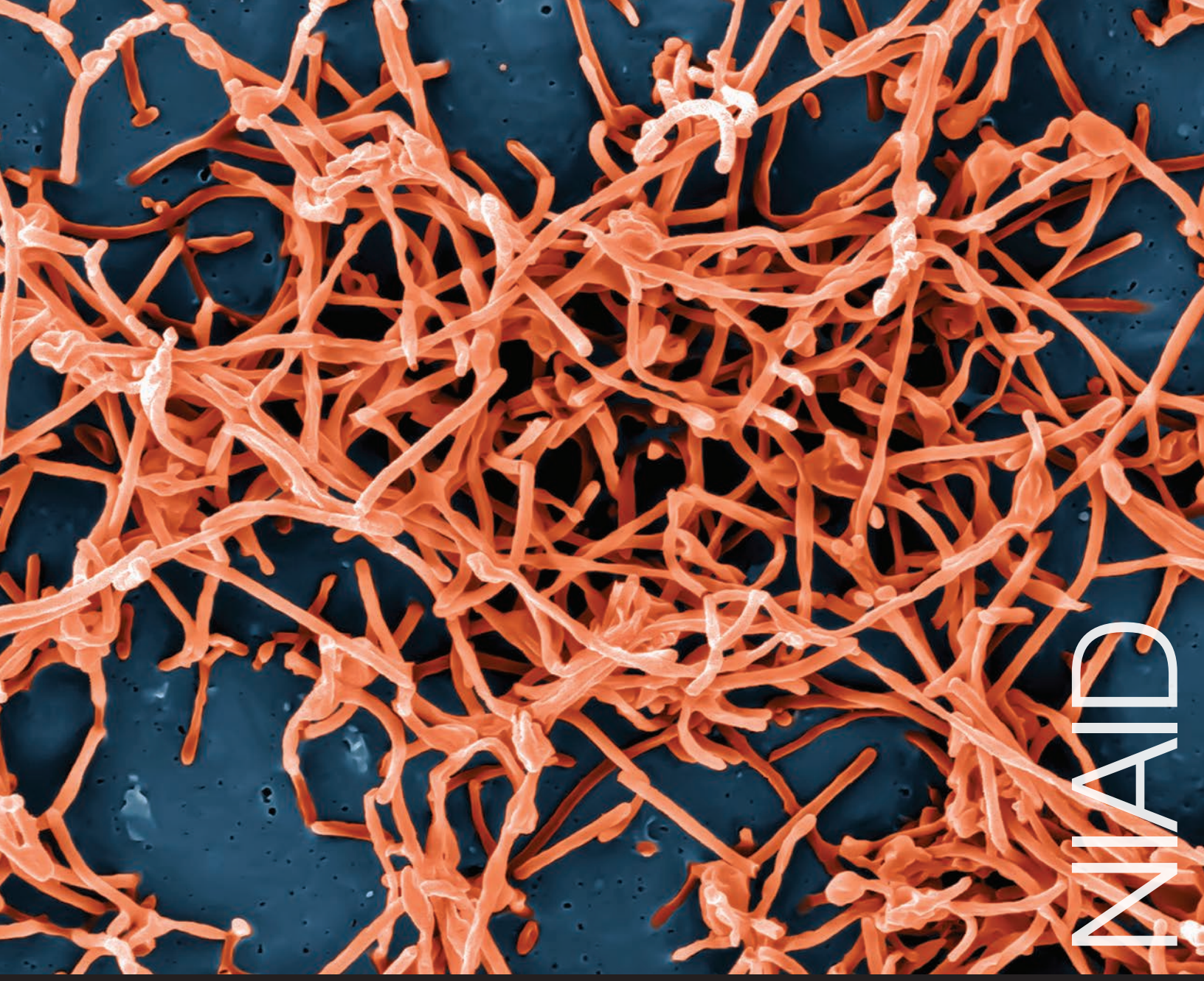


Fiscal Year 2015 Fact Book

National Institute of Allergy and Infectious Diseases

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
National Institute of Allergy and Infectious Diseases

NIAID Mission

The mission of the National Institute of Allergy and Infectious Diseases is to conduct and support basic and applied research to better understand, treat, and ultimately prevent infectious, immunologic, and allergic diseases.

(Cover) Colorized scanning electron micrograph of Ebola virus particles (red) in extracellular space between infected African green monkey kidney cells.

All images are courtesy of the National Institute of Allergy and Infectious Diseases.

National Institute of Allergy and Infectious Diseases

Fiscal Year 2015 Fact Book

National Institute of
Allergy and
Infectious Diseases

NIH Publication No. 16-AI-7365
May 2016

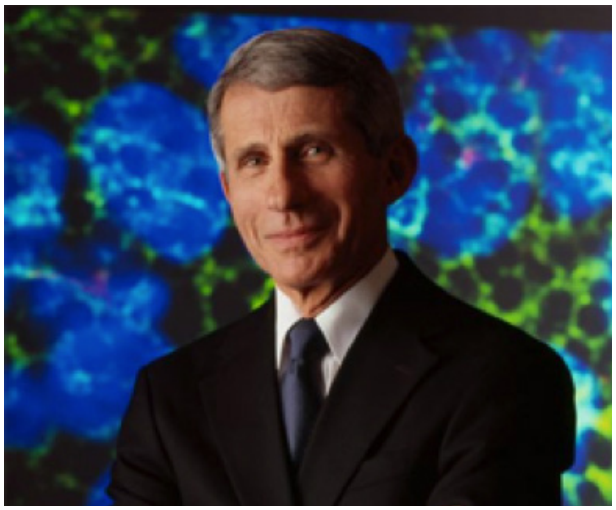
Contents

Letter From the Director

The National Institute of Allergy and Infectious Diseases (NIAID) conducts and supports research to better understand, diagnose, treat, and ultimately prevent infectious, immunologic, and allergic diseases. NIAID supports research ranging from studies of the fundamental mechanisms of infectious and immunologic diseases to applied studies aimed at developing and testing new diagnostics, therapeutics, and vaccines. The *Fiscal Year 2015 Fact Book* focuses on a highly productive year. NIAID accomplishments promise to improve public health while advancing the fundamental scientific discoveries that are the foundation for future progress.

NIAID's long-term investment in HIV/AIDS research continues to lead us closer to an "AIDS-free generation," in which new HIV infections, as well as illness and death due to AIDS, are rare. A decade of well-designed studies of antiretroviral therapy (ART) regimens culminated this year, with the release of results from the major international Strategic Timing of Antiretroviral Treatment (START) study. The study showed that when individuals with HIV initiated ART as soon as they were diagnosed, their overall risk of developing AIDS and other serious illnesses was reduced considerably compared to those who delayed therapy. In light of these data, the World Health Organization (WHO) recommended that all HIV-infected persons be treated immediately to improve their health and prevent transmission of the virus to others. To end the HIV pandemic, however, both a cure for HIV and a vaccine that provides durable protection against infection are essential. An HIV cure will involve strategies that either eradicate the virus completely or, more likely, suppress the virus to the point where an individual can suspend ART without the virus rebounding. With this goal in mind, NIAID is supporting research to learn more about persistent hiding places or "reservoirs" of HIV and how antiretroviral therapies affect these sites. In the quest for an HIV vaccine, NIAID is building on the results of the RV144 HIV vaccine trial, which was the first to show modest protection against HIV.

