



UNIVERSITY of MARYLAND
BALTIMORE

Sponsored Programs Administration (SPA)
NIH Research Performance and Progress Report (RPPR)
Checklist

[RPPR Instruction Guide](#)

[eRA Help_RPPR](#)

[eRA Training Videos](#)

[RPPR FAQs](#)

[RPPR Delegations Table](#)

[Screenshots of RPPR Sections for Reference](#)

☐ **Cover Page Tab-A**

- Ensure Gregory Sorensen is listed as Administrative Official.
- Ensure Amanda Knott is listed as Signing Official.

☐ **Accomplishments Tab-B**

- B.3 If you received a supplement for the current period (the period you are reporting on), be sure to report each supplement.
- B.4 If students (graduate, undergraduate, postdoctoral, or fellows) are working on the project, upload a document that describes opportunities for training and professional development. This is not required for AHRQ participants. For graduate students and post doctoral participants, be sure to mention how the Individual Development Plan *is used*. (Do not upload the IDP itself).
 - Assure that the students listed in D.1 (Participants) are also listed in the B.4 document.
 - A B.4 response is required for T, F, K, R25, R13, D43 Awards.

☐ **Products Tab-C**

- C1 Check for Non-Compliant publications.
 - Non-Compliant publications that fall under the NIH public access policy must still be reported. To check to see if your award falls under this policy, visit [Applicability](#)
 - To be compliant, a paper must be listed as either:
 - * Complete, N/A (not applicable), PMC Journal in Process, or In Process at NIHMS.

- If there are non-compliant publications associated with the project, NIH will email a Progress Report Additional Materials (PRAM) request to the Principal Investigator and Signing Official immediately after submission of the RPPR.
- Additional guidance for reference on reporting publications and guidance can be found at the links below.
 - * [How to Report Publications](#)
 - * [UMD Guidance](#)
- C.4 Inventions
 - Report inventions, patent applications and/or licenses that resulted from the award during the current period (the period you are reporting on).
 - Refer to [UMVENTURES](#)
- C.5.c. NIH now requires an update on Data Management and Sharing (DMS) Plans in the RPPR if the initial research plan addressed or the award terms require an update on the progress of the DMS. [DMSP Notice](#)
 - This will appear as “Not applicable” if there is no requirement.
 - If there are no updates, the PI must report why there are no updates.
 - If there are changes, the PI should upload a revised DMS Plan.

❑ **Participants Tab-D**

- List all persons who worked on the project in the current reporting period for at least one calendar month, including consultants and students. Do not include Other Significant Contributors who do not commit effort or persons reported in xTrain.
- If a consultant or post-doctoral student was listed as Key Personnel in the application, be sure to mark them as Key in the RPPR.
- If **PI** effort is less than 0.05, enter 0.1.
- Round effort to the nearest one tenth. Example: Post Doc. worked 2.45 calendar months, round to 2.5; or if they worked 2.44 calendar months, enter 2.4.
- Ensure all Key Personnel have a Commons ID, including graduate and undergraduate students, postdoctoral students, and fellows.
- If someone needs to request an eRA Commons account, they should complete the UMB Account Request for NIH or NSF Quali Build (KB) Form to request account set up. [UMB Instruction Reference](#)
- Ensure all eRA Commons profiles are completed with contact and degree information. [How to Update your Profile in eRA Commons](#)
- Reduction in Effort for Key Persons named in the NoA:
 - Prior approval is only required for a reduction in effort of 25% or more for the PD/PI or other senior/key personnel **specifically named in the NoA**.
 - Remember that the effort listed for Key Persons *named in the NoA* should not equal a cumulative reduction of 25% or more from the last approved adjustment.

- Other personnel not named in the NoA do not need prior approval.
- Note that the effort proposed in the original application is the point of reference until prior approval is granted either via the RPPR or a prior approval request.
- If effort decreased 25% or more during the reporting period and a prior approval was not submitted, contact SPA-Grants to submit a prior approval request AND report their actual effort for this reporting period in Section D.1.
- [NIH Prior Approval Requests](#)
- [Change in Scope](#)
- [Reduction in Effort Helpful Link](#)
- For final and interim RPPRs, list only those individuals that worked on the project during the last budget period, not including the no cost extension period.

🕒 **D.2.a.**

- **This response is for Key Personnel listed in the NoA only.** This is like submitting a prior approval request for future, expected changes. If the change has already happened, a prior approval request needs to be submitted separately as stated above. Contact SPA-Grants.

🕒 **D.2.b.**

- **This response is for *new* Key Personnel.**

D.2.c.

