



AAI RESTORE Grant Program

Funding Confirmation Form Instructions

The Funding Confirmation Form (FCF) is intended to provide AAI with accurate documentation of your research funding portfolio for the indicated fiscal year. Please review the following instructions before you fill out the FCF to ensure that you provide correct and complete funding information. **Any application submitted with an incomplete FCF will not be considered for the award.**

Explanation of Sections:

Sections A, B, and C are intended to provide a comprehensive picture of the current state of funding for your laboratory and for the project for which you are applying for an AAI RESTORE Grant. This information will help provide a better understanding of the magnitude of need, both for individual applicants and across the immunology community.

1. Section A reports all existing, active funding for your laboratory, **including any active funding for the project supported by the frozen/terminated federal grant** and funding for all other current research projects. **Please exclude any currently frozen or terminated federal grants, institutional start-up funding, and bridge funding. These are reported in separate sections.**
2. Section B reports all existing, active funding for the project supported by the frozen/terminated federal grant (i.e., the funding from section A which supports the project from the frozen/terminated grant AND any other funding, such as bridge funding, which is allocated explicitly for the project supported by the frozen/terminated grant).
3. Section C reports all federal grants in your laboratory that are terminated or currently frozen, including the grant for which you are applying to this program.
4. Section D reports the composition of your laboratory, including number of employees, positions, and employment status (e.g. full-time, part-time).
5. Section E reports institutional start-up funds only.
6. Section F reports institutional bridge funds only.

A filled-in sample of the “**Research Support**” portion of the FCF has been provided below for your reference in completing Sections A, B, and C:

Grant type/number	Funding organization	Funding period	Role (e.g., PI, co-I)	Direct costs for 1/1/25-12/31/25
Ex 1: R01 AI160-24	NIAID/NIH	9/5/24-8/31/29	PI	\$93,108
Ex 2: 156478913	NSF	2/5/23-5/8/26	Co-I	\$8,034
Ex 3: 14PAI16114	Amer. Heart Assoc.	No-cost ext.	PI	\$42,548
Ex 4: 14SIC184	Mclver's Cancer Trust	8/1/23-7/31/25	PI	\$80,000
Total				\$223,690

Instructions:

1. Please list all current active, frozen, or terminated mechanisms of support individually, including federal, state, and private grants. Attach additional sheets if needed.

2. For “Funding organization,” the names of well-known organizations, including government institutions and large non-profits, may be abbreviated (see **Ex 1-3** above), but please write out the names of less well-known funding bodies (see **Ex 4**).
3. Under “Funding period,” please write the total duration of the award from the start date to the end date using the format MM/DD/YY–MM/DD/YY (see **Ex 1-4**).
4. Under “Role,” please indicate your designated role for each funding mechanism. Common roles include PI, co-PI, co-I, collaborator, or consultant.
5. Under “Direct costs for 1/1/25-12/31/25” please indicate the amount of money allocated for direct costs from each funding mechanism, beginning 1/1/25 and ending 12/31/25.
 - a. For grants operating under no-cost extension, please specify the amount of funds remaining (see **Ex 3**).
 - b. For grants on which you are a co-I, please indicate only the amount of funds that are allocated for your specific research use. Do not provide the total amount of funds allocated to the group (see **Ex 2**).
 - c. Grants which provide salary support for you and your laboratory personnel should be included in the reported funding amounts.
 - d. If you have no funding, please indicate “no funding” and “\$0” for that section.
 - e. For start-up funding in section E, please estimate the start-up funds to be used from 1/1/25-12/31/25.
6. The FCF form must be signed by the department chair, dean, or another senior official to certify that the reported funding status is accurate. If you are the department chair or dean, your supervisor or another senior official must sign the form.