New York State Department of Health and the Empire State Stem Cell Board

Request for Applications

Shared Facilities/Resources and Equipment/Instrumentation for Stem Cell Research

RELEASE DATE: May 8, 2008

LETTER OF INTENT DUE (Mandatory): May 28, 2008 by 1:00 PM

QUESTIONS DUE: May 28, 2008

QUESTIONS, ANSWERS AND UPDATES POSTED: June 6, 2008

APPLICATIONS DUE: June 30, 2008 by 1:00 PM

ESTIMATED CONTRACT START DATE: January 1, 2009

DOH CONTACT NAME AND ADDRESS:
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New York State Department of Health
Wadsworth Center
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PO Box 509, Albany NY  12201-0509

This RFA, questions and answers, as well as any updates and modifications, may be downloaded at http://www.nyhealth.gov/funding/ and at http://stemcell.ny.gov/
Empire State Stem Cell Board

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I. Introduction

A. Background

Stem cell research is emerging as a promising field of scientific inquiry. New discoveries are encouraging leading scientists to investigate the potential of cell-based therapies to treat life threatening disease.

In April 2007, legislation was enacted creating the Empire State Stem Cell Board (ESSCB) and authorizing the investment of six hundred million dollars in state funding over the next eleven years. The Empire State Stem Cell Board is authorized to provide grants to basic, applied, translational and other research designed to advance scientific discoveries in fields related to stem cell biology. New York State investigators will be invited to compete in this newly created state supported research program. All grants will be financed by the Empire State Stem Cell Trust Fund.

The New York State Department of Health’s NYSTEM is the program charged with administering stem cell research funding based on recommendations and advice from the Empire State Stem Cell Board. In conjunction with NYSTEM, the ESSCB solicits, reviews, and makes funding recommendations for creative and innovative biomedical research projects to be supported by the Fund. Information about the ESSCB and NYSTEM can be found at http://stemcell.ny.gov

B. Purpose of the Funds

The ESSCB desires to provide funding to support the establishment and operation of multi-institutional core facilities and specialized equipment to maximize the expertise, efficiency, and quality of stem cell research in New York State. To facilitate this goal, the ESSCB has authorized this Request for Applications (RFA), which will provide funding mechanisms for: (1) purchasing research instrumentation; and (2) establishing and operating specialized resources and facilities. Facilities and equipment supported by funds awarded through this RFA must be operated on a shared-use basis and be physically located in New York State.

Awards for the development and operation of facilities funded through this RFA must support facilities designed to operate as: (a) specialized laboratories for: isolation, derivation, characterization, maintenance, and distribution of human embryonic (pluripotent) stem cells and their derivatives; or facilities that will be used to accelerate our understanding of the mechanisms required for reprogramming differentiated cells; or (b) high throughput facilities to screen for promising therapeutic (“lead”) compounds, toxicity, and development of therapeutics.

C. Available Funds

Awards made as a result of this RFA will be funded by the Empire State Stem Cell Fund. The number of awards and total funds awarded per application will be contingent upon the size and scope of the projects proposed. Approximately $31.5 million is available to support these awards.

On May 8, 2008, the Department issued four RFAs seeking to advance stem cell research in New York State. The table below shows the expected allocation of available funds among
these four RFAs. In determining final awards, the Department reserves the right to reallocate funds between these RFAs as it deems appropriate.

<table>
<thead>
<tr>
<th>RFA #</th>
<th>RFA Title</th>
<th>$ Allocated</th>
</tr>
</thead>
<tbody>
<tr>
<td>0802071100</td>
<td>Planning Grants for Emerging Opportunities and Consortia Development for Stem Cell Research</td>
<td>$3 million</td>
</tr>
<tr>
<td>0802150850</td>
<td>Shared Facilities/Resources and Equipment/Instrumentation for Stem Cell Research</td>
<td>$31.5 million</td>
</tr>
<tr>
<td>0804180400</td>
<td>Investigator Initiated Research Projects and Innovative, Developmental or Exploratory Activities (IDEA) Awards for Stem Cell Research</td>
<td>$53.4 million</td>
</tr>
<tr>
<td>0804221050</td>
<td>Targeted RFA for Investigation of iPS and Other Derivation Approaches</td>
<td>$21 million</td>
</tr>
</tbody>
</table>

Institutions are invited to submit a single application for one of the following funding mechanisms:

1. **Shared Equipment/Instrumentation**
   The intent of the Shared Equipment/Instrumentation grant mechanism is to provide funds to support the purchase of **up to two pieces** of shared equipment.
   - Contract term will be one year.
   - Minimum cost for equipment is $50,000 per instrument.
   - Direct costs are capped at $750,000. *Facilities and Administrative costs (indirect costs) will not be funded under this award mechanism.*

2. **Development/Operation of Shared Facilities/Resources**
   The intent of this grant mechanism is to support the development, repair or renovation of an existing facility, outfit of shell space, equipment purchases specifically related to the development of a shared facility/resource, and/or the daily operations of such shared facility/resource.
   - Contract term will be up to four years.
   - Total direct costs of the four year award for Development and/or Operation of Shared Facilities/Resources is capped at $5 million.
   - Facilities and Administrative costs (indirect costs) are capped at a maximum of 20% of modified total direct costs (see Section II.B. Use of Funds).

Applicant institutions should note that if more than one application is submitted by the institution in response to this RFA, the application requesting the lowest cost will be reviewed. If more than two pieces of equipment are requested under the Shared Equipment/Instrumentation mechanism, the application will not be reviewed.
II. Who May Apply?

The applicant must be a New York State not-for-profit organization or a governmental organization within New York State. The applicant must also be one of the following: an academic institution; a research organization; a medical center; or an entity with demonstrated capability to conduct grant funded research. Organizations awarded funds must have the ability to monitor funds, maintain individual accounts and fulfill other fiscal management criteria. The Principal Investigator (PI) for the proposal must be employed by the applicant institution and have the skills, knowledge, and resources necessary to carry out the proposed Work Plan.

III. Project Narrative/Work Plan Outcomes

A. General Expectations

The application should demonstrate a clear need for stem cell research equipment or the overall development and operation of specialized stem cell laboratories or high throughput facilities. The equipment or facilities proposed should be located in a robust scientific environment and be available to multiple investigators from one or more institutions. It is expected that the application Work Plan will demonstrate the effective use and leveraging of funds awarded to maximize the benefit received from the proposed equipment or facilities.

An internal advisory committee, pre-existing or new, must be named to assist the PI in administration and oversight of the shared facilities/resources and equipment/instrumentation. This committee shall be broadly based and include members without conflict of interest who can resolve disputes if they arise. The PI and the advisory committee are responsible for the development of guidelines for:

1. Maximum utilization and time allocation;

2. A detailed plan for daily management and safe operation, including staffing, operational procedures, training requirements, commissioning and certification of instrument operations, and other necessary items;

3. A plan to ensure that project approvals are obtained from the appropriate human subjects, animal welfare, biosafety and Embryonic Stem Cell Research Oversight (ESCRO) committees;

4. A financial plan for long-term operation and maintenance during the post-award period, including the designation of reasonable, standardized use charges; and

5. Relocation of instrumentation to a not-for-profit or public research institution within New York State, upon approval of NYSTEM, if the major user group is altered.

For either funding mechanism (equipment or facilities), a major user group of three or more investigators must be identified. The major users must be principal investigators on funded peer reviewed stem cell research grants at the time of application, award, and estimated contract start date. While the user community is not restricted to NYSTEM awardees or New York State investigators, priority for use should be given to NYSTEM supported and other New York State scientists. At least 50% of the usage for the shared instrument or facility must be from stem cell related projects.
NYSTEM makes resources available at [http://stemcell.ny.gov/publications.html](http://stemcell.ny.gov/publications.html) that may provide useful information to applicants in identifying potential partners and/or users of the equipment, facilities and resources. To promote effectiveness and encourage optimal sharing among individual investigators, research groups, departments and institutions, and to foster a collaborative multidisciplinary research environment, instrumentation should be integrated into a centralized or “core” facility whenever possible.

**B. Use of Funds**

Funds may be used, as appropriate to the funding mechanism, to support salaries, fringe benefits, stipends, supplies, equipment, subcontractors and consultants, travel, registration fees, publication costs, animal care, human subjects and related research costs. All equipment, resources and facilities supported by funds awarded through this RFA must be located within New York State. Funds shall not be used for the construction (bricks and mortar) of new facilities but may be used to purchase and/or outfit a modular laboratory.

By law, funds must not be used to support any activities related to human reproductive cloning.

For Development and Operation of Shared Facilities/Resources awards, the maximum rate to be paid for indirect cost in any year is twenty percent (20%) of the modified total direct costs (indirect costs are calculated as 20% of the total direct costs less equipment costs).

For Shared Equipment/Instrumentation awards, no indirect costs will be reimbursed. Operational costs, installation costs, and renovations necessary to install and/or use the equipment will not be supported under this award mechanism.

Institutional matching funds are not required for this RFA. However, the applicant institution should demonstrate an appropriate level of institutional support to ensure the associated infrastructure to support the continued operation of the equipment or facility will be made available throughout the contract period and continue thereafter.

**C. Reporting Obligations**

The contractor will be required to submit financial reports and progress reports in accordance with the forms and formats provided by NYSTEM. Submission of detailed quarterly financial reports will be required. Additionally, the contractor will be required to submit written semi-annual progress reports that substantiate progress corresponding to the tasks and milestones outlined in the Work Plan. All progress reports will require approval by NYSTEM staff prior to payment of the corresponding quarterly vouchers. The contractor will also be required to follow all reporting obligations outlined in Appendix A-2 and Appendix C of the executed contract. A sample of these contract appendices can be found in Attachment 5 of this RFA.

Contractors will be required to participate in and cooperate with evaluation activities sponsored or conducted by NYSTEM. This will include:
- at least one NYSTEM conducted monitoring site visit over the course of the contract period; and
- travel to and participation in at least one NYSTEM-sponsored meeting or symposium during the contract period.
The contractor must submit separate requests for budget modifications, personnel changes, requests for carry-forward of funds, and for equipment purchases over $5,000 that were not detailed in the application and its appendix.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

All substantive questions must be submitted in writing to the NYSTEM program administrators via e-mail at nystemgrants@wadsworth.org or fax at (518) 486-2191. To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Substantive questions will be accepted through the date listed on the cover of this RFA.

Questions of a technical nature can be addressed in writing or via telephone by calling Michael Heeran, Health Program Administrator 2, Extramural Grants Administration, Wadsworth Center, at (518) 474-7002. Questions are of a technical nature if they are limited to how to prepare the application (e.g., formatting) rather than relating to the substance of the application.

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the Department of Health’s public website at http://www.nyhealth.gov/funding/. Questions and answers, as well as any updates and/or modifications, will also be posted on the Department of Health’s website. All such updates are expected to be posted by the date identified on the cover sheet of this RFA.

C. Letter of Intent

The prospective applicant institution is required to submit a Letter of Intent using the format provided in this RFA (Attachment 4). Letters of Intent will be used for the purpose of developing the highest quality review panel in a timely manner. Letters of Intent infer no obligation upon the institution to submit an application in response to this RFA. However, applications that are not preceded by a Letter of Intent WILL NOT be reviewed. The Letter of Intent must be received by the date and time indicated on the cover sheet to this RFA and must be mailed to the address listed below in Section IV.E. If the designated PI named on the Letter of Intent is changed before the application submission, NYSTEM must be notified of this change prior to or at the time of application submission.

Letters of Intent must be signed by the PI and applicant institution. Letters of Intent that do not have both signatures will be disqualified and not receive an application number from NYSTEM that is required for application submission.
D. Applicant Conference

An applicant conference will not be held for this RFA.

E. How to File an Application

Applications must be received by mail at the following address by the date and time posted on the cover sheet of this RFA. Late applications will not be accepted*. It is the applicant’s responsibility to see that applications are delivered to Room D350 prior to the date and time specified. Applications for which a Letter of Intent was not received by the specified due date and time will not be accepted.

Regular Mail Services:
New York State Department of Health
Wadsworth Center, Room D350
Extramural Grants Administration
Empire State Plaza
PO Box 509
Albany, NY 12201-0509

Express Mail Services:
New York State Department of Health
Wadsworth Center, Room D350
Extramural Grants Administration
Empire State Plaza
Dock J – P1 Level
Albany, NY 12201-0509

*Late applications due to a documentable delay by the carrier may be considered at the Department of Health's discretion.

For detailed content requirements, see Section V, Completing the Application. Application packages should be clearly labeled with the application number assigned by NYSTEM staff as well as the name and number of the RFA listed on the cover of this RFA document. Applications WILL NOT be accepted via fax or e-mail.

F. The Department Of Health Reserves The Right To:

1. Reject any or all applications received in response to this RFA.

2. Award more than one contract resulting from this RFA.

3. Waive or modify minor irregularities in applications received after prior notification to the applicant.

4. Adjust or correct cost figures with the concurrence of the applicant if errors exist and can be documented to the satisfaction of DOH and the State Comptroller.

5. Negotiate with applicants responding to this RFA within the requirements to serve the best interests of the State.
6. Eliminate mandatory requirements unmet by all applicants.

7. If the Department of Health is unsuccessful in negotiating a contract with the selected applicant within an acceptable time frame, the Department of Health may begin contract negotiations with the next qualified applicant(s) in order to serve and realize the best interests of the State.

8. The Department of Health reserves the right to award grants based on geographic or regional considerations to serve the best interests of the State.

G. Term of Contract

Any contract resulting from this RFA will be effective only upon approval by the New York State Office of the State Comptroller.

It is expected that contracts resulting from this RFA will begin on January 1, 2009 and have the following time periods:

- Shared Equipment/Instrumentation – 1 year
- Development/Operation of Shared Facilities/Resources – up to 4 years

H. Payment & Reporting Requirements

1. The State (NYS Department of Health) may, at its discretion based on appropriate justification from the contractor, make an advance payment to a not-for-profit grant contractor in an amount not to exceed 25 percent.

2. The grant contractor shall submit quarterly invoices and required reports of expenditures to the State's designated payment office:

   New York State Department of Health
   Wadsworth Center
   Extramural Grants Administration
   Empire State Plaza, Room D350
   PO Box 509
   Albany, NY 12201-0509

   Payment of such invoices by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be:
   - The Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Work Plan.
   - All vouchers submitted by the contractor pursuant to this agreement shall be submitted to the State no later than 30 days after the end of the quarter for which reimbursement is being claimed.
   - The final voucher will not be paid until after acceptance of the final progress report.
• In no event shall the amount received by the contractor exceed the amount approved by the State.