Vaccines are critical tools in protecting the public against other infectious diseases, including emerging and re-emerging infections. One of



NIAID Director Anthony S. Fauci, M.D. Credit: NIAID

NIAID's top priorities is to improve the efficacy of influenza vaccines and ultimately to develop a "universal" influenza vaccine that can protect against diverse influenza strains. In 2015, NIAID scientists reported the development of an experimental nanoparticle vaccine incorporating an influenza virus component that varies little among different viral strains—research that is bringing us closer to the development of a universal flu vaccine. Vaccines also are a vital part of our global health efforts.

With increasing movement of people and goods, many infectious diseases are spreading across the globe. Ongoing NIAID research on a variety of emerging infections, such as those caused by the chikungunya, dengue, and Zika viruses, provides the foundation for developing effective medical countermeasures and strategies and enables swift research responses to disease outbreaks. This capacity came into dramatic focus with the unprecedented Ebola outbreak in West Africa. NIAID scientists working with international partners—including health ministries in Liberia, Guinea, and Sierra Leone—have traveled repeatedly to Africa to advance critical research toward possible treatments, develop and test vaccines, and strengthen diagnostic capability in the field to help staunch the spread of the deadly Ebola virus disease (EVD). To stem the outbreak, NIAID launched a clinical research partnership between the United States and Liberia known as the Partnership for Research on Ebola Vaccines

in Liberia (PREVAIL). In PREVAIL I, scientists working with pharmaceutical companies showed that two experimental vaccines developed with NIAID support are safe and capable of inducing a significant immune response against the virus. In the PREVAIL II study, scientists compared the safety and efficacy of optimized standard of care alone to optimized standard of care coupled with the candidate Ebola therapy, ZMapp. A first look at results from PREVAIL II showed that the treatment is well tolerated and suggests it may hold some promise as an Ebola treatment, although not enough patients were enrolled to provide a definitive answer. PREVAIL III is an observational study focusing on EVD survivors and their contacts. Study investigators hope to gain insights into the long-term health consequences of EVD, learn whether survivors are protected from future Ebola infection, determine how long the virus may persist within certain protected sites within the body such as the genitourinary system, and observe whether sexual transmission of EVD can occur.

In 2015, the growing problem posed by antibiotic-resistant pathogens received attention from the highest levels of the U.S. government when the White House released its *National Action Plan for Combating Antibiotic-Resistant Bacteria*. NIAID plays a key role in advancing the goals of the White House initiative through research to understand how microbes develop resistance and studies to identify novel ways to combat them; translation of laboratory findings into potential treatments, vaccines, and new diagnostic tests; clinical validation of diagnostic tests; and clinical trials to evaluate vaccines and new and existing therapies against drug-resistant microbes. In an exciting discovery this year, NIAID-supported researchers used an innovative screening method to discover a novel antibiotic called teixobactin in soil. Teixobactin appears to be a potent killer of a broad range of bacteria, including *Staphylococcus aureus*, *Streptococcus pneumoniae*, and *Mycobacterium tuberculosis*, and NIAID is supporting work to develop this molecule into a novel therapeutic. The research that unearthed teixobactin also may lead to the identification of additional antibiotics that can avoid the development of resistance.

NIAID is committed to improving treatment and prevention of immune-mediated disorders, including asthma, allergic diseases, autoimmunity, and rejection of transplanted organs, tissues, and cells. Immune-mediated disorders result in significant chronic disease and disability and can impose large social and financial burdens on patients and their families. By conducting basic and clinical research, the Institute is working to further delineate the mechanisms of immune function and to develop and test novel approaches to suppress aberrant immune responses or enhance beneficial ones. For example, peanut allergy is an increasing global health problem affecting between 1 and 3 percent of children in many westernized countries. This year, the NIAID Immune Tolerance Network (ITN) released clinical trial results that transformed our understanding of peanut allergy prevention. ITN researchers showed that introducing peanut-containing foods into the diets of high-risk infants at an early age was safe and reduced their risk of developing peanut allergy by 81 percent by age 5. Based on this research, NIAID is convening an expert panel to develop an addendum to the 2010 *Guidelines for the Diagnosis and Management of Food Allergy in the United States*, which will be published in 2016. This addendum will address prevention of peanut allergy through early peanut introduction.

The *Fiscal Year 2015 Fact Book* summarizes the financial policies and mechanisms that enable the Institute to support research and training activities critical to advancing the NIAID mission. Through basic, applied, and clinical research, the Institute will continue to advance the development of vaccines, therapeutics, and diagnostics to improve health and save millions of lives throughout the world.

/Anthony S. Fauci/

Anthony S. Fauci, M.D.
Director, National Institute of Allergy and Infectious Diseases
National Institutes of Health

Organizational Overview

National Institute of Allergy and Infectious Diseases

Additional information about NIAID's organizational structure can be found at: **http://www.niaid.nih.gov/about/organization/Pages/default.aspx.**

NIAID—A Year in Review

NIAID was appropriated $4.4 billion in FY 2015, a period that spanned October 1, 2014 to September 30, 2015. The appropriation enabled continuing research efforts to better understand, identify, treat, and ultimately prevent infectious, immunologic, and allergic diseases and to develop new therapies, vaccines, and diagnostic tests.

NIAID's primary commitment is to scientific studies proposed by researchers (considered investigator-initiated or unsolicited research) who work in universities, medical schools, and other research institutions across the United States and abroad, with an appropriate balance for NIAID research areas identified as high priority by NIAID.

The *Fact Book* summarizes how FY 2015 funding was distributed among NIAID research programs and funding mechanisms, provides comparisons with prior year allocations, and outlines the funding policies influencing grant awards.

Budget Highlights

- NIAID received $4.4 billion in appropriated funds, an increase of $16 million over FY 2014. This excludes the emergency Ebola funding of $238 million in FY 2015.
- NIAID distributed funds similarly across the three mission areas: Biodefense and Emerging Infectious Diseases (BioD), 36.5 percent; HIV/AIDS, 35.9 percent; and Infectious and Immunologic Diseases (IID), 27.6 percent.
- Approximately 82 percent of the total NIAID budget was awarded to the extramural research community. This includes 58.8 percent to Research Project Grants (RPGs), 19.3 percent to Research and Development (R&D) contracts, and 3.4 percent to research centers, training, and other research.
- NIAID increased funding for RPGs by $52.7 million over FY 2014, allowing the Institute to fund a total of 4,027 RPGs in FY 2015.
- The average cost per competing RPG remained relatively unchanged from an adjusted level of $458,000 in FY 2014 to $454,000 in FY 2015.
- Approximately 25 percent of competing R01 awards were made to new investigators, defined as principal investigators (PIs) who have not previously competed successfully as a PI for a significant NIH independent research award.
- NIAID was able to maintain a success rate of 21.4 percent for competing RPG applications, a rate higher than the overall NIH success rate of approximately 18.3 percent.
- The Institute's intramural research program comprised 12 percent of the total NIAID budget.
- NIAID supported 782 international projects in 111 countries, totaling approximately $437 million.

