NIH Instrumentation Grant Program for Resource-Limited Institutions (RLI-S10)

Informational Webinar
October 21, 2026



NIH National Institutes of Health

Today's Presenters



Dr. Dorothy Beckett
National Institute of
General Medical Sciences



Dr. Stephanie Hicks
National Institute of
General Medical Sciences

Disclaimer

This presentation and accompanying slides are for informational purposes only. They serve as an overview of NIH or NIGMS programs and are not meant to be comprehensive in coverage of all required components of a program or an application.

Overview of the RLI-S10 Program

PAR-27-067

Program Goals

- Provide funding for purchase of modern scientific instruments at resource-limited institutions
- Expand education and research capacity in basic, translational, and biomedically related behavioral or clinical fields

Research



Education



Image Credit: Microsoft 365 stock images

Eligible Instruments

- Requested instruments may support biomedical research and education in basic, translational, biomedically-related behavioral or clinical fields
- Eligible instruments may include, but are not limited to:

  - Centrifuge
  - Cell sorter
  - Confocal microscope
  - Ultramicrotome
  - Gel imaging system
  - Mass spectrometer
  - Magnetic resonance spectrometer
  - 3D printer
  - PCR System
  - Fluorimeter
  - CD spectropolarimeter
  - High-throughput microplate reader
  - Isothermal titration calorimeter
  - Scanning or transmission electron microscope
  - FPLC and HPLC systems
  - Computer systems
  - Human and animal monitoring systems

RLI-S10 Program Budgets

- Award amounts: $25,000-$250,000
- If the instrument cost is >$250,000 you may request the maximum amount and provide documentation of the funding source(s) that will cover the remaining cost
- Service contract costs for up to 5 years may be included in the budget but must be paid during the 1-year award period
- Additional guidance: Applicants should be fiscally responsible and, when possible, secure academic discounts

RLI-S10 User Roles and Responsibilities





National Institutes of Health

Major Users

- At least three Major Users are required for each application
- Major Users can include:
  - Researcher who has a demonstrated scientific need for the instrument
  - Upper level undergraduate or graduate laboratory course that will integrate the instrument into learning objectives
- Major users can be from the same or distinct departments in the applicant institution or from nearby or regional institutions
- A single defined research or educational project can account for only one Major User
- Program Director/Principal Investigator (PD/PI) and other Users are not required to have existing NIH funding





Institutional Affiliation and Other Users

- The following must be affiliated with the Applicant Institution:
  - Full-time appointment of the PD/PI
  - Instrument location
  - Use of the instrument in courses

- Other (Minor) Users:
  - Those that will benefit from the instrument in a research capacity
  - May be located at the applicant institution or at nearby or regional institutions

- No specific number of Minor Users is required
  - However, the application reviewers will consider the number of Minor Users and potential users







User Responsibilities

- PD/PI:
  - Administrative and scientific oversight of the instrument
  - Drafting the Instrument and Organizational Plans
  - Evaluation and reporting
  - Communications with NIH and instrument vendors
- Specified Individual(s) with Technical Expertise (Need not be a Core Facility Manager)
  - Instrument set up and new user training
  - Ensure safe operation
  - Ensure appropriate instrument maintenance
  - Provide technical support





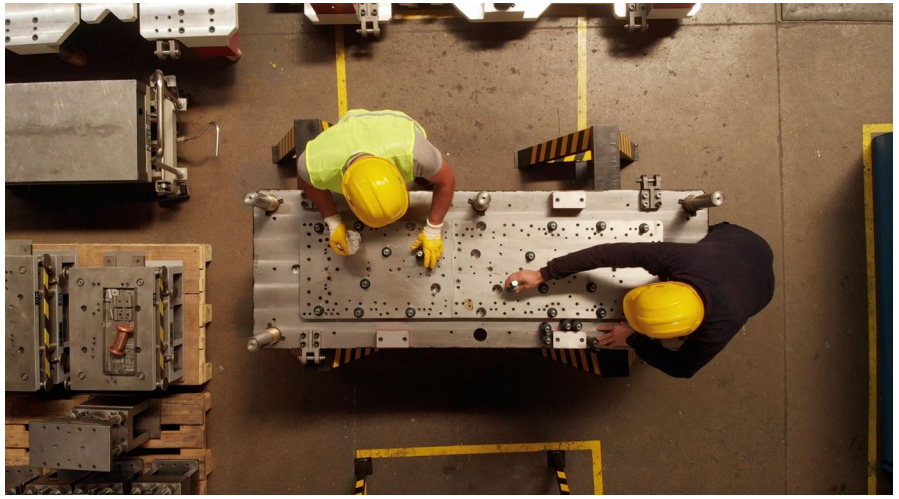


RLI-S10 Institutional Responsibilities

Responsibilities of the Applicant Institution

- Instrument housing, accessibility, and maintenance
- Personnel support
- Sustaining infrastructure and facilities
- Successful implementation of the instrument