3. The grant contractor shall submit the following progress reports:

• Semi-annual progress reports in accordance with the forms and formats provided by NYSTEM as outlined in Section III.C. Reporting Obligations, above – no later than 30 days after the end of each six month reporting period.

• A final cumulative progress report in accordance with the forms and formats provided by NYSTEM – no later than 60 days after the end of the contract term.

All payment and reporting requirements will be detailed in Appendix C of the final grant contract.

I. Vendor Responsibility Questionnaire

New York State Procurement Law requires that state agencies award contracts only to responsible vendors. Vendors are invited to file the required Vendor Responsibility Questionnaire online via the New York State VendRep System or may choose to complete and submit a paper questionnaire. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at www.osc.state.ny.us/vendrep or go directly to the VendRep system online at https://portal.osc.state.ny.us. For direct VendRep System user assistance, the OSC Help Desk may be reached at 866-370-4672 or 518-408-4672 or by email at helpdesk@osc.state.ny.us. Vendors opting to file a paper questionnaire can obtain the appropriate questionnaire from the VendRep website www.osc.state.ny.us/vendrep or may contact the Department of Health or the Office of the State Comptroller for a copy of the paper form. Applicants must complete and submit the Vendor Responsibility Attestation (Attachment 3) and corresponding Vendor Responsibility Questionnaire (if not exempt) prior to contract award.

J. General Specifications

1. By signing the "Application Form" each applicant attests to its express authority to sign on behalf of the applicant.

2. Contractor will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.

3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter attached to the application.

4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its
employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.

5. Provisions Upon Default

a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.

b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.

c. If, in the judgment of the Department of Health, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgment of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

K. Appendices

The following will be incorporated as appendices into any contract(s) resulting from this Request for Application.

APPENDIX A - Standard Clauses for All New York State Contracts

APPENDIX A-1 - Agency Specific Clauses

APPENDIX A-2 - Program Specific Clauses

APPENDIX B - Budget

APPENDIX C - Payment and Reporting Schedule

APPENDIX D - Work Plan

APPENDIX E - Unless the CONTRACTOR is a political sub-division of New York State, the CONTRACTOR shall provide proof, completed by the CONTRACTOR's insurance carrier and/or the Workers' Compensation Board, of coverage for:

Workers' Compensation, for which one of the following is incorporated into this contract as Appendix E-1:
• **WC/DB-100**, Affidavit For New York Entities With No Employees And Certain Out Of State Entities, That New York State Workers’ Compensation And/Or Disabilities Benefits Insurance Coverage is Not Required; OR

• **C-105.2** -- Certificate of Workers' Compensation Insurance. PLEASE NOTE: The State Insurance Fund provides its own version of this form, the U-26.3; OR

• **SI-12** -- Certificate of Workers’ Compensation Self-Insurance, OR

**GSI-105.2** -- Certificate of Participation in Workers' Compensation Group Self-Insurance

Disability Benefits coverage, for which one of the following is incorporated into this contract as **Appendix E-2**: 

• **WC/DB-100**, Affidavit For New York Entities With No Employees And Certain Out Of State Entities, That New York State Workers’ Compensation And/Or Disabilities Benefits Insurance Coverage is Not Required; OR

• **DB-120.1** -- Certificate of Disability Benefits Insurance OR

• **DB-155** -- Certificate of Disability Benefits Self-Insurance

**NOTE:** Do not include the Workers’ Compensation and Disability Benefits forms with your application. These documents will be requested as a part of the contracting process should you receive an award.

V. Completing the Application

A. Application Content

Applications must be submitted in hard copy and electronic formats as described in this section. Applications will ONLY be accepted in the formats detailed in this section. Applications sent in other formats or by fax or e-mail will NOT be accepted.

Electronic files must be submitted on a CD-ROM. The CD-ROM should be clearly labeled with the applicant’s name and application number. The CD-ROM must contain:

- Forms 2-12 in a Microsoft Word document (.doc) file
- A signed Form 1 (Face Page) in a Portable Document Format (.pdf) file
- Appendices in a .pdf file.

Applicants are advised to seek appropriate technical support from their institutions in the creation of the electronic files for submission. Some materials, such as letters of support and publication reprints may require scanning and insertion into the file. Discretion should be exercised in the resolution for scanning such materials and figures for inclusion in the application. Excess resolution will increase the size of the file without any appreciable
increase in viewing quality when viewed on a computer screen or printed. Applicants should also be aware that while color figures may be included, applications are printed in black and white, and will not be reproduced in color. Applicants may wish to annotate the figure legend directing the reader to the electronic file if color is an important aspect of the figure. Under no circumstances should electronic files contain any password protection whatsoever.

A single paper copy of the entire contents of the CD-ROM must be included in the submission. The paper copy will only be used only if physical damage to the CD-ROM occurs during shipping. Applicants are strongly encouraged to review their electronic files prior to submission. It is the applicant’s responsibility to ensure that all materials to be included in the application have been properly prepared. **Failure to provide the entire application package (CD-ROM and signed paper copy as described above) will result in disqualification of the application.**

The application content should be consistent with the details provided in this Section V. and must use the corresponding forms and formats (see Attachment 1 – Forms 1-12). Each content section described below should be provided in the application. Any form or section that is not applicable should be noted on the form. In addition to instructions below, supplemental instructions may be provided on the forms themselves. **APPLICATIONS THAT DEVIATE FROM THE INSTRUCTIONS BELOW OR THOSE FOUND ON THE FORMS THEMSELVES WILL BE PENALIZED 0.2 POINTS.**

**Face Page – Form 1**

*Project Title.* The title should describe the focus or purpose of the proposed project.

*Application Type.* Check off the appropriate box for the application funding mechanism.

*NYSSTEM Application #.* Enter the NYSSTEM application # provided to your organization in response to the Letter of Intent filed for this RFA.

*Principal Investigator.* Provide the information requested. The PI is the New York State investigator employed by the applicant institution responsible for planning, coordinating and implementing the Work Plan if an award is made. The PI will act as liaison between the grantee institution and NYSTEM, and be required to fulfill technical reporting requirements and submit any revised budgets co-signed by an authorized organizational representative.

*Co-Principal Investigator.* Provide the information requested. If the institutional affiliation of the Co-PI is different from that of the PI, complete a Face Page for each Co-PI. This form must be signed by the subcontracting institution’s authorized agent.

*Type of Organization.* Check off appropriate box(es).

*Federal Employer Identification Number.* Enter the applicant organization’s nine-digit Internal Revenue Service employer identification number.

*DUNS number.* Enter applicant organization’s Dun and Bradstreet number, if any.

*Charities’ Identification Number.* In the space provided, enter the charities’ identification number or, if exempt, indicate the exemption category. For information on identification
numbers, contact the Department of State, Office of Charities Registration, 162 Washington Avenue, Albany, NY 12231, (518) 474-3720. Additional information and descriptions of exemption categories may be found at: http://nysosc3.osc.state.ny.us/agencies/gbull/g-79.htm.

Facilities and Administrative Costs. For Shared Facilities / Resources, provide the information requested to document that the F&A rate does not exceed that which would be recovered applying the applicant organizations’ negotiated Facilities and Administrative (F&A) rate. If applicable, a copy of the United States Department of Health and Human Services (DHHS) agreement should be included as an application appendix.

Project Duration. Record the anticipated project duration of:
   - January 1, 2009 through December 31, 2009 for Shared Equipment / Instrumentation
   - January 1, 2009 through December 31, 2012 for Shared Facilities / Resources

Year One Grand Total Costs. Enter Year One Grand Total Costs from Form 5, Line 14. All equipment must be purchased and renovations completed in the first year of the award.

Grand Total Costs. Enter the Grand Total Costs from Form 5, Line 14.

New York State Applicant Organization. Enter the legal name and address of the applicant organization.

Performing Sites. List all sites (organization and location) where the work described will be performed. All locations must be in New York State.

Contracts and Grants Official. Provide the information requested. This individual will be notified in the event of an award.

Official Signing for Applicant Organization. Provide the name and contact information for the individual authorized to act for the applicant organization. This individual will be responsible for administration and fiscal management of the contract should an award be made. Note: This individual typically is not the Principal Investigator.

Address Where Reimbursement is to be Sent. Many institutions request that payment be sent to locations other than the official mailing address. Provide appropriate information or indicate “N/A.”

Principal Investigator/Co-Principal Investigator Certification and Assurance. Sign and date the form. Failure to do so will prevent the application from being processed.

Organization Certification and Acceptance. Sign and date the form. Failure to do so will prevent the application from being processed. Applications that include sub-contractual arrangements must insert additional Face Pages signed by the lead co-investigator and official signing for the subcontracting organization certifying their compliance with all applicable assurances and certifications referenced in this RFA.
Table of Contents – Form 2
Complete the table of contents, entering page numbers as appropriate or entering “N/A” when not applicable. Information submitted to NYSTEM is subject to the Freedom of Information Law (FOIL) (New York State Public Officers' Law, Article 6, Sections 84 to 90).

To the extent permitted by law, an application will not be disclosed, except for purposes of evaluation, prior to approval by the Comptroller of the resulting contract. All material submitted becomes the property of the Department and may be returned at the Department's discretion. Submitted applications may be reviewed and evaluated by any person, other than one associated with a competing applicant, designated by the Department. Any information supplied by an applicant, which is believed to be exempt from disclosure under FOIL, must be clearly marked and identified as such upon submission by the applicant. Marking the information as “confidential” or “proprietary” on its face or in the document header or footer shall not be sufficient without specific explanation of the basis for the claim of exemption from disclosure. Acceptance of the claimed materials by the Department does not constitute a determination on the exemption request. A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL in accordance with statutory procedure.

Lay Abstract – Form 3
Provide the information requested on the form. The abstract should be written so that the general public can easily understand the goals of the application. Do not include confidential information in the lay abstract. Information presented on this form will be condensed and used for public dissemination.

Program Responsiveness – Form 4
The information requested on this form is essential for both merit and programmatic review. The response should clearly describe how this application contributes to the achievement of the ESSCB’s goals and serve the best interests of New York State.

Budget – Form 5
Report the amount requested for each category, subtotal and total for each year or portion thereof. For any sub-contractual costs, provide additional copies of the form for each subcontract. For equipment/instrumentation purchases, only direct cost for the purchase may be budgeted and for Year One only.

Allowable Expenses
1. Personal Service

Support may be requested for staff expenses.

Salary and stipends should be consistent with institutional policies and proportionate to their percent of expended effort. Fringe benefits may be requested in accordance with institutional guidelines for each position, provided such benefits are applied consistently by the applicant organization as a direct cost to all sponsors.
2. Other Than Personal Service

Support may be requested, as appropriate to the funding mechanism, for:
- Supplies
- Equipment
- Travel
- Consultant costs
- Other Expenses, including but not limited to, core facility usage fees, publication costs, and communications
- Subcontracts.

Requests for purchase of equipment may be granted if strongly justified as essential to the proposed project; a current price quote should be included in the application appendix. During the course of the contract term, prior approval will be required for all equipment purchases over $5,000 that were not detailed in the application and its appendix.

Patient care and tuition reimbursement costs are not allowable expenses.

3. Facilities and Administrative Costs

F&A support is limited to the percent specified in the RFA. If an award is made, F&A costs will be re-calculated from recommended and approved budget amounts. F&A costs will be calculated as the lower of the RFA-specified percentage of total modified direct costs or the amount recovered using the institution’s current DHHS F&A rate. If applicable, a copy of the DHHS F&A rate statement should be included in the application appendix. In the absence of a DHHS agreement, an equivalently documented rate for the organization may be used. Subcontractor F&A costs are likewise limited, and should be included in the primary applicant’s direct costs.

Personal Effort and Budget Justification – Form 6

Applicants should request funds appropriate for cost-effective support of the proposed goal. Funds awarded by this program may not be used to supplant other existing support for the same work.

Provide the information requested for key personnel and technical staff at the applicant organization, regardless whether financial support is requested. Insert additional lines as necessary. The ‘Total Salary + Fringe Requested’ amount should equal Line 3, Year One, from Form 5.

Starting with personnel, justify amounts requested in each budget category. Regardless of whether financial support is requested, describe briefly the roles and expected contributions to the project of all key personnel and technical staff.

Provide a detailed justification for each ‘Other Than Personal Service’ (e.g., supplies, equipment, travel, consultant costs and other expenses). In the justification for equipment, describe the necessity for equipment requested, noting the impact on the project if the request is not approved; provide alternative approaches to completing the work proposed without the equipment purchase.
Biographical Sketch – Form 7
Provide two-page NIH-style biographical sketches for all key personnel listed on each Form 6, including collaborators and consultants. Start with the PI followed by Co-PI(s), and then include remaining key personnel in alphabetical order.

Facilities and Resources – Form 8  For Equipment Purchases Only
Applications should describe the facilities available for performance of the proposed project, starting with the applicant institution and followed by collaborating or subcontracting institutions. Also indicate the institutional commitment, including any additional facilities or equipment to be used in support of the project or available for use at no cost to the proposed project.

Other Support – Form 9
Provide the information requested for the PI and all other key personnel, on all existing and pending research support. Applications submitted to NYSTEM should not duplicate other funded research projects. The PI and the contracting organization are responsible for notifying Extramural Grants Administration staff of any changes in funding overlap information.

Work Plan – Form 10
The Work Plan should present information in sufficient detail to convey clearly and concisely to reviewers that:

- The application’s basis is conceptually well-founded and substantiated by the literature;
- The proposed approach is the most appropriate strategy to use as evidenced, in part, by consideration of alternatives;
- The available resources enhance the likelihood of the project’s success; and
- Successful completion of the project will advance ESSCB’s mission.

Include timeframes for accomplishing related tasks and meeting established milestones.

A. SPECIFIC AIMS
List the objectives and aims of this project and relate them to the short- and long-term goals of the stem cell research community and the assembled users.

B. JUSTIFICATION OF NEED/SIGNIFICANCE
Describe the need for the facility/resource or equipment/instrumentation to the overall stem cell research program at the institution and/or among the collaborators. Give relevant background information and describe its relationship to existing facilities and plans. Describe the significance of the proposed facility/resource or equipment/instrumentation to the users and stem cell research projects that will benefit.

C. RESEARCH PROJECTS
Each application should provide a brief description of the major users’ projects. The project descriptions should be concise, informative and succinct, and focus on the
benefit to the research objectives of each user. Sufficient technical detail should be
included to evaluate the appropriateness, relatedness, effectiveness, or advantage to
the research projects described. Need for special features and accessories should
be justified. NOTE: Applicants proposing use of human embryonic (pluripotent) stem
cells should clearly indicate the specific cell line to be used, as well as its source.

