

EXHIBIT 34

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS

AMERICAN PUBLIC HEALTH
ASSOCIATION, *et al.*,

Plaintiffs,

v.

NATIONAL INSTITUTES OF HEALTH, *et
al.*,

Defendants.

Case No. 1:25-cv-10787-BEM

DECLARATION OF APHA MEMBER 10

I, Annelise Mennicke, pursuant to 28 U.S.C. § 1746, depose and say as follows:

1. I am an Associate Professor at the University of North Carolina, Charlotte School of Social Work.
2. I am offering this declaration in my individual capacity and not on behalf of my employer.
3. I received my Doctor of Philosophy and Master of Social Work from Florida State University in 2015 and 2011, respectively, and my Bachelor of Science in Psychology from the University of Florida in 2008.
4. My research is primarily centered on violence prevention, with an emphasis on sexual assault on college campuses. My current work aims to develop strategies that mitigate interpersonal violence, support survivors of sexual assault, and evolve effective prevention methods.
5. My dedication to this field originates not only from my three years of firsthand experiences as a volunteer victim's advocate at a rape crisis center in Florida but also from a deeply personal place—my father was murdered. This life-altering loss instilled in me a profound understanding of the devastating impact of violence. Having both personal and professional experience observing the lasting impacts of violence on individuals solidified my commitment to finding and

implementing evidence-based solutions to best support the healing process of survivors and reduce the chances of revictimization.

6. I have authored or co-authored over seventy peer-reviewed articles and book chapters. In addition to contributing to academic discourse, my work has also informed practical interventions and policies aimed at violence prevention.

7. Over the years, I have received numerous awards recognizing both my research and teaching excellence. These include the 2022 Faculty Excellence Award in Research Excellence, a 2021 nomination for the same, the 2020 Research and Scholarship Award, and multiple nominations for Professor of the Year and the CHHS Faculty Award. In 2018, I received the Dean's Faculty Research Innovation Award and the Junior Investigator Scholarship from the Academic Consortium on Criminal Justice Health. In 2015, I received the Student Award for Leadership and Service from the Group for the Advancement of Doctoral Education in Social Work for my work in bringing the Green Dot violence prevention program to Florida State University.

8. I have also received targeted funding to support my professional development and reduce student loan debt. I was a recipient of the NIH Loan Repayment Program from August 2022 through August 2024 and previously received the \$40,000 Faculty Loan Repayment Program award from HRSA in 2017. Additional support includes a Safe States Scholarship in 2017 for CDC-led training and other awards that have strengthened my contributions to research and public health.

9. I have served as Principal Investigator ("PI"), Co-PI, and Co-Investigator on a range of externally funded projects focused on violence prevention, substance use, and health equity. Currently, I'm a part of a \$469,069 NIAAA-funded project to rebuild a peer support program for sexual and gender minority survivors of sexual violence. I am also Co-PI on a three-year, \$415,769 grant from the National Institute on Alcohol Abuse and Alcoholism ("NIAAA") to develop and validate measures for the Bystander Intervention for Problematic Alcohol Use Model (BIPAUM), which is a phased approach that assesses the outcome and effectiveness of bystander intervention programs which aim to prevent problematic alcohol use. In addition, I serve as PI or Co-Investigator on major federally funded projects addressing suicide prevention, child sex trafficking, and women's health systems, including multi-year awards totaling more than \$3 million.

10. I am a member of the American Public Health Association and pay \$210 in annual dues.

11. On April 24, 2024, I received notice that my institution was awarded a R15 grant (a grant awarded to institutions with a small amount of NIH funding, to develop their research portfolio) from the NIAAA in support of my research, for over \$450,000 over a three-year period, to support my project titled *Reconstruction of an SGM-specific sexual violence peer support program*. This grant, which I spent six years developing, would also help to train students interested in research.

12. A true and correct copy of the notice of award is attached as Exhibit A.

13. This project researched ways to improve healing for sexual and gender minority survivors of sexual violence, given the substantially higher rates of sexual violence this community experiences compared to their heterosexual, cisgender peers. The project expanded upon the successful findings from one of my colleagues, who developed more generalized intervention approaches. The project consisted of three phases. The first phase aimed to conduct focus groups with sexual and gender minorities to modify the general intervention program content created by my colleague. The second phase aimed to distribute interventions to the community to determine if they were workable. The third phase would pilot a clinical trial to improve social reactions in comparison to a group who did not receive the intervention. If it showed significance, the modified intervention could help the most vulnerable victims feel safe enough to seek formal support and minimize the chances of revictimization.