Financial Management Plan

Pursuant to NIH budget policy:

- Renewal Grants: Capped at 20 percent—applicants could request up to 20 percent more than the funding level of the previous grant.
- Noncompeting Awards: Funded at fully committed levels.
- Competing Applications: Awarded without any programmatic reductions.

Traditionally, NIAID sets aside funds for selective pay and Bridge awards:

- Selective pay: NIAID set aside $9 million ($3 million for each extramural program division). Note: Investigators could not apply for selective pay funding but had to be nominated by NIAID program officers.
- R56 Bridge awards: NIAID set aside $18 million ($6 million for each extramural division). Note: Investigators could not apply for R56 Bridge awards but rather had to be nominated by NIAID program officers.

NIAID Appropriations History: FY 2006 – FY 2015

Funding

Dollars in Thousands

Fiscal Year	President's Budget to Congress	Appropriation[1]
2006	$ 4,459,395[2]	$ 4,414,801[3]
2007	4,395,496[2]	4,417,208[3]
2008	4,592,482[4]	4,583,344[5]
2009	4,568,778[4]	4,702,572[4]
2010	4,760,295[4]	4,818,275[4]
2011	4,977,070[6]	4,775,968[6]
2012	4,915,970	4,490,711
2013	4,495,307	4,256,327
2014	4,578,813	4,401,196[7]
2015	4,423,357	4,417,558[7]

Excludes Recovery Act funds (FYs 2009 and 2010) and emergency Ebola funding of $238 million in FY 2015.

[1] Equals "adjusted appropriation" as documented in the Congressional Justification except where noted.

[2] Includes $100 million for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

[3] Includes $99 million for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

[4] Includes $300 million for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

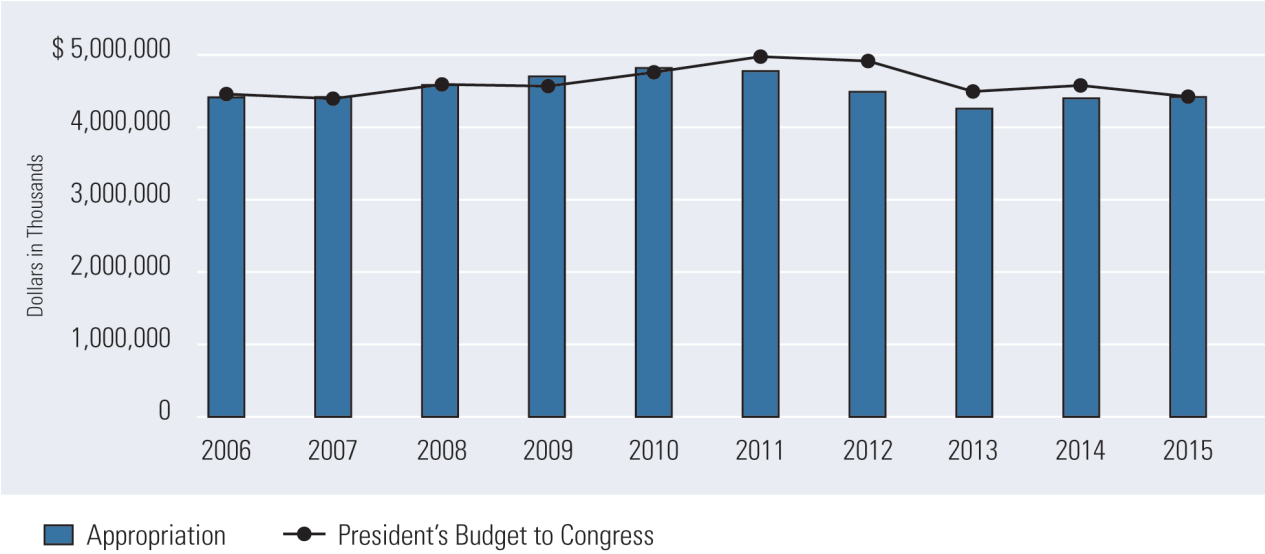
[5] Includes $295 million for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

[6] Includes $297 million for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

[7] Includes OAR HIV/AIDS (FY 2014 = $39,826; FY 2015 = $58,717) and National Children's Study (FY 2014 = $14,326) transfers.

NIAID Appropriations History: FY 2006 – FY 2015

Funding



Funding for NIAID falls into three mission areas:

- Biodefense and Emerging Infectious Diseases (BioD)
- HIV/AIDS
- Infectious and Immunologic Diseases (IID)

NIAID Actual Obligations by Mission Area: FY 2006 – FY 2015

Funding

Dollars in Thousands

Fiscal Year	Mission Area			Total[1]
	BioD	HIV/AIDS	IID	
2006[2]	$ 1,646,702	$ 1,488,377	$ 1,276,689	$ 4,411,768
2007[2]	1,596,565	1,490,089	1,276,380	4,363,034
2008[2]	1,602,353	1,497,722	1,481,135	4,581,210
2009[2]	1,640,728	1,541,074	1,519,654	4,701,456
2010[2]	1,679,215	1,577,322	1,559,518	4,816,055
2011[2]	1,664,854	1,563,349	1,539,978	4,768,181
2012	1,665,546	1,572,973	1,247,950	4,486,469
2013	1,572,008	1,481,621	1,181,465	4,235,094
2014	1,614,295	1,563,878	1,223,012	4,401,185
2015	1,610,560	1,586,804	1,220,165	4,417,529