D. FACILITIES/RESOURCES AND EQUIPMENT/INSTRUMENTATION
For Shared Equipment/Instrumentation and for Development of Shared Facilities/
Resources:
Line drawings should be provided to represent floor plans drawn to scale. If
applicable, submit both existing and proposed drawings. Drawings should indicate
size dimensions, function, and net and gross square feet of space for each room.
The total net and gross square feet of space should also be given. The plan should
indicate the location of the proposed facility/resource or equipment/instrumentation in
the building. Where renovations are required, changes to mechanical and electrical
systems should be clearly described. Indicate the types of finishes to be applied to
room surfaces. Detailed cost estimates should be included. Provide vendor quotes
where available.

Describe the instrument(s) requested including manufacturer and model number.
The model chosen should be justified by comparison to other instruments where
appropriate. Need for special features and accessories should be justified. Provide a
detailed quote.

Provide approvals as appropriate from any biosafety or other institutional body that
clearly state that the plan for the facility/resource or equipment/instrumentation
adheres to all applicable regulations and requirements.

For Operation of Shared Facilities/Resources:
Line drawings should be provided to represent floor plans drawn to scale. Drawings
should indicate size dimensions, function, and net and gross square feet of space for
each room. The total net and gross square feet of space should also be given.

Describe the instrument(s) available for use in the facility/resource.

Provide approvals as appropriate from any biosafety or other institutional body that
clearly state that the plan for the facility/resource adheres to all applicable
regulations and requirements.

E. TABLES
Provide a table to list the names of the users, brief project titles, funding sources of
the projects proposed to use the facility/resource or equipment/instrumentation, and
estimated percentage of use.

F. TECHNICAL EXPERTISE
Describe the technical expertise present at the institution to set up, run and maintain
the facility/resource or equipment/instrument. Specify who will operate the
instrumentation, train new users, and ensure that it is operated safely and
appropriately maintained.
G. ORGANIZATIONAL/MANAGEMENT PLAN
Describe the organizational plan to administer the contract. Include:

- How the equipment/instrument or facility/resource will be utilized
- Describe a plan to manage access and usage
  - How requests will be made
  - How time will be allocated among major and minor users
  - Plans for attracting new users
  - Tracking utilization
- List the names and titles of the members of the advisory committee, include biosketches in an appendix
- Describe a specific plan for
  - Placing the instrument in operational order
  - Long-term operation, and
  - Maintenance.

H. INSTITUTIONAL COMMITMENT
Describe the institutional infrastructure available to support the project. In the appendix, provide supporting documentation such as letters of support (e.g., separate letters signed by appropriate institutional officials), cooperative agreements or memorandum of understanding (MOU).

**Time Line and Collaboration Strategy – Form 11**
Complete the table provided. Specifically identify project milestones including, construction, equipment purchase and installation, inspection, and certifications for operation. Describe strategies for information and/or resource exchange to ensure the efficient and effective completion of the project. Include frequency and methods of communications. Note barriers to communication and resource exchange and propose alternative strategies to overcome potential problems.

**Staff, Collaborators, Consultants and Contributors – Form 12**
List the name, title and institutional affiliation of all staff, collaborators, consultants and contributors (both paid and unpaid).

B. Application Format

**ALL APPLICATIONS SHOULD CONFORM TO THE FORMAT PRESCRIBED BELOW. APPLICATIONS THAT DEVIATE FROM THE INSTRUCTIONS BELOW OR THOSE FOUND ON THE FORMS THEMSELVES WILL BE PENALIZED 0.2 POINTS.**

Applications should be single-spaced and typed using an 11-12 point font on the forms provided. Smaller font sizes are acceptable for use in tables and figure legends. The header should contain the PI’s last name, first initial and applicant institution name and should be placed at the top right-hand corner of each page. Each page should be numbered consecutively. **Do not exceed the page limits stated for each section (see below).** Appendices may not be used to circumvent page limitations.

The Work Plan is limited to ten pages, excluding line drawings and tables.
C. Review & Award Process

1. Review Process

Applications will first be examined by NYSTEM staff for completeness using Pass/Fail criteria. Applications that do not meet the mandatory completeness requirements will not be considered for review.

Applications that pass all completeness requirements will be examined by the Peer Review Contractor for scientific administrative Pass/Fail requirements. NYSTEM staff will immediately notify the applicant if the application does not pass the scientific administrative review to request that the applicant identify content in the submitted application that would allow it to pass. If such content is not found, the application will not be forwarded for review.

Each eligible application will be evaluated by an Independent Scientific Merit Peer Review Panel (the Panel) assigned by the Peer Review Contractor. The Panel will evaluate and score each proposal according to specified criteria (see Section V.D.) modeled after the National Institutes of Health (NIH)-style scientific merit peer review process. The Panel members will be selected from among non-New York State experts in the appropriate fields based on the nature of the applications received. In order to avoid conflict of interest, experts or collaborators on previously funded or submitted ESSCB applications will not be eligible to serve as peer reviewers.

Applications will receive scores from each participating Panel member for each evaluation criterion using a scale of 1 (high merit) to 5 (low merit). The numerical score given each criterion will be multiplied by that criterion’s weight (i.e., 20%). The weighted scores will be added together to determine a single global priority score for the application. The scores of the reviewers will then be averaged to determine the final score. The global priority score is then translated into an adjectival score, as follows:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Adjectival Score</th>
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<tbody>
<tr>
<td>1.0 – 1.5</td>
<td>Outstanding</td>
</tr>
<tr>
<td>1.6 – 2.0</td>
<td>Excellent</td>
</tr>
<tr>
<td>2.1 – 2.5</td>
<td>Very Good</td>
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<td>2.6 – 3.0</td>
<td>Good</td>
</tr>
<tr>
<td>3.1 – 4.0</td>
<td>Fair</td>
</tr>
<tr>
<td>4.1 – 5.0</td>
<td>Poor</td>
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</table>

The Panel will prepare a written summary of each application that includes a description of the application’s strengths and weaknesses. The Panel will also consider the appropriateness of the requested project duration, budget and effort, and may recommend revisions to the ESSCB Funding Committee. Additionally, the Panel will note any areas of possible concern in the application with regard to the Contract Policy Statements and Conditions (contract appendix A-2).

The Peer Review Contractor will compile, prepare and forward all scored applications, summary statements, recommendations and comments to the ESSCB Funding Committee. Applications with a score ranging from 3.1 to 5.0 will not be considered for funding. Applications receiving a score of 1.0 to 3.0 will be reviewed
by the ESSCB Funding Committee. Funding will be awarded as follows:

- The highest ranking (lowest scoring) application for specialized laboratories for isolation, derivation, characterization, maintenance, and distribution of human embryonic (pluripotent) stem cells and their derivatives, or for facilities that will be used to accelerate our understanding of the mechanisms required for reprogramming differentiated cells will be recommended for an award.
- The highest ranking (lowest scoring) application for high throughput facilities to screen for promising therapeutic (lead) compounds, toxicity, and development of therapeutics will be recommended for award.
- The highest ranking (lowest scoring) application for equipment will be recommended for an award.
- The remaining applications receiving a passing score (1.0 to 3.0) will be sorted in rank order by funding mechanism (equipment, facilities) and reviewed by the ESSCB Funding Committee. Funding recommendations will be made for each application in rank order (strongest to weakest score) until total funds awarded equal funds available for that funding mechanism.

For those applications receiving a score of 2.6 to 3.0 (Good), the ESSCB Funding Committee will consider programmatic balance in its recommendation regarding awards. In addition, all award recommendations made by the ESSCB Funding Committee may be made contingent upon acceptance of revisions to items on which the reviewers noted concerns or recommendations made by the Panel with regard to project duration, budget, percent effort and the Contract Policy Statements and Conditions. A scoring tie for applications will only be addressed if funds are not available to make awards to all of the applications involved in the tie.

The ESSCB Funding Committee will make funding recommendations by voting on each selected application. Seven affirmative votes are required to approve an application. If an application, for which there are available funds, does not receive seven affirmative votes, the ESSCB Funding Committee will fully justify in writing why the application was not approved.

The ESSCB Funding Committee will make recommendations to the Commissioner of Health on applications to be funded. All applicants that do not receive funding will be notified in writing.

Following the award of grants from this RFA, applicants may request a debriefing from NYSTEM, no later than three months from the date of the award announcement. This debriefing will be limited to the positive and negative aspects of the subject application.

2. Award Decisions and Pre-Funding Requirements

Grant award contracts are entered into between New York State applicant organizations and the New York State Department of Health. Funding is contingent upon full execution of a contract between the applicant organization and the New York State Department of Health and approval by the Commissioner of Health, State Attorney General and State Comptroller.
Principal investigators recommended for support and their applicant organizations will receive formal notification in writing.

Prior to contract execution, program administrators will require resolution/submission of the following items, as relevant to each application:

- Revisions to work plan, project budget or duration
- NYSTEM requirements pertaining to research administration or research risks
- Approved Facilities and Administrative Cost Rate

3. Award Announcements

NYSTEM makes public in press releases and annual reports to the Governor and Legislature, the project title, the principal investigator(s), the name of the organization, total projects costs and duration. The project abstract and progress report abstracts may also be edited and made public.

D. Review Criteria

Five criteria are considered by the reviewers:

1. **Need/Significance (50%)**
   a. The need for the facility, resource or equipment is clearly and adequately justified.

   b. The project will meet current and future stem cell research needs, particularly for smaller or developing institutions, and will help to maximize the expertise, efficiency, and quality of stem cell research in New York State and to provide a high-quality stable infrastructure upon which to build a strong stem cell research community in New York State that is responsive to the rapid pace at which the field is progressing.

   c. For development and operation of facilities applications, the project will provide: specialized laboratories for isolation, derivation, characterization, maintenance, and distribution of human embryonic (pluripotent) stem cells and their derivatives or facilities that will be used to accelerate our understanding of the mechanisms required for reprogramming differentiated cells; or facilities to screen for promising therapeutic (lead) compounds, toxicity, and development of therapeutics.

2. **Technical Expertise and Design Considerations (10%)**
   a. The institution has the technical expertise to make effective use of the equipment, resource, or facility.

   b. Personnel and users are well-qualified to operate and maintain the instrument, resource or facility, and to conduct the projects and evaluate the research results.
c. The training, safety and other regulatory (e.g., biosafety, hESC) plans, policies and procedures are adequate.

d. The facility or renovation design is technically sound, appropriate and suitable for the proposed project and addresses current and future needs.

3. **Administration (10%)**
   a. The plan for management and maintenance is appropriate.

   b. Membership on the advisory committee is broadly based and includes appropriate expertise absent conflict of interest.

   c. Allocation of time to projects and resource sharing arrangements are sound and equitable.

   d. The financial plan for long-term operation and maintenance, fee structures and other financial considerations are appropriate.

4. **Environment (10%)**
   a. Adequate evidence is presented to ensure continued support for the utilization and maintenance of the equipment, facility, or resource.

   b. The supporting resources and environment are suitable for achieving the goals of the program and its users.

5. **Budget (20%)**
   The budget allocations are appropriate and the requested period of support in relation to the proposed project and the research it intends to support, including an assessment of cost reasonableness and percentage of effort.
ATTACHMENT 1

APPLICATION FORMS 1 - 12
### Face Page

| Project Title: | |
| Application Type: | Shared Equipment/Instrumentation Specialized Facility High Throughput Facility | NYSTEM Application #: |
| Principal Investigator: | Co-Principal Investigator: |
| Last Name, First Name, Middle Initial, Degree(s) | Last Name, First Name, Middle Initial, Degree(s) |
| Institution: | Institution: |
| Department: | Department: |
| Mailing Address (Street, MS, PO Box, City, State, Zip): | Mailing Address(Street, MS, PO Box, City, State, Zip): |
| Phone: | Fax: | Phone: | Fax: |
| E-mail: | | | |
| Type of Organization: | Government Nonprofit |
| Federal Employer ID # (9 digits): | DUNS Number: |
| Charities Registration Number (or “Exempt category”): | |
| F&A Costs: | DHHS Agreement Date: \_\_\_\_ DHHS Agreement being Negotiated |
| No DHHS Agreement, but rate established (explain and date): | |
| Project Duration: | Year One |
| Grand Total Costs: | Grand Total Costs: |
| New York State Applicant Organization : Research Performing Sites: |
| Mailing Address (Street, MS, PO Box, City, State, Zip): | |
| Contracts and Grants Official: Official Signing for Organization (Name and Title): |
| Mailing Address (Street, PO Box, MS, City, State, Zip): Organizational Name and Mailing Address: (Street, MS, PO Box, City, State, Zip) |
| Phone: | Fax: | Phone: | Fax: |
| E-mail: | | | |
| Address where reimbursement should be sent if contract is awarded (Street, MS,PO Box, City, NY, Zip): |
| CERTIFICATION AND ASSURANCE: | I certify that the statements herein are true and complete to the best of my knowledge. I agree to accept responsibility for the scientific conduct and integrity of the research, and to provide the required progress reports if a contract is awarded as a result of this application. |
| SIGNATURES OF PRINCIPAL INVESTIGATOR and CO-PI (“Per” not allowed): |
| X | DATE: |
| X | DATE: |
| ORGANIZATION CERTIFICATION AND ACCEPTANCE: | I certify that the statements herein are true and complete to the best of my knowledge, and I accept the obligation to comply with the Empire State Stem Cell Board's terms and conditions if a contract is awarded as a result of this application. |
| SIGNATURE OF THE OFFICIAL SIGNING FOR THE APPLICANT ORGANIZATION (“Per” not allowed): |
| X | DATE: |
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<td>12</td>
<td>Staff, Collaborators, Consultants and Contributors</td>
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* Indicate “N/A” if not applicable.
Lay Abstract

Present the information requested below in non-technical terms. Use available space to your best advantage; comply with font guidelines.

Introduction/Background/Statement of Need:

Summary of Goals and Objectives:

List any human pluripotent stem cell lines and the source of such lines:
Program Responsiveness

Clearly describe how this application contributes to the goal of the ESSCB to develop and maintain the strong infrastructure and the multifaceted research and development capability necessary to develop therapies for specific diseases.
## Budget – Name of Contractor or Subcontractor ________________________________

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**Form 5**

Attach Subcontractor budgets using additional copies of Form 5.
### OTHER THAN PERSONAL SERVICE (OTPS)

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<td>OFFICE SUPPLIES</td>
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Form 5
Attach Subcontractor budgets using additional copies of Form 5.
### Personnel Effort and Budget Justification

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<th>Key Personnel *</th>
<th>Percent FTE</th>
<th>Dollar Amount Requested (Year One)</th>
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<tr>
<td>Name</td>
<td>Role in Project</td>
<td>Total all Projects</td>
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<td>Total all Projects</td>
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Total Salary + Fringe Requested – should equal Year One, line 3, Form 5.