14. This project was staffed by five undergraduate students and one graduate student.

15. I have spent countless hours over six years developing this project. The preparation was so intense that after completing my first application, I went out to celebrate just the act of submitting the application. The preparation consisted of researching, writing, and editing sections of my proposal on significance, innovation, and approach, as well as training opportunities and securing data. But NIH did not grant the award in response to this initial submission. I applied at least five times before my application was granted. Each time the application was sent back, I worked to incorporate feedback from NIH to adjust the parameters of the project to be completely in line with NIH historic goals, which emphasize incorporating marginalized communities into specific studies. The NIAAA specifically works on the connection between sexual assault and substance abuse, which is directly addressed in this study.

16. So far, we have nearly completed the first phase of the project. During that first phase, the project students worked with twenty-nine focus group participants. The participants were

members of the minority communities we are aiming to create new interventions for, and we presented ideas of approaches to the participants to solicit feedback on how they would respond.

17. On March 20, 2025, less than a year after NIH awarded this grant, I received a notice of grant termination stating that the award “no longer effectuates agency priorities.” A copy of this termination notice is attached as Exhibit B.

18. The termination notice does not include any individualized explanation for why the grant was cancelled, and it fails to discuss any of the data or analysis from our application, annual progress reports, or other related material. Instead, the notice includes the following language about its decision:

This award no longer effectuates agency priorities. Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,” no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Ex. B.

19. Prior to receiving this termination letter I was never given any notice that my grant was in jeopardy. In fact, the grant was on track to get a diversity supplement awarded.

20. I do not understand what the termination notice means by “gender identity,” nor do I understand how my project was “based on” “gender identity.” I also do not know what “biological realities” means in the notice. My project includes transgender participants, but was focused on studying the effectiveness of intervention tools.

21. My project included an SGM component in accordance with the priorities of NIH, which designate SGM as a health disparity population for research, indicating that research concerning this group is an important focus area. My project directly addressed the effectiveness and development of tools of intervention on this population, but was centered on the actual development and effectiveness of the tools and not on the concept of gender identity.

22. In my decade of research experience, before February 2025, I had never heard of an NIH grant getting terminated for anything other than fraud and misconduct.

23. I have never had a grant terminated by NIH before this one.

24. The impact of this termination on myself, my co-researchers, and my student staff is severe.

25. It is now uncertain whether my co-researchers and I will have the necessary funding to continue our critical research. While our institution has agreed to temporarily cover the salaries of the students who were working under this grant, this support is only short-term. Currently, the university is funding only one of the six students—a graduate student—while the undergraduate students will only be paid through the beginning of May 2025. At that point, absent sufficient funding for the project, these students will no longer be able to continue their work, which may effectively end their budding careers in research. I do not at this time anticipate being able to secure sufficient funding for this project after this short-term funding ceases.

26. This uncertainty has had a profound impact on the morale and well-being of the team. The students are not only grappling with the loss of financial stability but many of them are now questioning their decisions to pursue careers in public health—a field they once felt passionately committed to. Several are themselves sexual or gender minorities and feel personally attacked by the government, which has undermined their sense of belonging within the field. The research field cannot afford to lose young and eager researchers, especially ones with diverse backgrounds, which has immeasurable benefits to the field of scientific research and understanding.

27. The loss of this grant has also eliminated the \$4,728 that was allocated for my 2025 summer salary, meaning I will no longer be compensated for continuing this work during the summer months. As a result, I am faced with the difficult choice of either doing the work without compensation or seeking additional research contracts to make up for the lost income, taking away time to for this research. This disruption comes at a critical point in my career as I am actively working toward promotion from Associate Professor to Full Professor. This promotion is not only a recognition of my academic accomplishments, but also affects my future earning potential and academic prestige. The termination of this grant may impede the timely completion of my research, thereby jeopardizing my ability to achieve this promotion and negatively affecting my long-term career trajectory.

28. In addition to the uncertainty around my career and professional opportunities, the loss of funding is significantly impacting my personal life. I am having to reconsider significant life events

that I had planned, including a wedding and sending my child to pre-school, because I do not have an idea of how much money I will have after this termination.

29. This increased workload and lack of adequate funding makes it impossible to sustain the research project. If this project is not completed, I will be unable to achieve its essential goal—training individuals to respond more effectively when a sexual or gender minority discloses that they have been a victim of sexual violence.