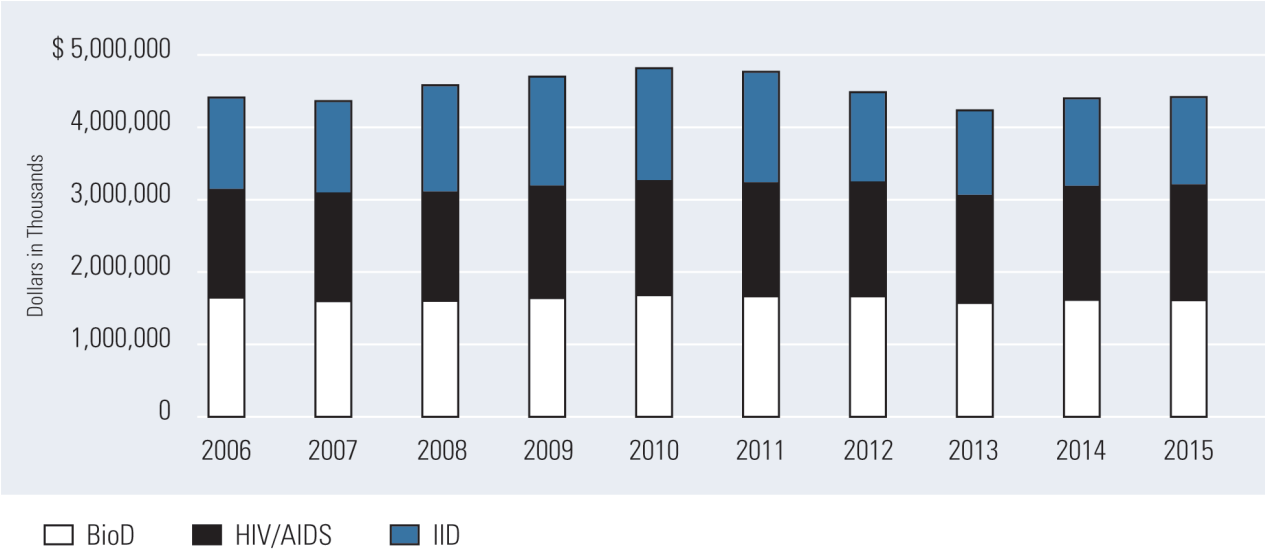
Excludes Recovery Act funds (FYs 2009 and 2010) and emergency Ebola funding of $238 million in FY 2015.

[1] NIAID obligations shown above differ from Fiscal Year Appropriations due to mandated transfers documented in the Congressional Justification.

[2] Includes Global Fund to Fight AIDS, Tuberculosis and Malaria.

NIAID Mission Areas: FY 2006 – FY 2015

Funding



NIAID Funding by Budget Mechanism: FY 2014 and FY 2015

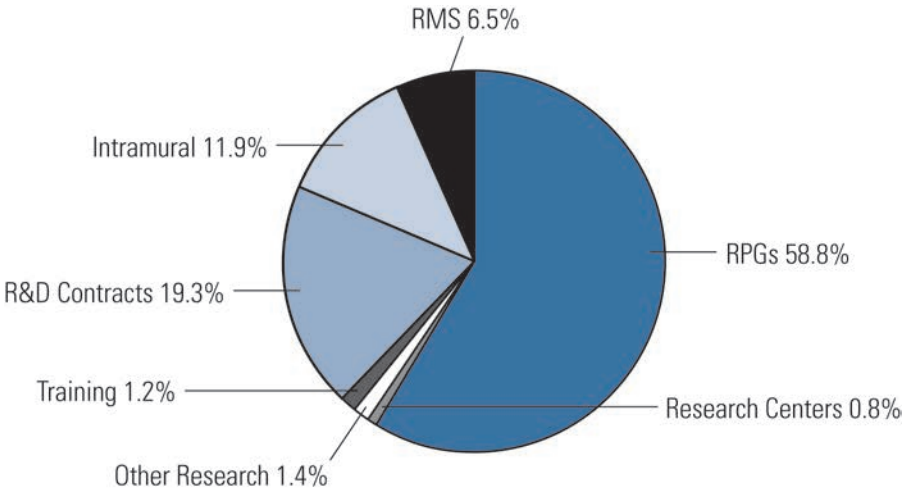
Dollars in Thousands

	FY 2014	% of Total	FY 2015	% of Total
Extramural Research Activities				
Research Project Grants (RPGs)				
Noncompeting	$ 1,441,745		$ 1,897,799	
Competing	979,422		577,371	
Subtotal, RPGs	**$ 2,421,167**		**$ 2,475,170**	
SBIR/STTR[1]	122,253		120,915	
Total Funding for RPGs	**$ 2,543,420**	**57.8%**	**$ 2,596,085**	**58.8%**
Research Centers	39,235	0.9	36,453	0.8
Other Research	53,313	1.2	60,313	1.4
Training	54,029	1.2	54,809	1.2
R&D Contracts	914,867	20.8	854,744	19.3
Subtotal, Extramural	**$ 3,604,864**	**81.9%**	**$ 3,602,404**	**81.5%**
Intramural	521,726	11.9	527,037	11.9
Research Management and Support (RMS)	274,595	6.2	288,088	6.5
NIAID Total	**$ 4,401,185**	**100.0%**	**$ 4,417,529**	**100.0%**

Reflects actual obligations.

[1] SBIR/STTR programs are congressionally mandated.

NIAID Funding by Budget Mechanism: FY 2015



Research Project Grants (RPGs) are awards made for investigator-initiated research proposals and/or in response to a funding or program announcement. Several types of awards are made in this category, including those in the R (single grant), P (multi-project grant), and U (cooperative agreements) series. RPGs are awarded to organizations of all types, including universities, colleges, and small businesses, for-profit, foreign, and domestic. For more information on RPGs, visit **http://grants.nih.gov/grants/funding/r01.htm.**

NIAID Research Project Grants: FY 2014 and FY 2015

Dollars in Thousands

	FY 2014 Number of Awards	FY 2014 Amount	FY 2015 Number of Awards	FY 2015 Amount
Research Project Grants				
Noncompeting	2,453	$ 1,441,745	2,525	$ 1,897,799
Competing	1,257	979,422	1,272	577,371
Subtotal, RPGs	**3,710**	**$ 2,421,167**	**3,797**	**$ 2,475,170**
SBIR/STTR [1]	235	122,253	230	120,915
Total Funding for RPGs	**3,945**	**$ 2,543,420**	**4,027**	**$ 2,596,085**
For Competing Grants				
Grants within paylines:				
Traditional R01	280	$ 128,468	351	$ 167,235
Non-R01	336	82,059	524	122,672
Program Projects (P01)	9	17,740	11	21,106
Subtotal, Grants Within Paylines	**625**	**$ 228,267**	**886**	**$ 311,013**
Discretionary [2]	377	174,844	272	105,428
RFA Grants	255	576,311	114	160,930
Total, Competing Grants	**1,257**	**$ 979,422**	**1,272**	**$ 577,371**
Funding success rate	21.9%		21.4%	
Percentile funding for R01 grants	10.0		12.0	
Percentile funding for new investigators	14.0		16.0	
Average cost—competing RPGs [3]		$ 779		$ 454

[1] The SBIR/STTR programs are congressionally mandated.

[2] Discretionary includes administrative supplements, bridge pool, division discretionary pool, end-of-year, and selective pay.

[3] The average FY 2014 cost of $779K per grant includes large grant awards such as the AIDS Clinical Trial Network and awards that were previously competed as contracts or Center grants such as the Centers of Excellence for Translational Research. Excluding those awards the average cost was $458K per grant in FY 2014.