* Insert additional lines as necessary under Key Personnel or Support Personnel.

Describe and justify the items to be included in Other than Personal Service Costs.

---

Form 6

Not to exceed 3 pages per organization. Attach Subcontractor Personnel Effort and Budget Justification using additional copies of Form 6.
Form 6
Not to exceed 3 pages per organization. Attach Subcontractor Personnel Effort and Budget Justification using additional copies of Form 6.
Form 6
Not to exceed 3 pages per organization. Attach Subcontractor Personnel Effort and Budget Justification using additional copies of Form 6.
## Biographical Sketch

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<th>NAME</th>
<th>POSITION/TITLE</th>
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<tr>
<th>EDUCATION/TRAINING (Begin with baccalaureate or other professional education, and include postdoctoral training)</th>
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<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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### A. Positions and Honors

List in chronological order all previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

### B. Selected peer-reviewed publications or manuscripts in press (in chronological order)

Do not include manuscripts submitted or in preparation. For publicly available citations, URLs or PMC submission identification numbers may accompany the full reference.
<table>
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<tr>
<th>NAME</th>
<th>POSITION/TITLE</th>
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Form 7
Not to exceed two pages per individual. Present the PI first, followed by Co-PI(s) and the remaining key personnel in alphabetical order using additional copies of Form 7.
Facilities and Resources

Only Applicable for Equipment Applications

FACILITIES: Specify the facilities to be used to conduct the proposed research. Indicate the performance site(s) and describe pertinent site capabilities, relative proximity and extent of availability to the project. Under “Other”, identify support services such as machine shop and electronics shop, and specify the extent to which such services will be available to the project. Also indicate the institutional commitment, including any additional facilities or equipment requested in support of the project or available for use at no cost to the proposed project.

Laboratory:

Clinical:

Animal:

Computer:

Office:

Other:
MAJOR EQUIPMENT: List the most important equipment items already available for this project, noting the location and pertinent capabilities of each.
Other Support

Name of Key Personnel: ____________________________

Check if there is no other research support for the individual listed:

TITLE OF PROJECT: Pending Active

PROJECT PI:

FUNDING AGENCY/GRANT ID NO.:

PERIOD OF SUPPORT: % FTE ________

THIS PROJECT INVOLVES STEM CELL RELATED RESEARCH: Yes No

THIS PROJECT OVERLAPS A RESEARCH AIM IN THIS APPLICATION: Yes No

Form 9
Repeat the format presented above for each position listed as key personnel on Form 6. Use additional pages as needed. Present the Principal Investigator first, followed by Co-PI(s) and the remaining key personnel in alphabetical order. For any “Yes” answer, explain the distinction between the project and this application, directly below the item. Indicate a possible resolution, if this application is funded.
Work Plan: Use available space to your best advantage.
Describe strategies for information and/or resource exchange to ensure efficient and effective completion of the project.
# Staff, Collaborators, Consultants and Contributors

List the name, title and institutional affiliation of all staff, collaborators, consultants and contributors (both paid and unpaid). This list is used in indentifying the Independent Scientific Merit Peer Review panel.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Institutional Affiliation</th>
<th>Role on Project</th>
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ALL ITEMS ARE MANDATORY WITH THE EXCEPTION OF THOSE LISTED UNDER “APPENDICES.” APPLICATIONS THAT DO NOT INCLUDE MANDATORY ITEMS WILL NOT BE REVIEWED.

☐ Applicant institution filed a letter of intent for the PI by the due date and time
☐ Application was submitted by due date and time
☐ Applicant institution is eligible to apply
☐ Submit 1 original paper copy of the entire application (Attachment 1 – Forms 1-12), including the original signed Face Page (Attachment 1 – Form 1)
  ▪ If the application includes a Co-PI, the Co-PI must sign the Face Page
  ▪ Organization Certification and Acceptance portion is signed and dated
  ▪ Sub-contracting agencies have completed additional Face Page(s) meeting the other requirements in this section.
☐ Submit 1 CD-ROM disk containing:
  ▪ Signed application Face Page (Attachment 1 – Form 1) in a portable document format file (.pdf)
  ▪ The entire application (Attachment 1 – Forms 2-12) in a Microsoft Word File (.doc)
  ▪ Any supporting documents to the application in portable document format files (.pdf).

Scientific administrative requirements:
☐ Three or more investigators are identified to use the shared equipment, facility or resource
☐ A minimum of three major users are principal investigators on funded peer reviewed stem cell research grants at the time of application
☐ At least 50% of the usage of the shared instrument or facility is for stem cell related projects
☐ For shared equipment/instrumentation, the proposal includes at least one piece of equipment with a minimum cost of $50,000
☐ An internal advisory committee, pre-existing or new, is named to assist the PI in administration and oversight of the shared facilities/resources and equipment/instrumentation

Appendices may include:
☐ Vendor Responsibility Attestation (Attachment 3)
☐ Completed Vendor Responsibility Questionnaire
☐ Letters of collaboration or support; commitment(s) to provide research resources; subcontract letter(s) from consultant(s)
☐ Memoranda of Understanding, Subcontracts or Contractual Agreements
☐ Up to two highly relevant publications or manuscripts (published or in press) may be included if essential to document the investigator’s capability to undertake the work proposed
☐ Facilities and Administrative rate agreements
☐ Equipment quotes
☐ Facility Plans/Sketches/Line Drawings
☐ Biosketches of Advisory Committee members
☐ Other
ATTACHMENT 3
Vendor Responsibility Attestation

To comply with the Vendor Responsibility Requirements outlined in Section IV, Administrative Requirements, I. Vendor Responsibility Questionnaire, I hereby certify:

Choose one:

☐ An on-line Vendor Responsibility Questionnaire has been updated or created at OSC’s website: https://portal.osc.state.ny.us within the last six months.

☐ A hard copy Vendor Responsibility Questionnaire is included with this application and is dated within the last six months.

☐ A Vendor Responsibility Questionnaire is not required due to an exempt status. Exemptions include governmental entities, public authorities, public colleges and universities, public benefit corporations, and Indian Nations.

Signature of Organization Official: ________________________________

Print/type Name: ________________________________

Title: ________________________________

Organization: ________________________________

Date Signed: ________________________________
ATTACHMENT 4
Letter of Intent
Shared Facilities/Resources and Equipment/Instrumentation for Stem Cell Research

A Letter of Intent is required of prospective applicants in order to develop appropriate Review Panels in a timely manner. This form is mandatory and must be completed and filed as instructed in Section IV.C. of this RFA.

### I. Investigator Information (please print or type)

<table>
<thead>
<tr>
<th>Principal Investigator:</th>
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<tr>
<td>Sponsoring Institution:</td>
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<td>Address:</td>
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<td>ZIP Code:</td>
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<td>E-Mail:</td>
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### II. Collaborator Information (please print or type)

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<th>Primary Contact:</th>
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<td>Collaborating Institution:</td>
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### Collaborator Information (cont.)

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**SIGNATURES OF PRINCIPAL INVESTIGATOR ("Per" not allowed):**

X [Signature]

**DATE:**

**ORGANIZATION CERTIFICATION AND ACCEPTANCE:** I certify that the statements herein are true and complete to the best of my knowledge.

**SIGNATURE OF THE OFFICAL SIGNING FOR THE APPLICANT ORGANIZATION ("Per" not allowed):**

X [Signature]

**DATE:**
1. Grant Contract
2. Appendix A (Standard NYS Contract Terms)
3. Appendix A-1 (NYSDOH Standard Contract Terms)
5. Appendix B (Budget – attached here in sample form)
6. Appendix C (Payment and Reporting Schedule)
7. Appendix D (Work Plan)
8. Appendix X (Modification Agreement Form)

*NOTE: State Contract forms are included for informational purposes, only.

DO NOT COMPLETE THEM AT THIS TIME.
GRANT CONTRACT

STATE AGENCY (Name and Address): . NYS COMPTROLLER'S NUMBER: ______

_______________________________________ . ORIGINATING AGENCY CODE:

_______________________________________ . TYPE OF PROGRAM(S)

_______________________________________ . ___________________________________

CONTRACTOR (Name and Address): . FEDERAL TAX IDENTIFICATION NUMBER:

_______________________________________ . INITIAL CONTRACT PERIOD

_______________________________________ . MUNICIPALITY NO. (if applicable):

_______________________________________ . FROM:

_______________________________________ . TO:

CHARITIES REGISTRATION NUMBER: . FUNDING AMOUNT FOR INITIAL PERIOD:

__   __   __   __         or        (  ) EXEMPT: . ___________________________________

(If EXEMPT, indicate basis for exemption):

_______________________________________ . MULTI-YEAR TERM (if applicable):

_______________________________________ . FROM:

_______________________________________ . TO:

CONTRACTOR HAS(   ) HAS NOT(   ) TIMELY FILED WITH THE ATTORNEY GENERAL'S
CHARITIES BUREAU ALL REQUIRED PERIODIC OR ANNUAL WRITTEN REPORTS.

CONTRACTOR IS(  ) IS NOT(  ) A SECTARIAN ENTITY
CONTRACTOR IS(  ) IS NOT(  ) A NOT-FOR-PROFIT ORGANIZATION

APPENDICES ATTACHED AND PART OF THIS AGREEMENT

_____ APPENDIX A Standard clauses as required by the Attorney General for all State contracts.

_____ APPENDIX A-1 Agency-Specific Clauses (Rev 1/08)

_____ APPENDIX B Budget

_____ APPENDIX C Payment and Reporting Schedule

_____ APPENDIX D Program Work Plan

_____ APPENDIX X Modification Agreement Form (to accompany modified appendices for changes in term or consideration on an existing period or for renewal periods)

OTHER APPENDICES

_____ APPENDIX A-2 Program-Specific Clauses

_____ APPENDIX E-1 Proof of Workers' Compensation Coverage

_____ APPENDIX E-2 Proof of Disability Insurance Coverage

_____ APPENDIX H Federal Health Insurance Portability and Accountability Act Business Associate Agreement

_____ APPENDIX ___

_____ APPENDIX ___
IN WITNESS THEREOF, the parties hereto have executed or approved this AGREEMENT on the dates below their signatures.

_______________________________________ . ___________________________________ . Contract No. ________________________

_______________________________________ . ___________________________________

CONTRACTOR . STATE AGENCY
_______________________________________ . ___________________________________

By: ____________________________________ . By: ________________________________ (Print Name)

Title: ___________________________________ . Title: _______________________________
Date: ___________________________________ . Date: ______________________________

State Agency Certification:
“In addition to the acceptance of this contract, I also certify that original copies of this signature page will be attached to all other exact copies of this contract.”

_______________________________________ . ___________________________________

STATE OF NEW YORK )
) SS:
County of ____________

On the ___ day of _____________ in the year _______, before me, the undersigned, personally appeared ______________, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is(are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their/ capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

(Signature and office of the individual taking acknowledgement)

ATTORNEY GENERAL’S SIGNATURE . STATE COMPTROLLER’S SIGNATURE

_______________________________________ . ___________________________________

Title: ___________________________________ . Title: _______________________________
Date: ___________________________________ . Date: ______________________________
STATE OF NEW YORK

AGREEMENT

This AGREEMENT is hereby made by and between the State of New York agency (STATE) and the public or private agency (CONTRACTOR) identified on the face page hereof.

WITNESSETH:

WHEREAS, the STATE has the authority to regulate and provide funding for the establishment and operation of program services and desires to contract with skilled parties possessing the necessary resources to provide such services; and

WHEREAS, the CONTRACTOR is ready, willing and able to provide such program services and possesses or can make available all necessary qualified personnel, licenses, facilities and expertise to perform or have performed the services required pursuant to the terms of this AGREEMENT;

NOW THEREFORE, in consideration of the promises, responsibilities and covenants herein, the STATE and the CONTRACTOR agree as follows:

I. Conditions of Agreement

A. This AGREEMENT may consist of successive periods (PERIOD), as specified within the AGREEMENT or within a subsequent Modification Agreement(s) (Appendix X). Each additional or superseding PERIOD shall be on the forms specified by the particular State agency, and shall be incorporated into this AGREEMENT.

B. Funding for the first PERIOD shall not exceed the funding amount specified on the face page hereof. Funding for each subsequent PERIOD, if any, shall not exceed the amount specified in the appropriate appendix for that PERIOD.

C. This AGREEMENT incorporates the face pages attached and all of the marked appendices identified on the face page hereof.

D. For each succeeding PERIOD of this AGREEMENT, the parties shall prepare new appendices, to the extent that any require modification, and a Modification Agreement (the attached Appendix X is the blank form to be used). Any terms of this AGREEMENT not modified shall remain in effect for each PERIOD of the AGREEMENT.

To modify the AGREEMENT within an existing PERIOD, the parties shall revise or complete the appropriate appendix form(s). Any change in the amount of consideration to be paid, or change in the term, is subject to the approval of the Office of the State Comptroller. Any other modifications shall be processed in accordance with agency guidelines as stated in Appendix A-1.

E. The CONTRACTOR shall perform all services to the satisfaction of the STATE. The CONTRACTOR shall provide services and meet the program objectives summarized in the Program Work Plan (Appendix D) in accordance with: provisions of the AGREEMENT; relevant laws, rules and regulations, administrative and fiscal guidelines; and where applicable, operating certificates for facilities or licenses for an activity or program.

F. If the CONTRACTOR enters into subcontracts for the performance of work pursuant to this AGREEMENT, the CONTRACTOR shall take full responsibility for the acts and omissions of its subcontractors. Nothing in the subcontract shall impair the rights of the STATE under this
AGREEMENT. No contractual relationship shall be deemed to exist between the subcontractor and the STATE.

G. Appendix A (Standard Clauses as required by the Attorney General for all State contracts) takes precedence over all other parts of the AGREEMENT.

II. Payment and Reporting

A. The CONTRACTOR, to be eligible for payment, shall submit to the STATE’s designated payment office (identified in Appendix C) any appropriate documentation as required by the Payment and Reporting Schedule (Appendix C) and by agency fiscal guidelines, in a manner acceptable to the STATE.

B. The STATE shall make payments and any reconciliations in accordance with the Payment and Reporting Schedule (Appendix C). The STATE shall pay the CONTRACTOR, in consideration of contract services for a given PERIOD, a sum not to exceed the amount noted on the face page hereof or in the respective Appendix designating the payment amount for that given PERIOD. This sum shall not duplicate reimbursement from other sources for CONTRACTOR costs and services provided pursuant to this AGREEMENT.