30. Because of the termination of the award, we are not able to complete phase one of the project, meaning that we are unable to do anything with the data analyzed from our focus group responses. If we had sufficient funding, we would have been able to change the program based on the data and then track the effectiveness of the program adjustments. Instead, now that we have lost funding, the data will be analyzed but will not be able to be disseminated via publications and conference presentations, and we will not be able to effectively apply the lessons we have learned from the data, making it essentially useless for the purposes of this program intervention.

31. It is well documented that inadequate responses to such disclosures regularly retraumatize victims of sexual violence, which can, in turn, increase their vulnerability to further sexual violence. The cancellation of this grant has not only disrupted my professional trajectory but has also jeopardized vital work aimed at addressing an urgent public health issue.

32. There is currently a significant gap in interventions—particularly those that equip peers with the tools to respond effectively and compassionately to disclosures of sexual violence. While there are numerous formal interventions in place, when I speak to people on the ground, what I hear again and again is a yearning for something more practical and human: a training that truly prepares peers to handle these disclosures with care.

33. Our work aimed to fill that gap by creating an inclusive and genuinely effective intervention, designed with the most vulnerable members of our community in mind. If we can support those at greatest risk, the benefits will ripple outward—ultimately creating a safer, more empathetic environment for everyone. This approach not only aligns with values academic institutions claim to uphold, such as student well-being, equity, and community engagement, but also holds incredible potential for expansion. Once refined, it could be scaled into online programs and implemented broadly across college campuses, reaching students nationwide. The potential impact is both immediate and far-reaching. But now, because of this termination, the potential

benefits the research could provide will remain unrealized due to our inability to properly apply and assess data driven programmatic changes.

34. Tied to this R15 grant awarded is an application for a \$162,000 research supplement to promote diversity in health-related research, designed to support an early career trainee on our research team. The NIH program officer assigned to our project initially expressed concern that the trainee's project might be too broad in scope, but after the initial NIH review, we received a very positive review from the same NIH program officer. Soon after, NIH began sending requests for additional documentation—typically a sign that a Notice of Award was being prepared. Then, abruptly, all communication about the diversity supplement ceased after January 30, 2025.

35. For the past three months, there has been no update on the supplement's status, and during this period, the funding opportunity announcement expired. This grant would have fully supported the trainee's tuition and stipend through the completion of their dissertation, and its absence leaves both the student and our research program in a state of uncertainty and disruption. This supplemental work cannot be accomplished without the funds. Not only will the young researcher lose out on valuable research experience and development, but the project will suffer from not having enough staffing to adequately implement and track the effectiveness of the potential new intervention strategies identified in the focus groups.

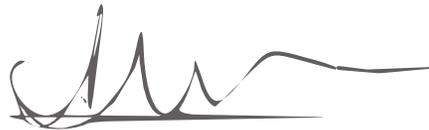
36. I supported the PI in appealing the termination of the R15 on April 17, 2025.

37. Even though we appealed the termination, I was uncertain how to address NIH's assessment that my project "no longer effectuates agency priorities," including because I do not understand in what sense my research is "*based on gender identity.*"

38. I also do not know whether my appeal has any chance of success, given the language of the termination notice that "[t]he premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities." Ex. B.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this 23 day of April, 2025.

A handwritten signature in black ink, appearing to read 'Annelise Mennicke', written over a horizontal line.

Annelise Mennicke

EXHIBIT A



<p>Recipient Information</p> <p>1. Recipient Name UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE, THE 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 28223</p> <p>2. Congressional District of Recipient 12</p> <p>3. Payment System Identifier (ID) 1560791228A1</p> <p>4. Employer Identification Number (EIN) 560791228</p> <p>5. Data Universal Numbering System (DUNS) 066300096</p> <p>6. Recipient's Unique Entity Identifier JB33DT84JNA5</p> <p>7. Project Director or Principal Investigator Jessamyn Bowling Assistant Professor jbowlin9@uncc.edu 980-500-9965</p> <p>8. Authorized Official Stafford Farmer</p>	<p>Federal Award Information</p> <p>11. Award Number 1R15AA030898-01A1</p> <p>12. Unique Federal Award Identification Number (FAIN) R15AA030898</p> <p>13. Statutory Authority 42 USC 241 42 CFR 52</p> <p>14. Federal Award Project Title Reconstruction of an SGM-specific sexual violence peer support program (SSS+)</p> <p>15. Assistance Listing Number 93.273</p> <p>16. Assistance Listing Program Title Alcohol Research Programs</p> <p>17. Award Action Type New Competing</p> <p>18. Is the Award R&D? Yes</p>
<p>Federal Agency Information</p> <p>9. Awarding Agency Contact Information Frann Gallogly</p> <p>NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM fgallogl@mail.nih.gov (301) 443-4706</p> <p>10. Program Official Contact Information Deidra Roach</p> <p>NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM droach@mail.nih.gov 301-443-5820</p>	<p>19. Budget Period Start Date 05/01/2024 – End Date 04/30/2027</p> <p>20. Total Amount of Federal Funds Obligated by this Action \$469,069</p> <p style="padding-left: 20px;">20 a. Direct Cost Amount \$304,590</p> <p style="padding-left: 20px;">20 b. Indirect Cost Amount \$164,479</p> <p>21. Authorized Carryover</p> <p>22. Offset</p> <p>23. Total Amount of Federal Funds Obligated this budget period \$469,069</p> <p>24. Total Approved Cost Sharing or Matching, where applicable \$0</p> <p>25. Total Federal and Non-Federal Approved this Budget Period \$469,069</p> <hr style="border-top: 1px dashed black;"/> <p>26. Project Period Start Date 05/01/2024 – End Date 04/30/2027</p> <p>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period \$469,069</p> <p>28. Authorized Treatment of Program Income Additional Costs</p> <p>29. Grants Management Officer - Signature Jeffrey Thurston</p>
<p>30. Remarks</p> <p>Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.</p>	