Instrument Location

- Housed at the applicant institution
- Placed in a space that:
  - Maximizes sharing
  - Promotes cost-effectiveness
  - Fosters a collaborative multi-disciplinary environment

- Examples of suitable spaces:
  - Core facility
  - Shared-resource room
  - A Major User's accessible laboratory
  - Instructional laboratory

- Instruments should not be in cramped or dirty spaces that are inaccessible and unattended during normal business hours









Preparing your RLI-S10 Application

Overview of an NIH Notice of Funding Opportunity

Part 1. Overview Information
- Key Dates

Part 2. Full Text of the Announcement
- Section I. Funding Opportunity Description
- Section II. Award Information
- Section III. Eligibility Information
- Section IV. Application and Submission Information
- Section V. Application Review Information
- Section VI. Award Administration Information
- Section VII. Agency Contacts
- Section VIII. Other Information

RLI S10 Institutional Eligibility Requirements

- Domestic institutions located in the United States and its territories
- Meeting the following criteria:
  - At the time of application, have received less than $6 million dollars per year (total costs) from NIH Research Project Grants (RPGs) over the past three fiscal years, calculated using NIH RePORTER
  - Award undergraduate and/or graduate degrees in biomedical sciences

AND

  - Enroll at least 35% of undergraduate students supported by Pell grants (calculated as a yearly average from the past three academic years based on data available from the Integrated Postsecondary Education Data System (IPEDS) database maintained by the National Center for Education Statistics.*

OR

  - Nationally recognized and accredited Historically Black Colleges and Universities (HBCUs) Or Tribal Colleges and Universities (TCUs)

*IPEDS reports the percentage of students supported by Pell grants in two ways: (1) the percentage of all undergraduates enrolled and (2) the percentage of full-time, first-time, degree/certificate-seeking undergraduate students. **Institutions may use either option for determining their eligibility.** No matter which category of IPEDS data is used, the institution's Pell grant enrollment in that category must be at least a yearly average of 35% calculated from the three most recent years of reported data.