Breakout of Total RPG Funds: FY 2015 Total $2,596,085

RPG	Percent of Total
P01	4.7
R01	39.4
R03	0.3
R21	7.6
R33	1.1
R56	1.8
U01	4.8
U19	13.3
UM1	15.5
SBIR/STTR	4.7
Other*	6.9

* Other (DP1, DP2, DP5, R00, R15, R34, R37, UC7, UH2, UM2 awards)

Competing and Noncompeting RPG Awards: FY 2006 – FY 2015

Dollars in Thousands

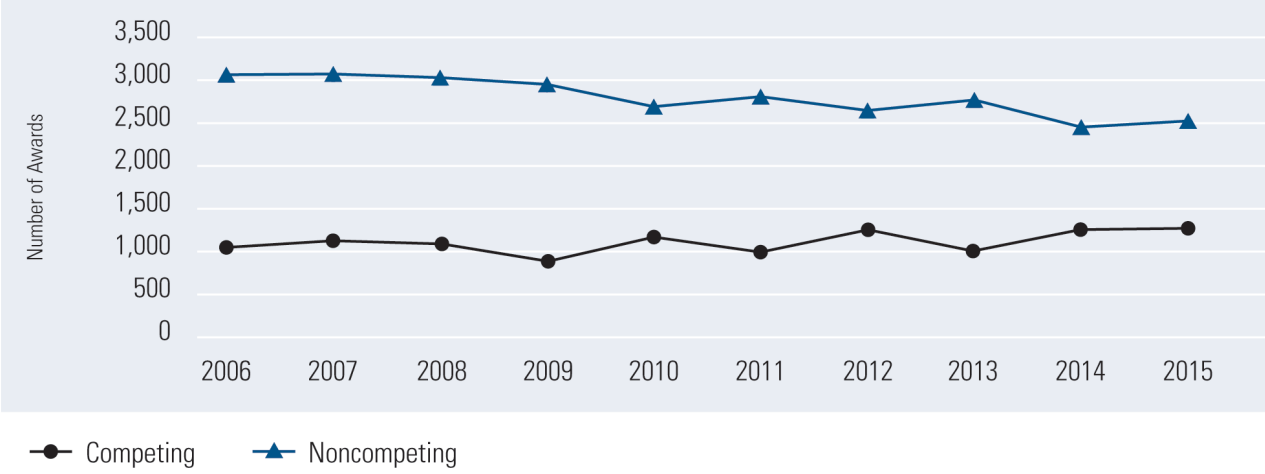
	Competing[1]		Noncompeting[2]	
Fiscal Year	Number of Awards	Dollars	Number of Awards	Dollars
2006	1,049	$ 597,730	3,065	$ 1,578,340
2007	1,127	503,873	3,073	1,741,237
2008	1,090	438,740	3,031	1,844,475
2009	887	527,753	2,952	1,815,598
2010	1,170	507,381	2,692	1,851,271
2011	994	475,996	2,809	1,867,093
2012	1,255	525,810	2,647	1,827,964
2013	1,007	415,414	2,770	1,726,701
2014	1,257	979,422[3]	2,453	1,441,745
2015	1,272	577,371	2,525	1,897,799

[1] Competing grants include new, renewal, or resubmission applications that must undergo initial peer review before being funded.

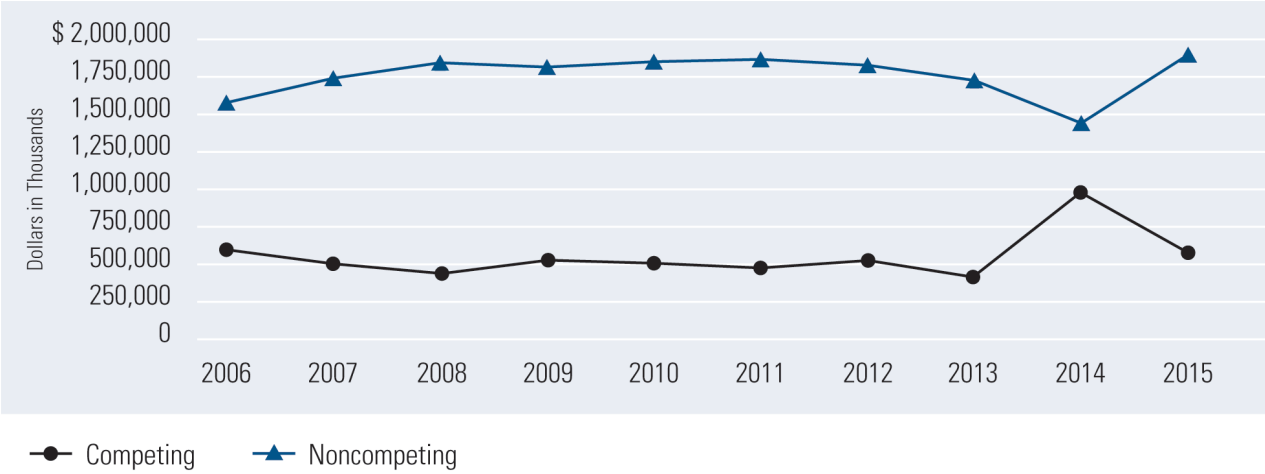
[2] Noncompeting grants are outyear commitments from prior-year competing awards.

[3] Recompetition of the AIDS Clinical Trials Networks.

Competing and Noncompeting RPG Awards: Number of Awards FY 2006 – FY 2015



Competing and Noncompeting RPG Awards: Funding FY 2006 – FY 2015



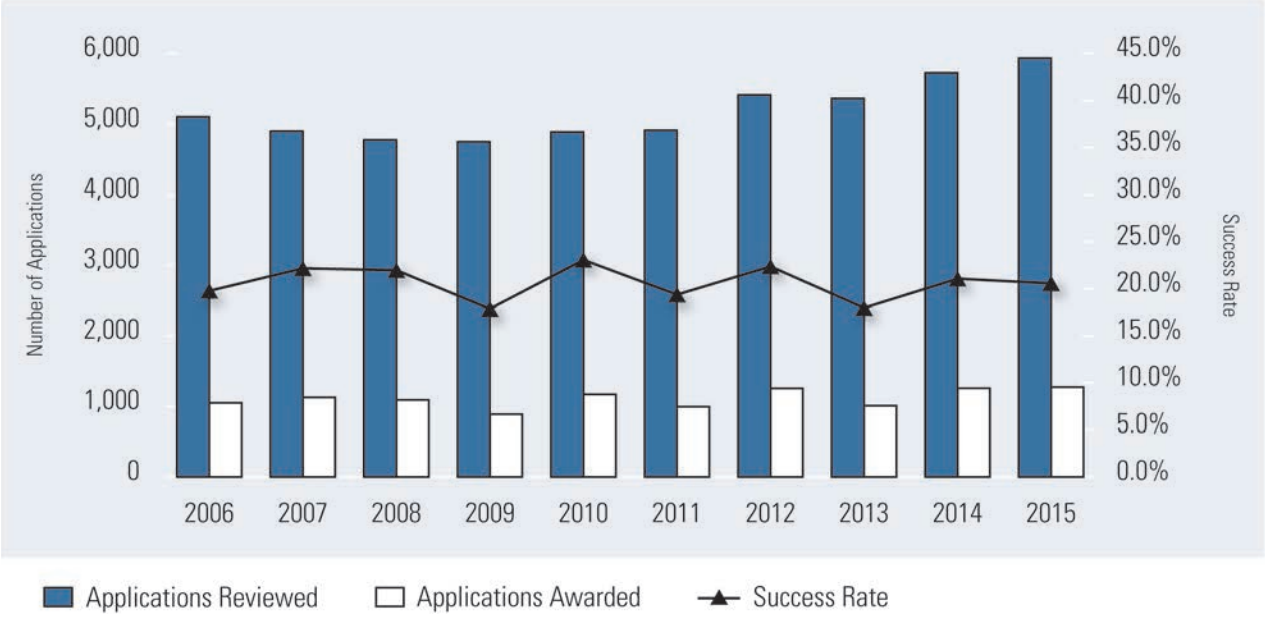
NIAID RPG Application Success Rate: FY 2006 – FY 2015