Notice of Award



ACADEMIC RESEARCH ENHANCEMENT AWARDS
Department of Health and Human Services
National Institutes of Health



NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

SECTION I – AWARD DATA – 1R15AA030898-01A1

Principal Investigator(s):

Jessamyn Bowling

Award e-mailed to: research@uncc.edu

Dear Authorized Official:

The National Institutes of Health hereby awards a grant in the amount of \$469,069 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to UNIVERSITY OF NORTH CAROLINA CHARLOTTE in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

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

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Institute On Alcohol Abuse And Alcoholism of the National Institutes of Health under Award Number R15AA030898. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

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

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

Sincerely yours,

Jeffrey Thurston
Grants Management Officer
NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Additional information follows

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

Salaries and Wages	\$203,998
Fringe Benefits	\$33,662
Personnel Costs (Subtotal)	\$237,660
Materials & Supplies	\$1,800
Travel	\$6,472
Other	\$45,797
Subawards/Consortium/Contractual Costs	\$12,861
Federal Direct Costs	\$304,590
Federal F&A Costs	\$164,479
Approved Budget	\$469,069
Total Amount of Federal Funds Authorized (Federal Share)	\$469,069
TOTAL FEDERAL AWARD AMOUNT	\$469,069
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$469,069

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$469,069	\$469,069

Fiscal Information:

Payment System Identifier: 1560791228A1
Document Number: RAA030898A
PMS Account Type: P (Subaccount)
Fiscal Year: 2024

IC	CAN	2024
AA	8470421	\$469,069

NIH Administrative Data:

PCC: AC DD / **OC:** 41021 / **Released:** Thurston, Jeffrey 04/15/2024
Award Processed: 04/24/2024 12:14:17 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 1R15AA030898-01A1

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

SECTION III – STANDARD TERMS AND CONDITIONS – 1R15AA030898-01A1

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

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

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

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of “Research and Development” at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that

some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

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

MULTI-YEAR FUNDED AWARD: This is a multi-year funded award. A progress report is due annually on or before the anniversary of the budget/project period start date of the award, in accord with the instructions posted at: <http://grants.nih.gov/grants/policy/myf.htm>.

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

This award has been assigned the Federal Award Identification Number (FAIN) R15AA030898. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

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

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

This award provides support for one or more clinical trials. By law (Title VIII, Section 801 of [Public Law 110-85](#)), the "responsible party" must register "applicable clinical trials" on the [ClinicalTrials.gov Protocol Registration System Information Website](#). NIH encourages registration of all trials whether required under the law or not. For more information, see http://grants.nih.gov/ClinicalTrials_fdaaa/

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

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

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

Unless an application for competitive renewal is submitted, a Final Research Performance Progress Report (Final RPPR) must also be submitted within 120 days of the period of performance end date. If a competitive renewal application is submitted prior to that date, then an Interim RPPR must be submitted by that date as well. Instructions for preparing an Interim or Final RPPR are at: https://grants.nih.gov/grants/rppr/rppr_instruction_guide.pdf. Any other specific requirements set forth in the terms and conditions of the award must also be addressed in the Interim or Final RPPR. *Note that data reported within Section I of the Interim and Final RPPR forms will be made public and should be written for a lay person audience.*

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

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

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

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

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

Treatment of Program Income:

Additional Costs

SECTION IV – AA SPECIFIC AWARD CONDITIONS – 1R15AA030898-01A1

Clinical Trial Indicator: Yes

This award supports one or more NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

SALARY LIMITATION: None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the applicable salary cap. Therefore, this award and/or future years are adjusted accordingly, if applicable. Current salary cap levels can be found at https://grants.nih.gov/grants/policy/salcap_summary.htm.