- **This response is for *all* Key Personnel listed in the application that have a change in active support.**
 - Upload current versions of bio sketches and Other Support Documents for Key Personnel and ensure they are completed correctly and digitally signed. Using Docusign is highly recommended.
 - [Other Support](#)
 - [Common Forms-use postponed to after May 25, 2025](#)
 - [NIH Disclosures Table 9.5.25](#)
 - **List the award for which the progress report is being submitted and include the effort that will be devoted in the next reporting period.**
 - Always include an overlap statement. If all active and pending efforts combined exceed 12 calendar months, explain how the overlap will be addressed should the pending projects be awarded.
 - An In-Kind section must be provided. If there is no In-Kind support, you must note “None.”
 - Effort tables reflect the current and future fiscal year’s effort, not past. Delete previous years.
 - Do not include Other Support for Other Significant Contributors in this section. That goes in **D.2.d.**

- Docusign is a great way to get quick signatures.

D.2.e.

- **A change in MPI leadership does not require prior approval and can be reported in the RPPR, but a change of PI must be submitted as a prior approval.**

❑ Impact Tab-E

- E.1 Applies to Education RPPRs.
- E.3 Applies to SBIR/STTR RPPRs.
- E.4 Report currently obligated funds to first-tier foreign subrecipients for this reporting period. Amount should reflect total costs.

❑ Changes Tab-F

- F.2 Describe challenges and delays impacting carryover or project implementation. This should support the projected carryover reported in G.10, if any.

❑ Special Reporting Requirements Tab-G

- Check for special reporting requirements in the NoA.
 - Training awards and SBIR/STTR awards have special uploads.
 - New Type 3 Supplements have special reporting requirements listed in the NoA.
 - See Section 7, *Supplemental Instructions for Specific Grant RPPR Types* in the [RPPR Instruction Guide](#)
- G.2 Applies to Individual Career Development (K), Fellowship (F), and Training RPPRs.
- G. 3 Applies to Individual Career Development (K) and Fellowship (F) RPPRs.
- G.4 Human Subjects
 - Ensure that the Human Subjects form is completed if required.
 - A warning will appear if enrollment dates are not updated.
 - A warning will appear if the status is not marked as ready for submission.
 - Enter updates to actual cumulative enrollment data in the participant data enrollment template.
 - PIs should use the eRA Online Help for Editing Studies at the link [HERE](#) as a guide. Contact SPA for more resources if needed.
 - Complete Section 6 for all studies involving clinical trials. The anticipated dates entered are *future* dates. All actual dates must be the current date or an older date.
 - If a study is a clinical trial, it must be registered and the NCT number included.
 - “Flatten” PDFs before uploading to remove interactive data.
 - If a project has more than one inclusion enrollment report, each must have a unique title.
 - If new clinical studies have started and planned enrollment was not previously reported, the PI should create a new Planned Enrollment record in the Human Subjects System.

- G.8 Project/Performance Sites
 - Make sure UEI and congressional information are included for each performance site.
 - List all performance sites where work is done for IDC purposes.
 - **Delete duplicate performance sites.**
 - **Leave the Office of Research and Development as the Primary site.**
- G.9 Foreign Component
 - [Foreign Component Definition](#)
- G.10 Estimated Unobligated Balance
 - G.10a. Check to ensure that what is being reported in terms of carryover aligns with what is in Quantum Analytics Award Detail. The LTD Billed amount in Quantum is the same as total payments. Total Budget – LTD Billed = Remaining Balance.
 - Connect with SPA-Grants to confirm the carryover amount.
 - If there is a projected carryover of 25% or more in Quantum, reach out to the PI to confirm the actual expenditures plus projected expenses.
 - To calculate the 25% or more carryover threshold, divide the remaining balance into the **current year's total award** (include supplement(s) awarded that budget period + approved carryover).
 - The numerator (the number on top) is the balance remaining and the denominator (the number on bottom) is the current year's total approved budget, including approved carryover.

🕒 **Example 1** – The award is currently in Year 4, going into Year 5. The cumulative balance from Years 1-4 of the award is \$185,000. (There were no supplements awarded for the reporting period and there was no approved carryover. The Year 4 awarded amount is \$500,000. Since \$185,000 is ~37% of \$500,000, report this estimated unobligated balance in G.10.a.

🕒 **Example 2** – The award is currently in Year 4 going into Year 5. The cumulative balance of Years 1-4 for both the supplement and parent awards for the current reporting period is \$250,000. The Year 4 awarded amount is \$500,000. The parent award has an approved carryover of \$50,000. Since \$250,000 is 45% of \$550,000, report this balance in G.10.a.

- Note that the NIH considers an encumbered subcontract amount as unliquidated.
- Anything that the GMS cannot see in the PMS may trigger a question in response to the RPPR, where the GMS may request a spending plan or revised budget from the PI.
- G10.b and c.– Use these two sections to explain why there are extra funds (G10b) and how we intend to spend them (G10c). Oftentimes, this is due to delays in subcontracting, hiring, or a late budget start date. Whatever the reason take advantage **of G.10 and Section F.** to explain those challenges and delays to the GMS.

❑ **Budget Tab-H (If applicable)**

- To develop your budget, use the amount committed for the next budget period that is listed in the first NoA.
- Include committed supplement amounts for the next budget period, excluding carryover.
- Upload subrecipient budgets and justifications separately.
- Total consortium costs for the main UMB budget **MUST** be added up and input manually into line-item F.5.