Fiscal Year	Applications Reviewed	Applications Awarded	Success Rate[1]
2006	5,104	1,049	20.6%
2007	4,900	1,127	23.0%
2008	4,776	1,090	22.8%
2009	4,749	887	18.7%
2010	4,889	1,170	23.9%
2011	4,914	994	20.2%
2012	5,416	1,255	23.2%
2013	5,367	1,007	18.8%
2014	5,731	1,257	21.9%
2015	5,932	1,272	21.4%

[1] Success rates are defined as the percentage of reviewed grant applications that receive funding. They are computed on a fiscal year basis and include applications that are peer reviewed and either scored or un-scored by an Initial Review Group.

For more information, visit **http://report.nih.gov/success_rates.**

NIAID RPG Application Success Rate: FY 2006 – FY 2015



NIAID Research Project Grant Applications Per Percentile

NIAID fosters innovation by using paylines and selective pay awards to fund the best projects while maintaining portfolio balance and flexibility.

Below is a histogram of the investigator-initiated R01 applications received in FY 2015 sorted by percentile score. Blue shaded bars represent the applications that were awarded, orange bars represent the applications that were not funded, and yellow bars represent R56 Bridge awards. These groups are separated by a solid black line representing NIAID's established investigator payline at the 12th percentile. All applications that scored within the payline were funded except for those that were canceled for issues such as concerns over human subjects or principal investigator (PI) retirements.

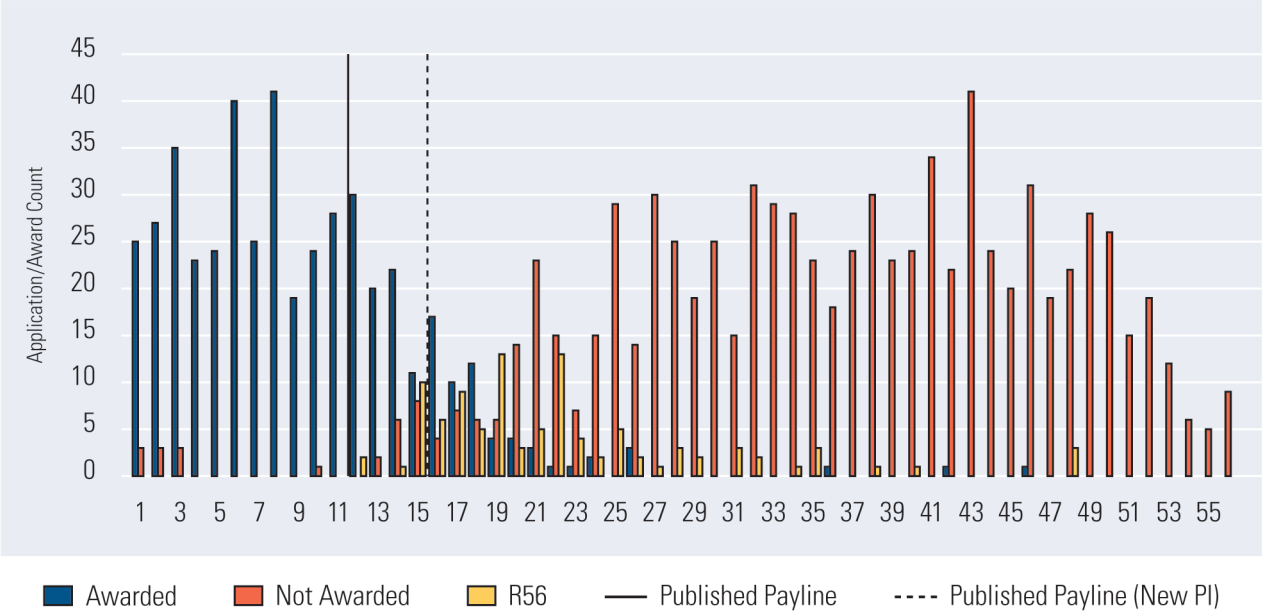
Many applications that fell outside the payline were still awarded. Approximately one-third of these were applications submitted by new investigators, who benefited from an R01 payline set higher for new PIs, which is represented by the dotted black line at the 16th percentile.

The chart includes Method to Extend Research in Time (MERIT) Awards (R37), which provide 5 years of funding to outstanding R01 grantees. NIAID funds approximately 15 MERIT awards each year.

Another discretionary option NIAID uses to direct its research portfolio is the R56 Bridge Award, depicted in yellow. NIAID chooses promising R01 applications that scored outside the payline to fund for 1 year; awardees are encouraged to improve and resubmit their R01 application during this 1-year period. NIAID funds as many as 150 R56 Bridge awards each year.

For more information, visit **https://www.niaid.nih.gov/researchfunding/newsletter/2016/Pages/0323.aspx#.**

FY 2015 Applications Per Percentile: Unsolicited R01/R37/R56



The Ruth L. Kirschstein National Research Service Award (NRSA) is the primary mechanism for providing long-term, stable support for a wide range of promising scientists and research clinicians.

NIAID-Supported National Research Service Awards: FY 2006 – FY 2015

Trainees	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Predoctoral	652	609	598	637	687	654	605	537	619	590
Postdoctoral	607	593	571	573	589	577	576	516	521	468
Total	**1,259**	**1,202**	**1,169**	**1,210**	**1,276**	**1,231**	**1,181**	**1,053**	**1,140**	**1,058**

NIAID-Supported National Research Service Awards: FY 2006 – FY 2015

NIAID has many opportunities to support scientists through specific training (T), fellowship (F), and career development (K) awards. The number of positions supported by the T, F, and K awards is listed in the table below. There are other mechanisms used to train scientists, including RPGs, for which data are not available.

