NOT-OD-23-182)

Foreign Component – requires prior approval:

Definition: The performance of any significant scientific element or segment of a project outside of the United States, either by the recipient or by a researcher employed by a foreign organization, whether or not grant funds are expended. Activities that would meet this definition include, but are not limited to, (1) the involvement of human subjects or animals, (2) extensive foreign travel by recipient project staff for the purpose of data collection, surveying, sampling, and similar activities, or (3) any activity of the recipient that may have an impact on U.S. foreign policy through involvement in the affairs or environment of a foreign country. Examples of other grant-related activities that may be significant are:

- collaborations with investigators at a foreign site anticipated to result in co-authorship;
- use of facilities or instrumentation at a foreign site; or
- receipt of financial support or resources from a foreign entity.

Foreign travel for consultation is not considered a foreign component. (See [Grants to Foreign Organizations, International Organizations, and Domestic Grants with Foreign Components](#) in the NIH Grants Policy Statement.

For more information, review the following guidance: [Disclosure Requirements for Foreign Components on Grants](#)

Effective January 1, 2024, NIH updated its grant policy guidance for foreign subaward agreements ([NOT-OD-23-182](#)). Foreign subrecipients must provide access to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report, to the primary recipient (Boston University) with a frequency of no less than once per year, in alignment with the timing requirements for Research Performance Progress Report (RPPR) submission. Such access may be entirely electronic.

E. REQUIRED SIGNATURES

PI Signature

Date

Department Administrator Signature

Date

*** ADDITIONAL SIGNATURES IF CHANGES IN COST SHARE**

Department Chair Signature

Date

Dean Signature

Date