C. The CONTRACTOR shall meet the audit requirements specified by the STATE.

III. Terminations

A. This AGREEMENT may be terminated at any time upon mutual written consent of the STATE and the CONTRACTOR.

B. The STATE may terminate the AGREEMENT immediately, upon written notice of termination to the CONTRACTOR, if the CONTRACTOR fails to comply with the terms and conditions of this AGREEMENT and/or with any laws, rules and regulations, policies or procedures affecting this AGREEMENT.

C. The STATE may also terminate this AGREEMENT for any reason in accordance with provisions set forth in Appendix A-1.

D. Written notice of termination, where required, shall be sent by personal messenger service or by certified mail, return receipt requested. The termination shall be effective in accordance with the terms of the notice.

E. Upon receipt of notice of termination, the CONTRACTOR agrees to cancel, prior to the effective date of any prospective termination, as many outstanding obligations as possible, and agrees not to incur any new obligations after receipt of the notice without approval by the STATE.

F. The STATE shall be responsible for payment on claims pursuant to services provided and costs incurred pursuant to terms of the AGREEMENT. In no event shall the STATE be liable for expenses and obligations arising from the program(s) in this AGREEMENT after the termination date.

IV. Indemnification

A. The CONTRACTOR shall be solely responsible and answerable in damages for any and all accidents and/or injuries to persons (including death) or property arising out of or related to the services to be rendered by the CONTRACTOR or its subcontractors pursuant to this
AGREEMENT. The CONTRACTOR shall indemnify and hold harmless the STATE and its officers and employees from claims, suits, actions, damages and costs of every nature arising out of the provision of services pursuant to this AGREEMENT.

B. The CONTRACTOR is an independent contractor and may neither hold itself out nor claim to be an officer, employee or subdivision of the STATE nor make any claims, demand or application to or for any right based upon any different status.

V. Property

Any equipment, furniture, supplies or other property purchased pursuant to this AGREEMENT is deemed to be the property of the STATE except as may otherwise be governed by Federal or State laws, rules and regulations, or as stated in Appendix A-2.

VI. Safeguards for Services and Confidentiality

A. Services performed pursuant to this AGREEMENT are secular in nature and shall be performed in a manner that does not discriminate on the basis of religious belief, or promote or discourage adherence to religion in general or particular religious beliefs.

B. Funds provided pursuant to this AGREEMENT shall not be used for any partisan political activity, or for activities that may influence legislation or the election or defeat of any candidate for public office.

C. Information relating to individuals who may receive services pursuant to this AGREEMENT shall be maintained and used only for the purposes intended under the contract and in conformity with applicable provisions of laws and regulations, or specified in Appendix A-1.
The parties to the attached contract, license, lease, amendment or other agreement of any kind (hereinafter, "the contract" or "this contract") agree to be bound by the following clauses which are hereby made a part of the contract (the word "Contractor" herein refers to any party other than the State, whether a contractor, licensor, licensee, lessor, lessee or any other party):

1. EXECUTORY CLAUSE. In accordance with Section 41 of the State Finance Law, the State shall have no liability under this contract to the Contractor or to anyone else beyond funds appropriated and available for this contract.

2. NON-ASSIGNMENT CLAUSE. In accordance with Section 138 of the State Finance Law, this contract may not be assigned by the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the previous consent, in writing, of the State and any attempts to assign the contract without the State's written consent are null and void. The Contractor may, however, assign its right to receive payment without the State's prior written consent unless this contract concerns Certificates of Participation pursuant to Article 5-A of the State Finance Law.

3. COMPTROLLER'S APPROVAL. In accordance with Section 112 of the State Finance Law (or, if this contract is with the State University or City University of New York, Section 355 or Section 6218 of the Education Law), if this contract exceeds $50,000 (or the minimum thresholds agreed to by the Office of the State Comptroller for certain S.U.N.Y. and C.U.N.Y. contracts), or if this is an amendment for any amount to a contract which, as so amended, exceeds said statutory amount, or if, by this contract, the State agrees to give something other than money when the value or reasonably estimated value of such consideration exceeds $10,000, it shall not be valid, effective or binding upon the State until it has been approved by the State Comptroller and filed in his office. Comptroller's approval of contracts let by the Office of General Services is required when such contracts exceed $85,000 (State Finance Law Section 163.6.a).

4. WORKERS' COMPENSATION BENEFITS. In accordance with Section 142 of the State Finance Law, this contract shall be void and of no force and effect unless the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the previous consent, in writing, of the State and any attempts to assign the contract without the State's written consent are null and void. The Contractor may, however, assign its right to receive payment without the State's prior written consent unless this contract concerns Certificates of Participation pursuant to Article 5-A of the State Finance Law.

5. NON-DISCRIMINATION REQUIREMENTS. To the extent required by Article 15 of the Executive Law (also known as the Human Rights Law) and all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor will not discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, sexual orientation, age, disability, genetic predisposition or carrier status, or marital status. Furthermore, in accordance with Section 220-e of the Labor Law, if this is a contract for the construction, alteration or repair of any public building or public work or for the manufacture, sale or distribution of materials, equipment or supplies, and to the extent that this contract shall be performed within the State of New York, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, disability, sex, or national origin: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. If this is a building service contract as defined in Section 230 of the Labor Law, then, in accordance with Section 239 thereof, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, national origin, age, sex or disability: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. Contractor is subject to fines of $50.00 per person per day for any violation of Section 220-e or Section 239 as well as possible termination of this contract and forfeiture of all monies due hereunder for a second or subsequent violation.

6. WAGE AND HOURS PROVISIONS. If this is a public work contract covered by Article 8 of the Labor Law or a building service contract covered by Article 9 thereof, neither Contractor's employees nor the employees of its subcontractors may be required or permitted to work more than the number of hours or days stated in said statutes, except as otherwise provided in the Labor Law and as set forth in prevailing wage and supplement schedules issued by the State Labor Department. Furthermore, Contractor and its subcontractors must pay at least the prevailing wage rate and pay or provide the prevailing supplements, including the premium rates for overtime pay, as determined by the State Labor Department in accordance with the Labor Law.

7. NON-COLLUSIVE BIDDING CERTIFICATION. In accordance with Section 139-d of the State Finance Law, if this contract was awarded based upon the submission of bids, Contractor affirms, under penalty of perjury, that its bid was arrived at independently and without collusion aimed at restricting competition. Contractor further affirms that, at the time Contractor submitted its bid, an authorized and responsible person executed and delivered to the State a non-collusive bidding certification on Contractor's behalf.

8. BOYCOTT PROHIBITION. In accordance with Section 220-f of the Labor Law and Section 139-h of the State Finance Law, if this contract exceeds $5,000, the Contractor agrees, as a material condition of the contract, that neither the Contractor nor any substantially owned or affiliated person, firm, partnership or corporation has participated, is participating, or shall participate in an international boycott in violation of the federal Export Administration Act of 1979 (50 USC App. Sections 2401 et seq.) or regulations thereunder. If such Contractor, or any of the aforesaid affiliates of Contractor, is convicted or is otherwise found to have violated said laws or regulations upon the final determination of the United States Commerce Department or any other appropriate agency of the United States subsequent to the contract's execution, such contract, amendment or modification thereto shall be rendered forfeit and void. The Contractor shall so notify the State Comptroller within five (5) business days of such conviction, determination or disposition of appeal (2NYCRR 105.4).

9. SET-OFF RIGHTS. The State shall have all of its common law, equitable and statutory rights of set-off. These rights shall include, but not be limited to, the State's option to withhold for the purposes of set-off any monies due to the Contractor under this contract up to any amounts due and owing to the State with regard to this contract, any other contract with any State department or agency, including any contract for a term commencing prior to the term of this contract, plus any amounts due and owing to the State for any other reason including, without limitation, tax delinquencies, fee delinquencies or monetary penalties relative thereto. The State shall exercise its set-off rights in accordance with normal State practices including, in cases of set-off pursuant to an audit, the finalization of such audit by the State agency, its representatives, or the State Comptroller.

10. RECORDS. The Contractor shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance under this contract (hereinafter, collectively, "the Records"). The Records must be kept for the balance of the calendar year in which they were made and for six (6) additional years thereafter. The State Comptroller, the Attorney General and any other person or entity authorized to conduct an examination, as well as the agency or agencies involved in this contract, shall have access to the Records during normal business hours at an office of the Contractor.
within the State of New York or, if no such office is available, at a mutually agreeable and reasonable venue within the State, for the term specified above for the purposes of inspection, auditing and copying. The State shall take reasonable steps to protect from public disclosure any of the Records which are exempt from disclosure under Section 87 of the Public Officers Law (the "Statute") provided that: (i) the Contractor shall timely inform an appropriate State official, in writing, that said records should not be disclosed; and (ii) said records shall be sufficiently identified; and (iii) designation of said records as exempt under the Statute is reasonable. Nothing contained herein shall diminish, or in any way adversely affect, the State's right to discovery in any pending or future litigation.

11. IDENTIFYING INFORMATION AND PRIVACY NOTIFICATION. (a) FEDERAL EMPLOYER IDENTIFICATION NUMBER and/or FEDERAL SOCIAL SECURITY NUMBER. All invoices or New York State standard vouchers submitted for payment for the sale of goods or services or the lease of real or personal property to a New York State agency must include the payee's identification number, i.e., the seller's or lessor's identification number. The number is either the payee's Federal employer identification number or Federal social security number, or both such numbers when the payee has both such numbers. Failure to include this number or numbers may delay payment. Where the payee does not have such number or numbers, the payee, on its invoice or New York State standard voucher, must give the reason or reasons why the payee does not have such number or numbers. (b) PRIVACY NOTIFICATION. (1) The authority to request the above personal information from a seller of goods or services or a lessor of real or personal property, and the authority to maintain such information, is found in Section 5 of the State Tax Law. Disclosure of this information by the seller or lessor to the State is mandatory. The principal purpose for which the information is collected is to enable the State to identify individuals, businesses and others who have been delinquent in filing tax returns or may have understated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. The information will be used for tax administration purposes and for any other purpose authorized by law.

(2) The personal information is requested by the purchasing unit of the agency contracting to purchase the goods or services or lease the real or personal property covered by this contract or lease. The information is maintained in New York State's Central Accounting System by the Director of Accounting Operations, Office of the State Comptroller, 110 State Street, Albany, New York 12236.

12. EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITIES AND WOMEN. In accordance with Section 312 of the Executive Law, if this contract is: (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of $25,000.00, whereby a contracting agency is committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the contracting agency; or (ii) a written agreement in excess of $100,000.00 whereby a contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon; or (iii) a written agreement in excess of $100,000.00 whereby the owner of a State assisted housing project is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon for such project, then: (a) The Contractor will not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status, and will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination. Affirmative action shall mean recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation;
(b) at the request of the contracting agency, the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of the contractor's obligations herein; and
(c) the Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the State contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.

Contractor will include the provisions of "a", "b", and "c" above, in every subcontract over $25,000.00 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work") except where the Work is for the beneficial use of the Contractor. Section 312 does not apply to: (i) work, goods or services unrelated to this contract; or (ii) employment outside New York State; or (iii) banking services, insurance policies or the sale of securities. The State shall consider compliance by a contractor or subcontractor with the requirements of any federal law concerning equal employment opportunity which effectuates the purpose of this section. The contracting agency shall determine whether the imposition of the requirements of the provisions hereof duplicate or conflict with any such federal law and if such duplication or conflict exists, the contracting agency shall waive the applicability of Section 312 to the extent of such duplication or conflict. Contractor will comply with all duly promulgated and lawful rules and regulations of the Governor's Office of Minority and Women's Business Development pertaining hereto.

13. CONFLICTING TERMS. In the event of a conflict between the terms of the contract (including any and all attachments thereto and amendments thereof) and the terms of this Appendix A, the terms of this Appendix A shall control.

14. GOVERNING LAW. This contract shall be governed by the laws of the State of New York except where the Federal supremacy clause requires otherwise.

15. LATE PAYMENT. Timeliness of payment and any interest to be paid to Contractor for late payment shall be governed by Article 11-A of the State Finance Law to the extent required by law.

16. NO ARBITRATION. Disputes involving this contract, including the breach or alleged breach thereof, may not be submitted to binding arbitration (except where statutorily authorized), but must, instead, be heard in a court of competent jurisdiction of the State of New York.

17. SERVICE OF PROCESS. In addition to the methods of service allowed by the State Civil Practice Law & Rules ("CPLR"), Contractor hereby consents to service of process upon it by registered or certified mail, return receipt requested. Service hereunder shall be complete upon Contractor's actual receipt of process or upon the State's receipt of the return thereof by the United States Postal Service as refused or undeliverable. Contractor must promptly notify the State, in writing, of each and every change of address to which service of process can be made. Service by the State to the last known address shall be sufficient. Contractor will have thirty (30) calendar days after service hereunder is complete in which to respond.
18. PROHIBITION ON PURCHASE OF TROPICAL HARDWOODS. The Contractor certifies and warrants that all wood products to be used under this contract are in accordance with, but not limited to, the specifications and provisions of State Finance Law §165. (Use of Tropical Hardwoods) which prohibits purchase and use of tropical hardwoods, unless specifically exempted, by the State or any governmental agency or political subdivision or public benefit corporation. Qualification for an exemption under this law will be the responsibility of the contractor to establish to meet with the approval of the State. In addition, when any portion of this contract involving the use of woods, whether supply or installation, is to be performed by any subcontractor, the prime contractor will indicate and certify in the submitted bid proposal that the subcontractor has been informed and is in compliance with specifications and provisions regarding use of tropical hardwoods as detailed in §165 State Finance Law. Any such use must meet with the approval of the State; otherwise, the bid may not be considered responsive. Under bidder certifications, proof of qualification for exemption will be the responsibility of the contractor to meet with the approval of the State.

19. MACBRIDE FAIR EMPLOYMENT PRINCIPLES. In accordance with the MacBride Fair Employment Principles (Chapter 807 of the Laws of 1992), the contractor hereby stipulates that the contractor either (a) has no business operations in Northern Ireland, or (b) shall take lawful steps in good faith to conduct any business operations in Northern Ireland in accordance with the MacBride Fair Employment Principles (as described in Section 165 of the New York State Finance Law), and shall permit independent monitoring of compliance with such principles.