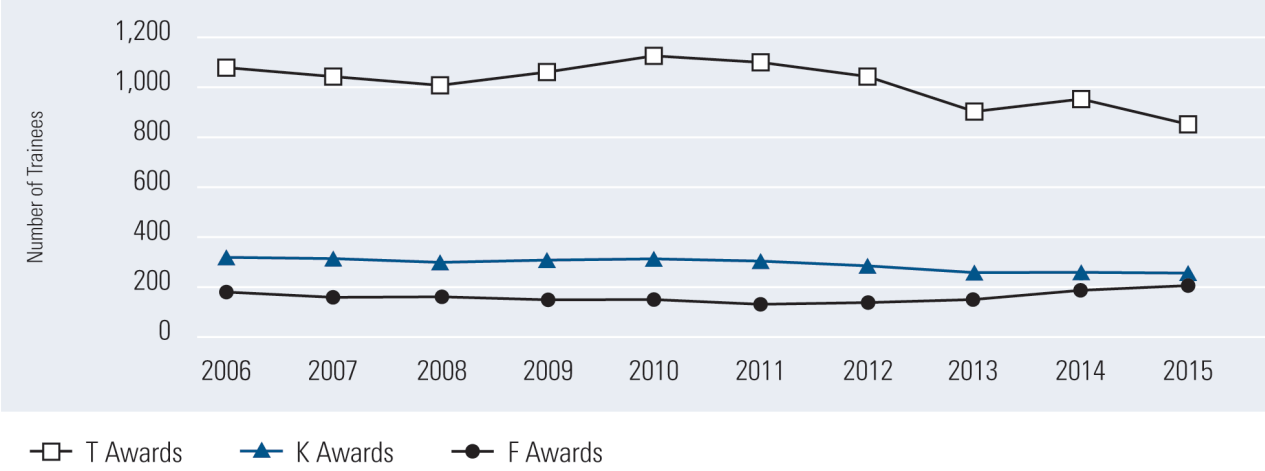
NIAID Training and Career Development Awards by Mechanism: FY 2006-FY 2015

Dollars in Thousands

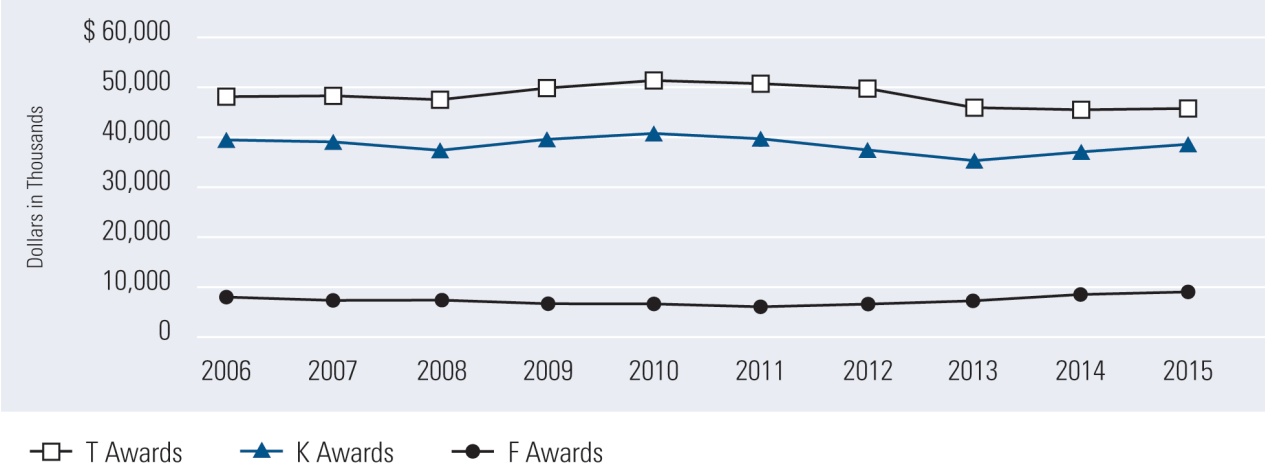
	T Awards		K Awards		F Awards	
Fiscal Year	Number Training Positions	Dollars	Number of Awards	Dollars	Number Training Positions	Dollars
2006	1,079	$ 48,128	319	$ 39,470	180	$ 7,998
2007	1,043	48,299	314	39,073	159	7,341
2008	1,008	47,523	299	37,388	161	7,395
2009	1,061	49,857	308	39,587	149	6,674
2010	1,126	51,365	313	40,763	150	6,635
2011	1,100	50,738	304	39,707	131	6,059
2012	1,043	49,748	285	37,453	138	6,602
2013	903	45,928	258	35,322	150	7,251
2014	953	45,507	259	37,071	187	8,522
2015	852	45,768	256	38,594	206	9,041

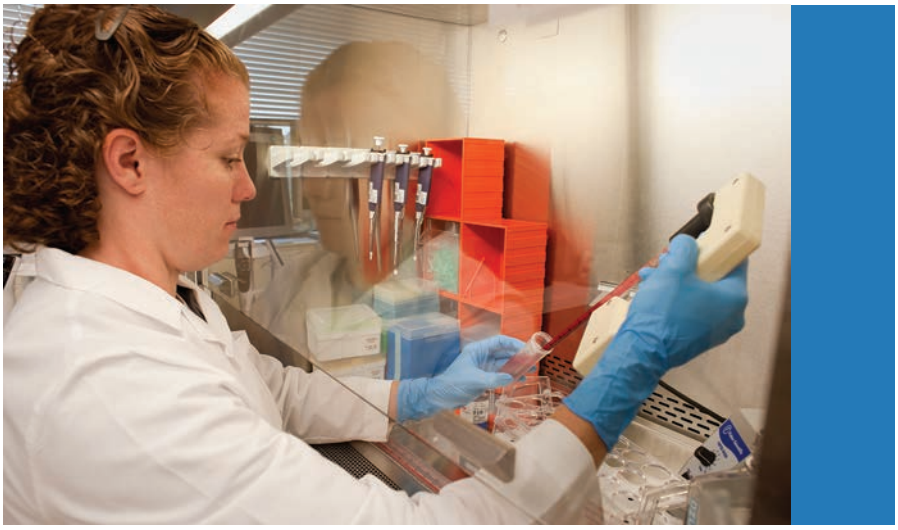
For additional information on training, career development, and fellowship awards, visit **http://grants.nih.gov/training/extramural.htm.**

NIAID Training and Career Development Awards by Mechanism: Number of Trainees FY 2006 – FY 2015



NIAID Training and Career Development Awards by Mechanism: Funding FY 2006 – FY 2015





NIAID FY 2015 Funding

Dollars in Thousands

Pathogen, Disease, or Condition		
Allergic Rhinitis*	$	3,425
Allergy		82,944
Anaphylaxis		7,327
Anthrax*		45,364
Arthritis*		20,181
Asthma*		80,541
Autoimmune Disease*		176,846
Cholera		16,642
Dengue		65,174
Diabetes*		20,510
Diarrheal Diseases		139,814
Digestive Diseases*		321,265
Ebola**		77,594
Emerging Infectious Diseases*		1,639,003
Food Allergy*		32,718
Fungal diseases		76,069
Hepatitis*		119,069
Hepatitis C*		36,570
HIV/AIDS*		1,586,804