Progress reports for multi-year funded awards are due annually on or before the anniversary of the budget/project period start date of award. The reporting period for multi-year funded award progress reports is the calendar year preceding the anniversary date of the award. Information on the content of the progress report and instructions on how to submit the report are posted at <http://grants.nih.gov/grants/policy/myf.htm>.

DATA AND SAFETY MONITORING: This grant has been identified as requiring a Data and Safety Monitoring Plan (DSMP) in accordance with the NIAAA Data and Safety Monitoring Guidelines at <http://www.niaaa.nih.gov/research/guidelines-and-resources/data-and-safety-monitoring-guidelines>. The NIAAA Program Official named below has approved the DSMP as submitted by the grant recipient. Any changes in the DSMP must be reviewed and approved by the NIAAA Program Official.

NIAAA DATA ARCHIVE (NIAAADA) DATA SHARING REQUIREMENT: This award is subject to the data sharing guidance outlined in NOT-AA-23-002 (<https://grants.nih.gov/grants/guide/notice-files/NOT-AA-23-002.html>).

ANNUAL REPORTING

In addition to the RPPR and on the same schedule as the RPPR submission, an annual report including the elements listed below should be submitted via email from the Institutional AOR to the NIAAA Grants Management Specialist and Program Official named below.

In addition to your RPPR, please submit the following:

- Cumulative listing (no PHI)
 - o adverse events
 - o serious adverse events
 - o protocol deviations since last reporting period
- DSMB meeting updates/minutes (if applicable)
- Target milestone updates, if applicable
- Issues that could impact the study/completion of the grant
- Proposed resolution of issues

The following target milestones have been established and approved by the PO. Any revisions to approved milestones require PO concurrence and approval. Recruitment is anticipated to begin mm/yy and complete in ## year(s) and ## month(s).

Enrollment Milestones (n=228):

25% (n=57) = 03/25

50% (n=114) = 06/25

75% (n=171) = 08/25

100% (n=228) = 10/25

Data lock: 10/25

Data Management and Sharing Policy: Applicable

This project is expected to generate scientific data. Therefore, the [Final NIH Policy for Data Management and Sharing](#) applies. The approved Data Management and Sharing (DMS) Plan is hereby incorporated as a term and condition of award, and the recipient shall manage and disseminate scientific data in accordance with the approved plan. Any significant changes to the DMS Plan (e.g., new scientific direction, a different data repository, or a timeline revision) require NIH prior approval. Failure to comply with the approved DMS plan may result in suspension and/or termination of this award, withholding of support, audit disallowances, and/or other appropriate action. See NIH Grants Policy Statement [Section 8.2.3](#) for more information on data management and sharing expectations.

SPREADSHEET SUMMARY**AWARD NUMBER:** 1R15AA030898-01A1**INSTITUTION:** UNIVERSITY OF NORTH CAROLINA CHARLOTTE

Budget	Year 1
Salaries and Wages	\$203,998
Fringe Benefits	\$33,662
Personnel Costs (Subtotal)	\$237,660
Materials & Supplies	\$1,800
Travel	\$6,472
Other	\$45,797
Subawards/Consortium/Contractual Costs	\$12,861
TOTAL FEDERAL DC	\$304,590
TOTAL FEDERAL F&A	\$164,479
TOTAL COST	\$469,069

Facilities and Administrative Costs	Year 1
F&A Cost Rate 1	54%
F&A Cost Base 1	\$304,590
F&A Costs 1	\$164,479

EXHIBIT B



National Institutes of Health
Office of Extramural Research

March 20, 2025

Stafford Farmer
The University of North Carolina at Charlotte
research@uncc.edu

Dear Stafford Farmer:

Effective with the date of this letter, funding for Project Number 1R15 AA030898-01A1 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on May 1, 2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”³

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.”⁴ According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.”⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”⁶ no corrective action is possible here. The premise of this award is incompatible with

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

⁶ 2024 Policy Statement at IIA-156.

agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

Michelle G. Bulls, on behalf of Judy Fox, Chief Grants Management Officer, National Institute on Alcohol Abuse and Alcoholism
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)