20. OMNIBUS PROCUREMENT ACT OF 1992. It is the policy of New York State to maximize opportunities for the participation of New York State business enterprises, including minority and women-owned business enterprises as bidders, subcontractors and suppliers on its procurement contracts. Information on the availability of New York State subcontractors and suppliers is available from:

- NYS Department of Economic Development
  Division for Small Business
  30 South Pearl St - 7th Floor
  Albany, New York 12245
  Telephone: 518-292-5220
  Fax: 518-292-5884
  http://www.empire.state.ny.us

A directory of certified minority and women-owned business enterprises is available from:

- NYS Department of Economic Development
  Division of Minority and Women's Business Development
  30 South Pearl St -- 2nd Floor
  Albany, New York 12245
  Telephone: 518-292-5250
  Fax: 518-292-5803
  http://www.empire.state.ny.us

The Omnibus Procurement Act of 1992 requires that by signing this bid proposal or contract, as applicable, contractors certify that whenever the total bid amount is greater than $1 million:

(a) The contractor has made reasonable efforts to encourage the participation of New York State business enterprises as suppliers and subcontractors, including certified minority and women-owned business enterprises, on this project, and has retained the documentation of these efforts to be provided upon request to the State;

(b) The contractor has complied with the Federal Equal Opportunity Act of 1972 (P.L. 92-261), as amended;

(c) The contractor agrees to make reasonable efforts to provide notification to New York State residents of employment opportunities on this project through listing any such positions with the Job Service Division of the New York State Department of Labor, or providing such notification in such manner as is consistent with existing collective bargaining contracts or agreements. The contractor agrees to document these efforts and to provide said documentation to the State upon request; and

(d) The contractor acknowledges notice that the State may seek to obtain offset credits from foreign countries as a result of this contract and agrees to cooperate with the State in these efforts.

21. RECIPROCITY AND SANCTIONS PROVISIONS. Bidders are hereby notified that if their principal place of business is located in a country, nation, province, state or political subdivision that penalizes New York State vendors, and if the goods or services they offer will be substantially produced or performed outside New York State, the Omnibus Procurement Act 1994 and 2000 amendments (Chapter 684 and Chapter 383, respectively) require that they be denied contracts which they would otherwise obtain. NOTE: As of May 15, 202, the list of discriminatory jurisdictions subject to this provision includes the states of South Carolina, Alaska, West Virginia, Wyoming, Louisiana and Hawaii. Contact NYS Department of Economic Development for a current list of jurisdictions subject to this provision.

22. PURCHASES OF APPAREL. In accordance with State Finance Law 162 (4-a), the State shall not purchase any apparel from any vendor unable or unwilling to certify that: (i) such apparel was manufactured in compliance with all applicable labor and occupational safety laws, including, but not limited to, child labor laws, wage and hours laws and workplace safety laws, and (ii) vendor will supply, with its bid (or, if not a bid situation, prior to or at the time of signing a contract with the State), if known, the names and addresses of each subcontractor and a list of all manufacturing plants to be utilized by the bidder.
APPENDIX A-1
(REV 1/08)

AGENCY SPECIFIC CLAUSES FOR ALL
DEPARTMENT OF HEALTH CONTRACTS

1. If the CONTRACTOR is a charitable organization required to be registered with the New York State Attorney General pursuant to Article 7-A of the New York State Executive Law, the CONTRACTOR shall furnish to the STATE such proof of registration (a copy of Receipt form) at the time of the execution of this AGREEMENT. The annual report form 497 is not required. If the CONTRACTOR is a business corporation or not-for-profit corporation, the CONTRACTOR shall also furnish a copy of its Certificate of Incorporation, as filed with the New York Department of State, to the Department of Health at the time of the execution of this AGREEMENT.

2. The CONTRACTOR certifies that all revenue earned during the budget period as a result of services and related activities performed pursuant to this contract shall be used either to expand those program services funded by this AGREEMENT or to offset expenditures submitted to the STATE for reimbursement.

3. Administrative Rules and Audits:

a. If this contract is funded in whole or in part from federal funds, the CONTRACTOR shall comply with the following federal grant requirements regarding administration and allowable costs.

i. For a local or Indian tribal government, use the principles in the common rule, "Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments," and Office of Management and Budget (OMB) Circular A-87, "Cost Principles for State, Local and Indian Tribal Governments."

ii. For a nonprofit organization other than
   ♦ an institution of higher education,
   ♦ a hospital, or
   ♦ an organization named in OMB Circular A-122, “Cost Principles for Non-profit Organizations”, as not subject to that circular,


iii. For an Educational Institution, use the principles in OMB Circular A-110 and OMB Circular A-21, "Cost Principles for Educational Institutions."

iv. For a hospital, use the principles in OMB Circular A-110, Department of Health and Human Services, 45 CFR 74, Appendix E, "Principles for Determining Costs Applicable to Research and Development Under Grants and Contracts with Hospitals" and, if not covered for audit purposes by OMB Circular A-133, “Audits of States Local Governments and Non-profit Organizations”, then subject to program specific audit requirements following Government Auditing Standards for financial audits.
b. If this contract is funded entirely from STATE funds, and if there are no specific administration and allowable costs requirements applicable, CONTRACTOR shall adhere to the applicable principles in “a” above.

c. The CONTRACTOR shall comply with the following grant requirements regarding audits.

i. If the contract is funded from federal funds, and the CONTRACTOR spends more than $500,000 in federal funds in their fiscal year, an audit report must be submitted in accordance with OMB Circular A-133.

ii. If this contract is funded from other than federal funds or if the contract is funded from a combination of STATE and federal funds but federal funds are less than $500,000, and if the CONTRACTOR receives $300,000 or more in total annual payments from the STATE, the CONTRACTOR shall submit to the STATE after the end of the CONTRACTOR’s fiscal year an audit report. The audit report shall be submitted to the STATE within thirty days after its completion but no later than nine months after the end of the audit period. The audit report shall summarize the business and financial transactions of the CONTRACTOR. The report shall be prepared and certified by an independent accounting firm or other accounting entity, which is demonstrably independent of the administration of the program being audited. Audits performed of the CONTRACTOR’s records shall be conducted in accordance with Government Auditing Standards issued by the Comptroller General of the United States covering financial audits. This audit requirement may be met through entity-wide audits, coincident with the CONTRACTOR’s fiscal year, as described in OMB Circular A-133. Reports, disclosures, comments and opinions required under these publications should be so noted in the audit report.

d. For audit reports due on or after April 1, 2003, that are not received by the dates due, the following steps shall be taken:

i. If the audit report is one or more days late, voucher payments shall be held until a compliant audit report is received.

ii. If the audit report is 91 or more days late, the STATE shall recover payments for all STATE funded contracts for periods for which compliant audit reports are not received.

iii. If the audit report is 180 days or more late, the STATE shall terminate all active contracts, prohibit renewal of those contracts and prohibit the execution of future contracts until all outstanding compliant audit reports have been submitted.

4. The CONTRACTOR shall accept responsibility for compensating the STATE for any exceptions which are revealed on an audit and sustained after completion of the normal audit procedure.

5. FEDERAL CERTIFICATIONS: This section shall be applicable to this AGREEMENT only if any of the funds made available to the CONTRACTOR under this AGREEMENT are federal funds.

a. LOBBYING CERTIFICATION

1) If the CONTRACTOR is a tax-exempt organization under Section 501 (c)(4) of the Internal Revenue Code, the CONTRACTOR certifies that it will not engage in lobbying activities of any kind regardless of how funded.

2) The CONTRACTOR acknowledges that as a recipient of federal appropriated funds, it is subject to the limitations on the use of such funds to influence certain Federal contracting and financial
transactions, as specified in Public Law 101-121, section 319, and codified in section 1352 of Title 31 of the United States Code. In accordance with P.L. 101-121, section 319, 31 U.S.C. 1352 and implementing regulations, the CONTRACTOR affirmatively acknowledges and represents that it is prohibited and shall refrain from using Federal funds received under this AGREEMENT for the purposes of lobbying; provided, however, that such prohibition does not apply in the case of a payment of reasonable compensation made to an officer or employee of the CONTRACTOR to the extent that the payment is for agency and legislative liaison activities not directly related to the awarding of any Federal contract, the making of any Federal grant or loan, the entering into of any cooperative agreement, or the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan or cooperative agreement. Nor does such prohibition prohibit any reasonable payment to a person in connection with, or any payment of reasonable compensation to an officer or employee of the CONTRACTOR if the payment is for professional or technical services rendered directly in the preparation, submission or negotiation of any bid, proposal, or application for a Federal contract, grant, loan, or cooperative agreement, or an extension, continuation, renewal, amendment, or modification thereof, or for meeting requirements imposed by or pursuant to law as a condition for receiving that Federal contract, grant, loan or cooperative agreement.

3) This section shall be applicable to this AGREEMENT only if federal funds allotted exceed $100,000.

a) The CONTRACTOR certifies, to the best of his or her knowledge and belief, that:

♦ No federal appropriated funds have been paid or will be paid, by or on behalf of the CONTRACTOR, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal amendment or modification of any federal contract, grant, loan, or cooperative agreement.

♦ If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the CONTRACTOR shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying" in accordance with its instructions.

b) The CONTRACTOR shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

c) The CONTRACTOR shall disclose specified information on any agreement with lobbyists whom the CONTRACTOR will pay with other Federal appropriated funds by completion and submission to the STATE of the Federal Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions. This form may be obtained by contacting either the Office of Management and Budget Fax Information Line at (202) 395-9068 or the Bureau of Accounts Management at (518) 474-1208. Completed forms should be submitted to the New
York State Department of Health, Bureau of Accounts Management, Empire State Plaza, Corning Tower Building, Room 1315, Albany, 12237-0016.

d) The CONTRACTOR shall file quarterly updates on the use of lobbyists if material changes occur, using the same standard disclosure form identified in (c) above to report such updated information.

4) The reporting requirements enumerated in subsection (3) of this paragraph shall not apply to the CONTRACTOR with respect to:

a) Payments of reasonable compensation made to its regularly employed officers or employees;

b) A request for or receipt of a contract (other than a contract referred to in clause (c) below), grant, cooperative agreement, subcontract (other than a subcontract referred to in clause (c) below), or subgrant that does not exceed $100,000; and

c) A request for or receipt of a loan, or a commitment providing for the United States to insure or guarantee a loan, that does not exceed $150,000, including a contract or subcontract to carry out any purpose for which such a loan is made.

b. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE:

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by federal programs either directly or through State or local governments, by federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities where WIC coupons are redeemed. Failure to comply with the provisions of the law may result in the imposition of a monetary penalty of up to $1000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing this AGREEMENT, the CONTRACTOR certifies that it will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The CONTRACTOR agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

c. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

Regulations of the Department of Health and Human Services, located at Part 76 of Title 45 of the Code of Federal Regulations (CFR), implement Executive Orders 12549 and 12689 concerning debarment and suspension of participants in federal programs and activities. Executive Order 12549 provides that, to the extent permitted by law, Executive departments and agencies shall participate in a government-wide system for nonprocurement debarment and suspension. Executive Order 12689 extends the debarment and suspension policy to procurement activities of the federal government. A person who is debarred or suspended by a federal agency is excluded from federal financial and nonfinancial assistance and benefits under federal programs and activities, both directly (primary covered transaction) and indirectly (lower tier covered transactions). Debarment or suspension by one federal agency has government-wide effect.
Pursuant to the above-cited regulations, the New York State Department of Health (as a participant in a primary covered transaction) may not knowingly do business with a person who is debarred, suspended, proposed for debarment, or subject to other governmentwide exclusion (including any exclusion from Medicare and State health care program participation on or after August 25, 1995), and the Department of Health must require its prospective contractors, as prospective lower tier participants, to provide the certification in Appendix B to Part 76 of Title 45 CFR, as set forth below:

1) APPENDIX B TO 45 CFR PART 76-CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION-LOWER TIER COVERED TRANSACTIONS

Instructions for Certification

a) By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

b) The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered and erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

c) The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

d) The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

e) The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

f) The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction,” without modification, in all lower tier covered transactions.

g) A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded From Federal Procurement and Non-procurement Programs.

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h) Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

i) Except for transactions authorized under paragraph "e" of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

2) Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions

a) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department agency.

b) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

6. The STATE, its employees, representatives and designees, shall have the right at any time during normal business hours to inspect the sites where services are performed and observe the services being performed by the CONTRACTOR. The CONTRACTOR shall render all assistance and cooperation to the STATE in making such inspections. The surveyors shall have the responsibility for determining contract compliance as well as the quality of service being rendered.

7. The CONTRACTOR will not discriminate in the terms, conditions and privileges of employment, against any employee, or against any applicant for employment because of race, creed, color, sex, national origin, age, disability, sexual orientation or marital status. The CONTRACTOR has an affirmative duty to take prompt, effective, investigative and remedial action where it has actual or constructive notice of discrimination in the terms, conditions or privileges of employment against (including harassment of) any of its employees by any of its other employees, including managerial personnel, based on any of the factors listed above.

8. The CONTRACTOR shall not discriminate on the basis of race, creed, color, sex, national origin, age, disability, sexual orientation or marital status against any person seeking services for which the CONTRACTOR may receive reimbursement or payment under this AGREEMENT.

9. The CONTRACTOR shall comply with all applicable federal, State and local civil rights and human rights laws with reference to equal employment opportunities and the provision of services.

10. The STATE may cancel this AGREEMENT at any time by giving the CONTRACTOR not less than thirty (30) days written notice that on or after a date therein specified, this AGREEMENT shall be deemed terminated and cancelled.

11. Where the STATE does not provide notice to the NOT-FOR-PROFIT CONTRACTOR of its intent to not renew this contract by the date by which such notice is required by Section 179-t(1) of the State Finance Law, then this contract shall be deemed continued until the date that the agency provides the notice
required by Section 179-t, and the expenses incurred during such extension shall be reimbursable under the terms of this contract.

12. Other Modifications

a. Modifications of this AGREEMENT as specified below may be made within an existing PERIOD by mutual written agreement of both parties:

♦ Appendix B - Budget line interchanges;
♦ Appendix C - Section 11, Progress and Final Reports;
♦ Appendix D - Program Work Plan.

b. To make any other modification of this AGREEMENT within an existing PERIOD, the parties shall revise or complete the appropriate appendix form(s), and a Modification Agreement (Appendix X is the blank form to be used), which shall be effective only upon approval by the Office of the State Comptroller.