Pathogen, Disease, or Condition		
Infectious Diseases, including HIV/AIDS*	$	3,167,866
Inflammatory Bowel Disease*		19,983
Influenza*		239,741
Lupus*		33,377
Lyme Disease*		22,270
Malaria*		137,036
Multiple Sclerosis*		25,108
Parasitic Diseases		282,141
Pediatric AIDS*		35,403
Pediatric Research*		254,892
Pneumonia and Influenza*		310,215
Primary Immune Deficiency Diseases		38,110
Respiratory Diseases, Infectious		449,743
Sexually Transmitted Diseases/Herpes*		117,126
Staphylococcus aureus		69,187
Tropical Medicine		534,224
Tuberculosis*		199,798
Vector-Borne Diseases*		368,490

Other Research		
Antimicrobial Resistance*	$	243,278
Biodefense*		1,610,560
Antibiotics/Antiviral		417,769
Basic Research		790,445
Diagnostics		69,170
Vaccines		333,176
Chemical Countermeasures Research***		46,752

Other Research		
Radiological/Nuclear Research***	$	45,346
Immune Tolerance		149,883
Prevention*		1,609,399
Stem Cell Research*		58,065
Topical Microbicides*		94,680
Transplantation*		160,036
Vaccine related (AIDS)*		472,854

* Represents topics and funding levels reported using NIH Research, Condition, and Disease Categorization (RCDC) process.

** Excludes emergency Ebola funding of $238 million in FY 2015.

*** NIAID coordinates/manages these programs on behalf of NIH.

For more information on RCDC funding, visit **http://report.nih.gov/categorical_spending.aspx.**

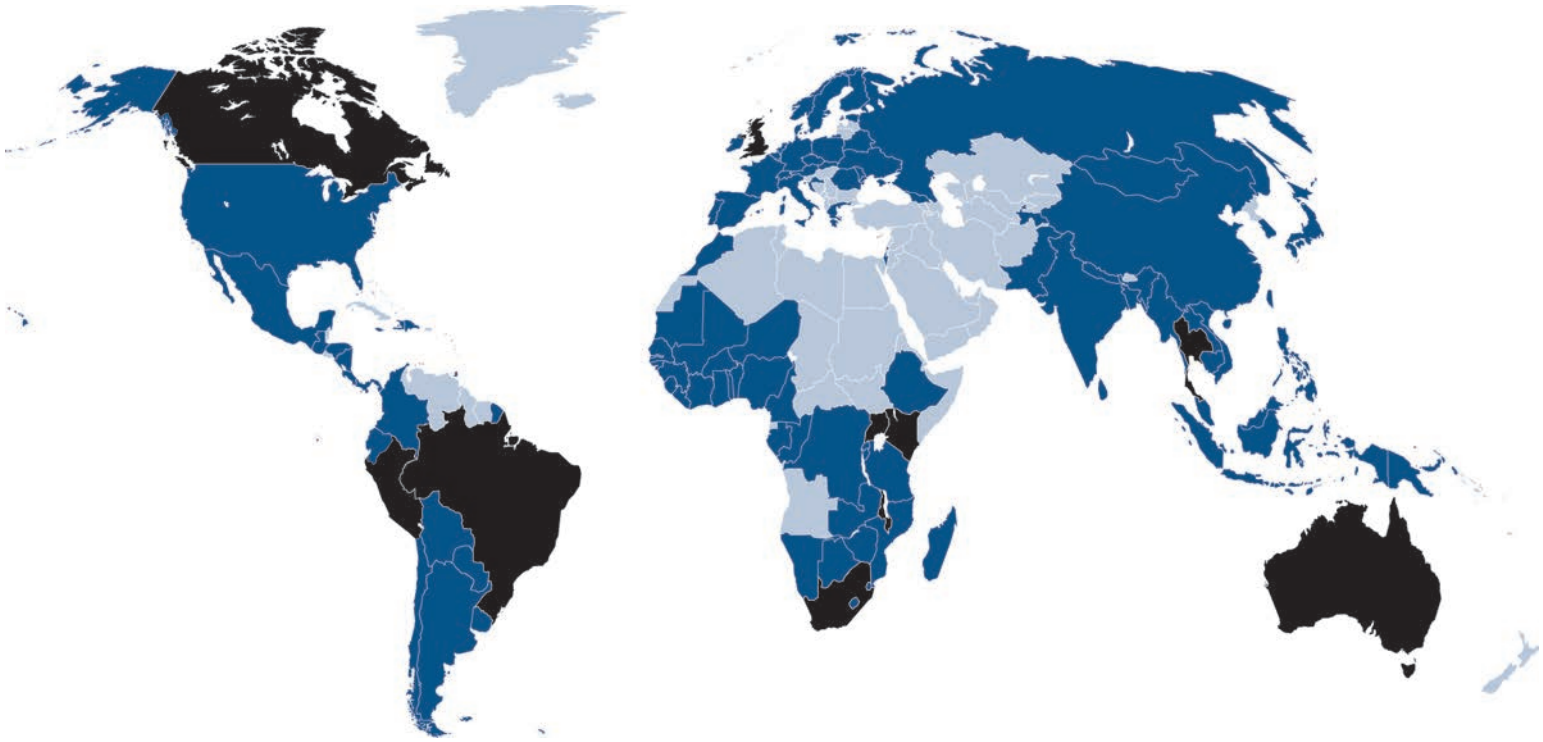
Approximately 83.7 percent of NIAID's total budget supported research at institutions in the United States, including the District of Columbia and Puerto Rico.

NIAID Extramural Research Funding by State: FY 2015

Dollars in Thousands

State		State	
Alabama	$ 53,344	Montana	$ 3,593
Alaska	–	Nebraska	7,022
Arizona	9,680	Nevada	2,971
Arkansas	2,063	New Hampshire	14,542
California	465,349	New Jersey	36,139
Colorado	48,594	New Mexico	12,959
Connecticut	54,447	New York	285,718
Delaware	827	North Carolina	238,371
District of Columbia	15,775	North Dakota	651
Florida	49,555	Ohio	76,592
Georgia	118,040	Oklahoma	12,000
Hawaii	6,142	Oregon	35,237
Idaho	214	Pennsylvania	206,784
Illinois	94,611	Puerto Rico	1,181
Indiana	30,527	Rhode Island	8,006
Iowa	18,928	South Carolina	8,402
Kansas	8,773	South Dakota	629
Kentucky	14,647	Tennessee	63,061
Louisiana	25,468	Texas	124,563
Maine	499	Utah	15,011
Maryland	539,170	Vermont	2,866
Massachusetts	422,772	Virginia	76,948
Michigan	41,706	Washington	253,215
Minnesota	69,433	West Virginia	362
Mississippi	883	Wisconsin	56,682
Missouri	61,435	Wyoming	629
TOTAL	**$ 3,697,016**		

Global Health Research at NIAID



- Countries with NIAID-funded activities (111 countries)
- Top 10 foreign countries receiving NIAID research support

NIAID-Funded Research: Top 10 Foreign Countries
South Africa
Uganda
Australia
United Kingdom
Kenya
Peru
Canada
Brazil
Malawi
Thailand

For more information on NIAID's role in global research, visit: **http://www.niaid.nih.gov/topics/globalresearch.**

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