13. Unless the CONTRACTOR is a political sub-division of New York State, the CONTRACTOR shall provide proof, completed by the CONTRACTOR's insurance carrier and/or the Workers' Compensation Board, of coverage for

Workers' Compensation, for which one of the following is incorporated into this contract as Appendix E-1:

- **WC/DB-100**, Affidavit For New York Entities With No Employees And Certain Out Of State Entities, That New York State Workers' Compensation And/Or Disabilities Benefits Insurance Coverage is Not Required; OR

- **C-105.2** -- Certificate of Workers' Compensation Insurance. PLEASE NOTE: The State Insurance Fund provides its own version of this form, the **U-26.3**; OR

- **SI-12** -- Certificate of Workers' Compensation Self-Insurance, OR **GSI-105.2** -- Certificate of Participation in Workers' Compensation Group Self-Insurance

Disability Benefits coverage, for which one of the following is incorporated into this contract as Appendix E-2:

- **WC/DB-100**, Affidavit For New York Entities With No Employees And Certain Out Of State Entities, That New York State Workers' Compensation And/Or Disabilities Benefits Insurance Coverage is Not Required; OR

- **DB-120.1** -- Certificate of Disability Benefits Insurance OR

- **DB-155** -- Certificate of Disability Benefits Self-Insurance

14. Contractor shall comply with the provisions of the New York State Information Security Breach and Notification Act (General Business Law Section 899-aa; State Technology Law Section 208). Contractor shall be liable for the costs associated with such breach if caused by Contractor's negligent or willful acts or omissions, or the negligent or willful acts or omissions of Contractor's agents, officers, employees or subcontractors.
15. All products supplied pursuant to this agreement shall meet local, state and federal regulations, guidelines and action levels for lead as they exist at the time of the State's acceptance of this contract.

16. Additional clauses as may be required under this AGREEMENT are annexed hereto as appendices and are made a part hereof if so indicated on the face page of this AGREEMENT.
A. Ethical Considerations

The Empire State Stem Cell Board (ESSCB) stipulates that each awarded grant contract satisfy the following requirements:

In accepting an award from the New York State Department of Health for support from the Empire State Stem Cell Fund, the contracting organization shall ensure that each project investigator agrees to conform strictly to the codes of practice, regulations and laws governing ethical conduct of scientific research in his/her own laboratory/institution. He/she shall be solely responsible for any violation of these standards. If experimental procedures conducted pursuant to this project are performed in another state or country, either directly by the Principal Investigator (PI) and any co-investigators, or in collaboration with other persons, the PI and contracting organization shall ensure that such research complies with New York State laws and regulations that would be applicable to such research if performed in New York State. Representatives of the contracting organization will inform NYSTEM program administrators of any and all instances of actual or potential lapses in scientific integrity by any project participant as soon as this information becomes known to the contracting entity. The contracting organization is fully responsible for investigation of these instances.

B. Human Subjects Research

Human subjects research is essential to the continued advancement of scientific knowledge concerning stem cell biology. In carrying out such research, the rights and welfare of all individual research participants are of critical importance. Furthermore, additional safeguards must protect especially vulnerable research subjects, including minors, mentally disabled adults who lack capacity to provide informed consent to research participation, and prisoners.

Accordingly, no research study shall be approved for funding recommendation by ESSCB unless it is demonstrated that all the following requirements are satisfied:

- The research study will comply with New York State Public Health Law (PHL) Article 24-A, Sections 2440 to 2446, unless the research is subject to, and in compliance with, policies and regulations promulgated by any agency of the federal government for the protection of human subjects.

- The research study will comply with 45 CFR Part 46 (unless exempt from the requirements of this Part) and, if applicable, 21 CFR Parts 50 and 56; 21 CFR 312; 21 CFR 361; 21 CFR 812.

- The research study will comply with all other applicable federal and New York State laws, regulations and guidelines.

- The research study has been approved by an Institutional Review Board (IRB).
• If applicable, the applicant organization’s IRB has received, reviewed, and accepted written approval from an authorized representative of each site where the study will take place.

• The IRB has determined that the investigator will immediately withdraw a subject from the research study if continued participation would be detrimental to the subject’s well-being.

• The IRB will communicate to NYSTEM program administrators (i) any unanticipated problems involving risks to subjects, (ii) any serious or continuing noncompliance with IRB policy or requirements; and (iii) any suspension or termination of IRB approval of the research study.

**Vulnerable Populations**

Under Article 24-A of the New York State Public Health Law, research which has no prospect of providing direct benefit and posing more than minimal risk to research participants is prohibited for research participants who are minors, mentally disabled adults who lack capacity to provide informed consent to research participation, or prisoners. No research study in which any research participant is a minor, a mentally disabled adult who lacks capacity to provide informed consent to research participation or a prisoner shall be approved by ESSCB unless it is demonstrated to the Board, and the Board determines, that all the following requirements, in addition to the requirements set forth above, are satisfied:

• The IRB has determined that the research study constitutes either: research with a prospect of direct benefit to research participants; or research with no prospect of direct benefit to research participants that presents minimal risk.

• If the research involves one or more mentally disabled adult, each investigator must use IRB approved methodologies and procedures for initial capacity assessment of those individuals, including: procedures for notice to a prospective subject that his/her capacity to consent to research is under consideration; notice to a prospective subject of a determination that he/she lacks the capacity to consent to research; and the opportunity for a prospective subject to contest such a determination of incapacity through a second opinion and a judicial proceeding prior to enrollment in the research.

• The IRB has determined that, prior to involving in a research study a minor, a mentally disabled adult who lacks the capacity to provide informed consent to research participation, or a prisoner, each investigator will obtain such individual’s assent to research participation. ¹

The Department of Health reserves the right to revise or expand requirements applicable to human subjects research as part of negotiation of any contract arising from this request for applications.

¹A minor’s objection need not be honored if an independent physician determines that the research intervention or procedure holds out a prospect of direct benefit that is important to the health or well-being of the minor, and is available only within the context of the research.
C. Animal Use

ESSCB requires that all individuals and institutions that conduct research using animals supported by the Empire State Stem Cell Fund adhere to all federal, state and local laws pertaining to humane care and use of animals for research purposes. Research applications submitted to the Board for consideration must have been reviewed and approved by an Institutional Animal Care and Use Committee (IACUC) whose guidelines are in compliance with the U.S. Public Health Service’s Policy on Humane Care and Use of Laboratory Animals, and Guide for the Care and Use of Laboratory Animals, as well as any other federal, state and local laws or regulations (e.g., the federal Animal Welfare Act and its implementing regulations; and PHL Article 5, Title I, Sections 504 and 505-a).

D. Tissue

ESSCB will support research using human tissue and require that such research adhere to all federal, state and local laws and regulations pertaining to use of such tissue, including, but not limited to, 42 USC Section 289g et seq.; Public Health Law Article 5, Title V, sections 570 to 581; Article 24-A, sections 2440 to 2446; Article 43, sections 4301 to 4309; Article 43-B, sections 4360 to 4366; and 10 NYCRR Part 52.

E. Human Embryonic Stem Cell Research

1. **Scope.** The following types of research (“Human Stem Cell Research” or “HSC Research”) are subject to the requirements of this section.

   Research involving:

   a) human embryonic stem cells;

   b) human totipotent or pluripotent cells;

   c) human pluripotent stem cell lines;

   d) human neural and gonadal progenitor stem cells; or

   e) other human somatic tissues for stem cell research (excluding cells that remain restricted in tissue potential and are not known to possess totipotent or pluripotent potential).

2. **National Academy of Science (NAS) and International Society of Stem Cell Research (ISSCR) Guidelines.** HSC Research must comply with either NAS or ISSCR Guidelines to the extent applicable, and must also comply with any additional or conflicting requirements of this Contract.

a) HSC Research must be approved by an Embryonic Stem Cell Research Oversight (ESCRO) Committee that meets the standards set forth in the NAS or ISSCR Guidelines and in paragraph (d) below. However, research permissible without ESCRO Committee review under Category 1 of the ISSCR Guidelines or Section 1.2 (a) of the NAS Guidelines shall not require ESCRO review if notification is provided to the ESCRO Committee.

b) The ESCRO Committee shall be responsible for the initial and ongoing review and oversight of the research at the institution where the research is being conducted.

c) The ESCRO Committee shall ensure that research complies with either NAS or ISSCR Guidelines to the extent such Guidelines are applicable, and also complies with any additional or conflicting requirements of this Contract.

d) The ESCRO Committee shall create and follow written policies that include the following standards:

i) **Committee Membership:** The membership of the ESCRO Committee responsible for oversight for the contracting institution should have sufficient diversity among its members, including consideration of race, gender and background, and should be sensitive to such issues as community attitudes, to promote respect for its advice and counsel. The ESCRO Committee should be composed of qualified persons of both sexes. The members present at a meeting in which research funded under this contract is approved by the ESCRO Committee must include at least one scientist with relevant expertise and one ethicist. The purpose of diverse membership on the ESCRO Committee is to ensure that different perspectives are given a voice; the ESCRO Committee should encourage different perspectives and voices in its discussion of protocols and in its minutes.

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2 Category 1 of the ISSCR Guidelines (section 10.1) provides: “Experiments that are permissible after review under existing mandates and by existing local committees, and are determined to be exempt from full SCRO review. These will include experiments with pre-existing human embryonic stem cell lines that are confined to cell culture or involve routine and standard research practice, such as assays of teratoma formation in immune-deficient mice. We recommend that all institutions pursuing such research establish a mechanism capable of determining that a) these projects can be adequately reviewed by committees with jurisdiction over research on human tissues, animals, biosafety, radiation, etc. and b) that full review by a SCRO mechanism or body is not required. This mechanism should include a determination that the provenance of the human embryonic stem cell lines to be used has been scrutinized and deemed acceptable according to the principles outlined in this document, and that such research is in compliance with scientific, legal and ethical norms.”

Section 1.2(a) of the NAS Guidelines provides: “Purely in vitro hES cell research that uses previously derived hES cell lines is permissible provided that the ESCRO committee or equivalent body designated by the investigator’s institution (see Section 2.0) receives documentation of the provenance of the cell lines including (i) documentation of the use of an acceptable informed consent process that was approved by an Institutional Review Board (IRB) or foreign equivalent for their derivation (consistent with Section 3.6); and (ii) documentation of compliance with any additional required review by an Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee (IBC), or other institutionally mandated review.”
ii) **Conflict of Interest Policies**: The policies shall address conflicts of interest in a manner that is in alignment with other institutional conflict of interest policies, including, but not limited to, those governing the activities of the IRB. Such policies shall preclude a member from participating in the initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the ESCRO Committee.

iii) **Recordkeeping**: The policies shall address recordkeeping requirements for the activities of the ESCRO Committee and for research reviewed by the Committee that are in alignment with the policies developed by the institution’s IRB in accordance with the requirements of 45 CFR Part 46 and guidance issued by the Office for Human Research Protections. In addition, the ESCRO Committee shall develop and adhere to policies for maintaining records relating to the provenance of all stem cell lines used in funded research, consent of gamete donors, applicable ethical research standards, and reports of adverse or unexpected outcomes that pose a threat to the health or safety of any individual or raise new ethical issues. Records relating to the activities and review of the ESCRO Committee and to the research conducted shall be retained for at least six years after completion of the research. All records shall be accessible for inspection and copying by authorized representatives of the Department of Health at reasonable times and in a reasonable manner.

4. **Consent to Donation**: Consent to donate gametes or embryos to research must be obtained prior to donation. With respect to obtaining re-consent from gamete or embryo donors immediately prior to donation to research, the ESCRO Committee should apply the standards set forth in ISSCR Guidelines 11.2, but may choose to use the stricter NAS Guidelines.

5. **Payment**: The ESCRO Committee should review information, where available, regarding the payment of donors who produced gametes originally for reproductive purposes to ensure compliance with the ISSCR Guidelines 11.5(a). Where no such information is reasonably available, the ESCRO Committee need not ensure that payment history complies with either NAS or ISSCR Guidelines.

F. **Publication and Intellectual Property Rights**

1. It is ESSCB’s intent that the results of research it supports through its sponsorship be disseminated and made easily available to the research community and the lay public. Manuscript submission for publication of research funded by the Fund shall not be delayed by investigators or their research institutions for more than 60 days after the manuscript is completed. Research results are to be submitted promptly for publication in internationally recognized scientific journals, and not delayed for more than such time period for commercial reasons or any other reason not related to editorial delays needed to ensure scientific accuracy and presentation.
a. All publications reporting research supported by NYSTEM funds published in peer reviewed journals must be deposited in the National Institutes of Health National Library of Medicine’s PubMed Central (PMC). NYSTEM encourages investigators to sign copyright agreements that specifically allow the published manuscript to be deposited for public posting on PMC. As investigators are encouraged to publish NYSTEM-funded research findings as “open access” publications, contract funds may be used to cover costs required for such “open access” publication.

b. An electronic copy of each such publication must be filed with the progress report pursuant to the contract.

c. Within 60 days of publication, the investigator must submit to NYSTEM program administrators a 500 word abstract of the publication suitable for the general public, highlighting the research findings. A full literature citation and a brief biographical sketch of the NYSTEM-funded Principal Investigator must also be submitted. This information will be made available to the public through the NYSTEM website.

d. Support by the Empire State Stem Cell Fund shall be acknowledged in all publications, presentations and products of research in a form consistent with the publication’s guidelines, e.g.; “supported by the Empire State Stem Cell Fund through New York State Department of Health Contract # <<>>. Opinions expressed here are solely those of the author and do not necessarily reflect those of the Empire State Stem Cell Board, the New York State Department of Health, or the State of New York.”

2. It is ESSCB’s intent that the resources, materials and methods created through its sponsorship be disseminated and made easily available to the research community. All such materials described in invention disclosures, publications, or other public forums shall be made available to requesting investigators. The contractor may collect reasonable costs for provision of such resources and may require execution of appropriate material transfer agreements, licenses, or confidentiality agreements (see paragraph #4, below).

3. With regard to ESSCB funded research, where the grantee organization has not made reasonable efforts to protect the property interests or because the grantee has failed to share the research developments, the State shall retain march-in rights. The State shall have the right to a perpetual royalty-free, non-exclusive and irrevocable right to reproduce, publish or otherwise use, and to authorize others to use, for research and governmental purposes only, any published or otherwise reproducible material, device, invention, technique, material, or methodology developed under or in the course of performing this funded research, dealing with any aspect of the research activity, or of the results and accomplishments attained from the research.

4. The contractor must have written agreements with researchers requiring prompt disclosure of inventions made in the performance of ESSCB-funded research. Within 60 days of such disclosure the contractor shall notify NYSTEM of the invention disclosure. The contractor shall notify NYSTEM upon the filing of any patent application in the progress report pursuant to the contract. The contractor shall provide NYSTEM with advance written notice of any assignment or transfer of intellectual property rights generated as a result of research supported by the Fund. Any such assignment or transfer must acknowledge, and be subject to the rights retained by the State pursuant to the above paragraph #2.
Assignment and ownership allocation of intellectual and industrial property rights generated from research supported by the Fund is to be determined by the parties concerned (researchers, and their research organizations or institutions), consistent with organizational policies. Prior to execution of a negotiated contract, appropriate arrangements (existing or proposed) regarding intellectual and industrial property rights must be made by the contracting organization and communicated to NYSTEM program administrators. Such arrangements may include: provisions about dissemination of information such as disclosure and methods of publication, and provisions regarding ownership and exploitation of the results arising from the research supported by the Fund. However, to protect the State’s interests and to streamline invention reporting procedures, contracts between the New York State Department of Health and the contracting institution will, except to the extent inconsistent with this paragraph, incorporate the provisions of 37 CFR 401.14 with the following modifications throughout: Federal or Government will refer to New York State, and agency will refer to the Department of Health.

5. Contractor agrees, pursuant to the provisions of the New York State Administrative Procedure Act relating to access to data, added by Chapter 647 of the Laws of 1999, and Chapter 229 of the Laws of 2000, to provide the Department with the study, any data supporting that study, and the identity of the principal person or persons who performed such study. If such study is used as the basis for the promulgation, amendment, or repeal of a rule, regulation, or guideline used in enforcement of a statute, rule, or regulation, the study, any data supporting that study, and the identity of the principal person or persons who performed the study shall be subject to disclosure in accordance with the law.

G. Reporting Requirements

Scientific/Technical and Financial Reports shall be submitted as provided in Appendix C.

H. Equipment

Equipment may not be purchased within ninety (90) days of contract termination.

Upon satisfactory completion of the contract, as determined by the State Department of Health, all equipment purchased hereunder may be retained by the contractor.

I. Other Information

1. Documents submitted to the Department of Health on behalf of NYSTEM will not be returned to the applicant.

2. Appendix B (Budget) may be reviewed and revised each year, depending on research progress and the availability of funds.

3. The New York State Department of Health may require reimbursement of all or a part of the award if ineligible expenses have been incurred or inaccurate accounting statements have been submitted.
4. Neither the Department of Health nor the State of New York will assume any responsibility for any damage or injuries caused or resulting from research conducted with the financial support of the Fund.

5. Recipient entities accept auditing of their contract expenditures by an appointed representative of NYSTEM at any reasonable time.

6. Assurances and Certifications. The New York State ESSCB has adopted the following federal regulatory mechanisms to ensure responsible administration of its awards and to preserve the integrity of the research enterprise it supports. By signing this Grant Contract, the authorized representative of the organization certifies that, in addition to all applicable state and local statutes and regulations, the applicant organization will comply with applicable federal regulations and statutes, including but not limited to:

   a. **Vertebrate Animals:**
      - Animal Welfare Act as amended (7 USC 2131 et seq.), if applicable, and other federal statutes and regulations relating to animal care and use.

   b. **Research Misconduct:**
      - 42 CFR Part 50, Subpart A, “Responsibilities for PHS awardees and applicant institutions for dealing with and reporting possible misconduct in science.”
      - 42 CFR 94, “Public Health Service standards for the protection of research misconduct whistleblowers” (effective on the date set forth in the final rule).
      - Each covered institution must certify that it will comply with the above policies and the requirements of the Final Rule.
      - A copy of the institution’s Annual Report on Possible Research Misconduct (Form 6349), routinely sent to all PHS awardees by the Office of Research Integrity, shall be forwarded to NYSTEM program administrators.

   c. **Conflict of Interest**
      - 42 CFR 50, Subpart F, “Responsibility of applicants for promoting objectivity in research for which PHS funding is sought.”

7. The Department of Health reserves the right to revise or expand the requirements applicable to research conduct, as well as legal and administrative oversight.
# APPENDIX B
## BUDGET (sample format)

<table>
<thead>
<tr>
<th>BUDGET CATEGORY</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>TOTAL</th>
</tr>
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<tbody>
<tr>
<td>PERSONAL SERVICE (PS)</td>
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</tr>
<tr>
<td>1</td>
<td>SALARY AND STIPENDS</td>
<td></td>
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<tr>
<td>Position Title (separately list each position to be funded, indicating if position is vacant)</td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>FRINGE BENEFITS</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td>SUBTOTAL PS</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
### OTHER THAN PERSONAL SERVICE (OTPS)

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 4 | LAB SUPPLIES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | OFFICE SUPPLIES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | SUBTOTAL SUPPLIES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 5 | EQUIPMENT |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 6 | TRAVEL |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 7 | CONSULTANT COSTS |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | OTHER EXPENSES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 8 | CORE FACILITIES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | PUBLICATION |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | COMMUNICATION |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | MISC. OTHER EXPENSES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | SUBTOTAL OTHER EXPENSES |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 9 | SUBTOTAL OTPS | (sum of lines 4-8) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 10 | TOTAL PS & OTPS | (lines 3+9) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 11 | TOTAL SUBCONTRACT COSTS | (sum of line 14 of all subcontractor budgets) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 12 | TOTAL DIRECT COSTS | (lines 10+11) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 13 | FACILITIES AND ADMINISTRATIVE COSTS |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 14 | GRAND TOTAL COSTS | (sum of lines 12 + 13) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
APPENDIX C
PAYMENT AND REPORTING SCHEDULE
Shared Facilities/Resources and Equipment/Instrumentation for Stem Cell Research

I. Payment and Reporting Terms and Conditions

A. The State (NYS Department of Health) may, at its discretion, make an advance payment to the CONTRACTOR, during the initial or any subsequent PERIOD, in an amount to be determined by the STATE but not to exceed 25 percent of the maximum amount indicated in the budget as set forth in the most recently approved Appendix B. If this payment is to be made, it will be due thirty calendar days, excluding legal holidays, after the later of either:

- the first day of the contract term specified in the Initial Contract Period identified on the face page of the AGREEMENT or if renewed, in the PERIOD identified in the Appendix X, OR
- if this contract is wholly or partially supported by Federal funds, availability of the federal funds;

provided, however, that a STATE has not determined otherwise in a written notification to the CONTRACTOR suspending a Written Directive associated with this AGREEMENT, and that a proper voucher for such advance has been received in the STATE’s designated payment office. If no advance payment is to be made, the initial payment under this AGREEMENT shall be due thirty calendar days, excluding legal holidays, after the later of either:

- the end of the first monthly/quarterly period of this AGREEMENT; or
- if this contract is wholly or partially supported by federal funds, availability of the federal funds:

provided, however, that the proper voucher for this payment has been received in the STATE’s designated payment office.

B. No payment under this AGREEMENT, other than advances as authorized herein, will be made by the STATE to the CONTRACTOR unless proof of performance of required services or accomplishments is provided. If the CONTRACTOR fails to perform the services required under this AGREEMENT the STATE shall, in addition to any remedies available by law or equity, recoup payments made but not earned, by setoff against any other public funds owed to CONTRACTOR.

C. Any optional advance payment(s) shall be applied by the STATE to future payments due to the CONTRACTOR for services provided during the initial or subsequent PERIODS. Should funds for subsequent PERIODS not be appropriated or budgeted by the STATE for the purpose herein specified, the STATE shall, in accordance with Section 41 of the State Finance Law, have no liability under this AGREEMENT to the CONTRACTOR, and this AGREEMENT shall be considered terminated and cancelled.

D. The CONTRACTOR will be entitled to receive payments for work, projects, and services rendered as detailed and described in the Work Plan, Appendix D. All payments shall be in conformance with the rules and regulations of the Office of the State Comptroller.

E. The CONTRACTOR will provide the STATE with the reports of progress or other specific work products pursuant to this AGREEMENT as described in this Appendix below. In addition, a final report must be submitted by the CONTRACTOR no later than 60 days after the end of this AGREEMENT. All required reports or other work products developed under this AGREEMENT must
be completed as provided by the agreed upon work schedule in a manner satisfactory and acceptable to the STATE in order for the CONTRACTOR to be eligible for payment.

F. The CONTRACTOR shall submit to the STATE quarterly voucher claims and reports of expenditures on such forms and in such detail as the STATE shall require. The CONTRACTOR shall submit vouchers to the STATE’s designated payment office located in the:

NYS Department of Health  
Wadsworth Center, Room D350  
Extramural Grants Administration  
Empire State Plaza  
PO Box 509  
Albany, NY 12201-0509

All vouchers submitted by the CONTRACTOR pursuant to this AGREEMENT shall be submitted to the STATE no later than thirty (30) days after the end date of the period for which reimbursement is claimed (see Table I for annual schedule). In no event shall the amount received by the CONTRACTOR exceed the budget amount approved by the STATE, and, if actual expenditures by the CONTRACTOR are less than such sum, the amount payable by the STATE to the CONTRACTOR shall not exceed the amount of actual expenditures. All contract advances in excess of actual expenditures will be recouped by the STATE prior to the end of the applicable budget period.

G. If the CONTRACTOR is eligible for an annual cost of living adjustment (COLA), enacted in New York State Law, that is associated with this grant AGREEMENT, payment of such COLA shall be made separate from payments under this AGREEMENT and shall not be applied toward or amend amounts payable under Appendix B of this AGREEMENT.

Before payment of a COLA can be made, the STATE shall notify the CONTRACTOR, in writing, of eligibility for any COLA. The CONTRACTOR shall be required to submit a written certification attesting that all COLA funding will be used to promote the recruitment and retention of staff or respond to other critical non-personal service costs during the State fiscal year to which the cost of living adjustment was allocated, or provide any other such certification as may be required in the enacted legislation authorizing the COLA.

II. Progress and Final Reports

A. Semi-Annual Progress Report

The CONTRACTOR shall submit a semi-annual progress report using the forms and formats as provided by NYSTEM (found online at http://stemcell.ny.gov), summarizing the work performed during the period (see Table I for schedule). These reports shall detail the CONTRACTOR’s progress toward attaining the specific aims enumerated in the Work Plan (Appendix D).

Progress Reports shall be submitted via e-mail as MS Word attachments. Documents should be single-spaced, in Arial 12 font or similar. Tables, graphs, photographs, etc. should be sent as separate .bmp or .tif files attached to the e-mail. Publications, abstracts and other products resulting from Fund support during the reporting period should be attached as .pdf file to the e-mail. All reports and forms are to be sent to nystemgrants@wadsworth.org. The contract number and report being submitted shall be identified on the subject line of the e-mail (i.e., Contract # <<>>, Progress Report).
B. Expenditure Reports

The CONTRACTOR shall submit a detailed expenditure report by object of expense in the forms and formats as provided by NYSTEM (found online at http://stemcell.ny.gov) which shall accompany the voucher submitted for each period (see Table I for annual schedule). Documentation of all expenses shall be available upon request. The STATE may require documentation of expenses before payment of any voucher. No vouchers shall be paid until the corresponding progress report is received and approved pursuant to this AGREEMENT.

The CONTRACTOR shall submit all budget modification requests to the STATE for approval. All budget modification requests must be approved by the STATE prior to the commitment and expenditure of funds. All final budget modification requests must be submitted prior to the end of the budget period.

The CONTRACTOR shall submit the final voucher for the budget period no later than sixty (60) days after the end date of the budget period. The final voucher must be marked as “Final.”

In no case shall the final voucher for the contract be paid prior to the submission of the final progress report.

<table>
<thead>
<tr>
<th>Voucher / Report</th>
<th>Period Covered</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voucher 1</td>
<td>January 1 – March 31</td>
<td>April 30</td>
</tr>
<tr>
<td>Voucher 2</td>
<td>April 1 – June 30</td>
<td>July 30</td>
</tr>
<tr>
<td>Semi-Annual Report 1</td>
<td>January 1 – June 30</td>
<td>July 30</td>
</tr>
<tr>
<td>Voucher 3</td>
<td>July 1 – September 30</td>
<td>October 30</td>
</tr>
<tr>
<td>Voucher 4</td>
<td>October 1 – December 31</td>
<td>January 30</td>
</tr>
<tr>
<td>Semi-Annual Report 2</td>
<td>July 1 – December 31</td>
<td>January 30</td>
</tr>
</tbody>
</table>

C. Final Progress Report

The CONTRACTOR shall submit a detailed comprehensive final progress report not later than 60 days from the end of the contract, summarizing the work performed during the entire contract period, in the forms and formats as provided by NYSTEM (found online at http://stemcell.ny.gov). The final report shall be accepted in lieu of the last semi-annual report.
APPENDIX D

WORK PLAN

[The final approved Work Plan approved at the time of the award will be inserted here in the final contract document.]
This is an AGREEMENT between THE STATE OF NEW YORK, acting by and through NYS Department of Health, having its principal office at Albany, New York, (hereinafter referred to as the STATE), and ________________________ (hereinafter referred to as the CONTRACTOR), for amendment of this contract.

This amendment makes the following changes to the contract (check all that apply):

_____ Modifies the contract period at no additional cost
_____ Modifies the contract period at additional cost
_____ Modifies the budget or payment terms
_____ Modifies the work plan or deliverables
_____ Replaces appendix(es) ________ with the attached appendix(es)_________
_____ Adds the attached appendix(es) ________
_____ Other: (describe) ________________________________

This amendment is__ is not__ a contract renewal as allowed for in the existing contract.

All other provisions of said AGREEMENT shall remain in full force and effect.

Prior to this amendment, the contract value and period were:

$ __________________ From __/__/__ to __/__/__.
(Value before amendment) (Initial start date)

This amendment provides the following addition (complete only items being modified):

$ __________________ From __/__/__ to __/__/__.

This will result in new contract terms of:

$ __________________ From __/__/__ to __/__/__.

(All years thus far combined) (Initial start date) (Amendment end date)
IN WITNESS WHEREOF, the parties hereto have executed this AGREEMENT as of the dates appearing under their signatures.

CONTRACTOR SIGNATURE:

By: ________________________________ Date: __________________________
   (signature)
Printed Name: ________________________________
Title: __________________________________________

STATE OF NEW YORK
   )
   ) SS:
   )
County of __________

On the ___ day of __________ in the year ______ before me, the undersigned, personally appeared __________________________, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is(are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their/ capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

   __________________________
   (Signature and office of the individual taking acknowledgement)

STATE AGENCY SIGNATURE

"In addition to the acceptance of this contract, I also certify that original copies of this signature page will be attached to all other exact copies of this contract."

By: ________________________________ Date: __________________________
   (signature)
Printed Name: ________________________________
Title: __________________________________________

________________________________________

ATTORNEY GENERAL’S SIGNATURE

By: ________________________________ Date: __________________________

STATE COMPTROLLER’S SIGNATURE

By: ________________________________ Date: __________________________