Determining Institutional RLI-S10 Eligibility

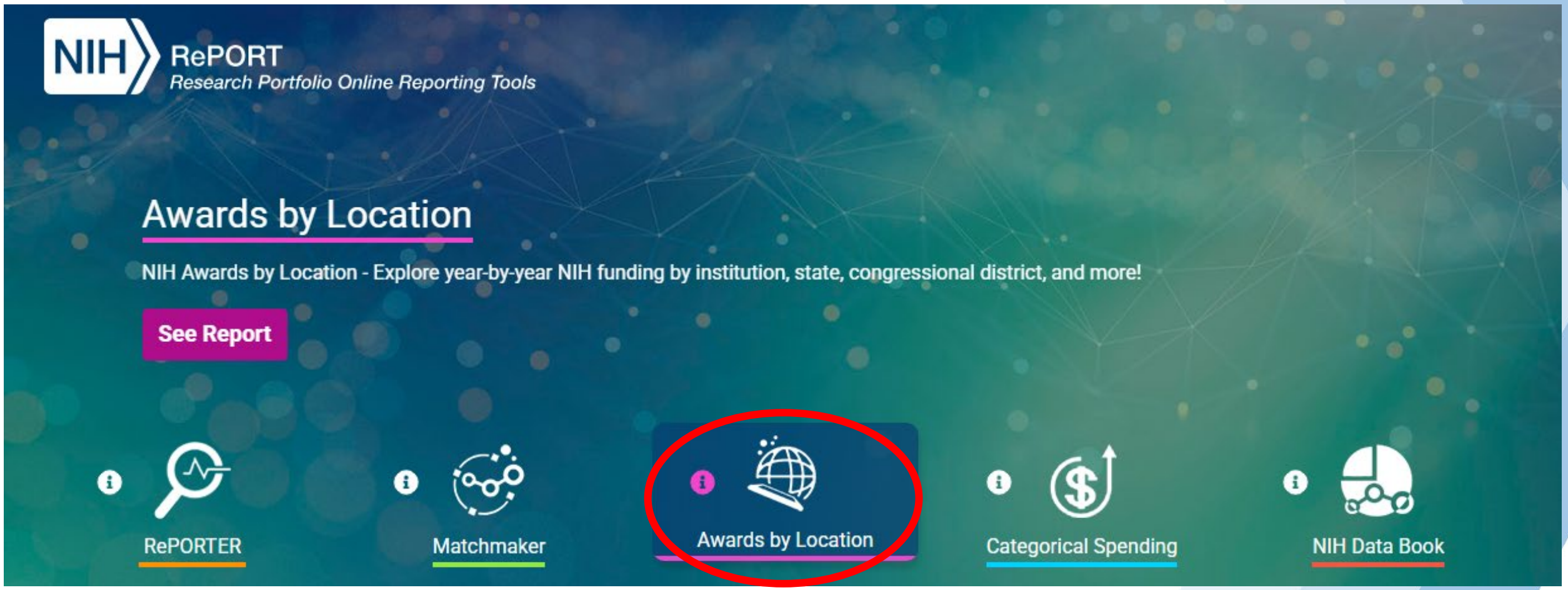




National Institutes of Health

Determining <$6 million per year eligibility using NIH Reporter

- Navigate to report.nih.gov and click on the Awards by Location banner link



Determining <$6 million per year eligibility

- Search for your organization using a key word with the "contains" flag checked
- Search using the "Select" button
- A pop-up window will appear with a list of known institutions. Select yours from the list.
- Generate an awards summary by clicking "Submit Query"



Determining <$6 million per year eligibility cont.

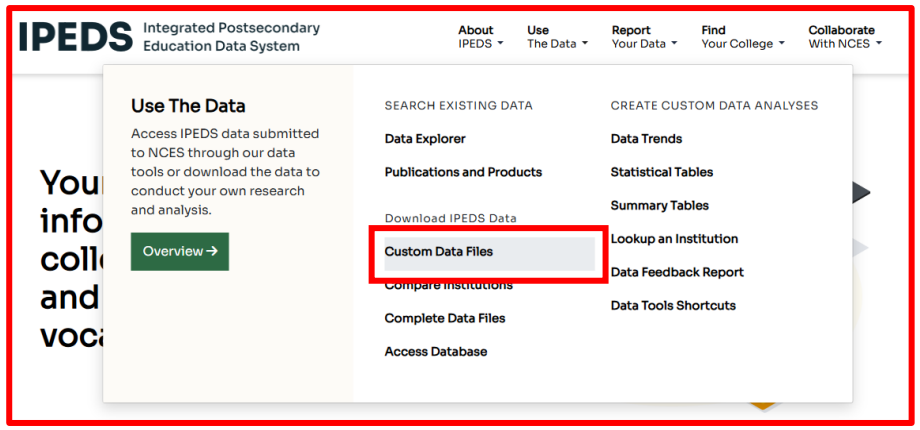
- Scroll down the page to see your query results
- Make sure that "Funding Mechanism" is selected in the drop-down table header to see the $ amount that correlates with research project grants (RPGs)
- Make a new query for each of the three preceding fiscal years
- The Dollar Amount for RPGs should be below $6 million in each year

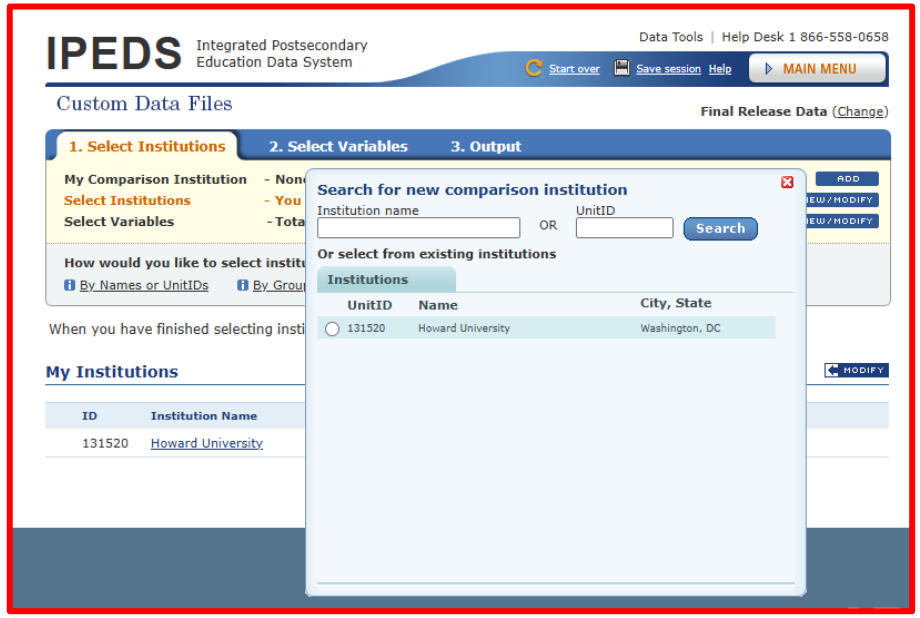
HOWARD UNIVERSITY awards summary for Fiscal Year 2022

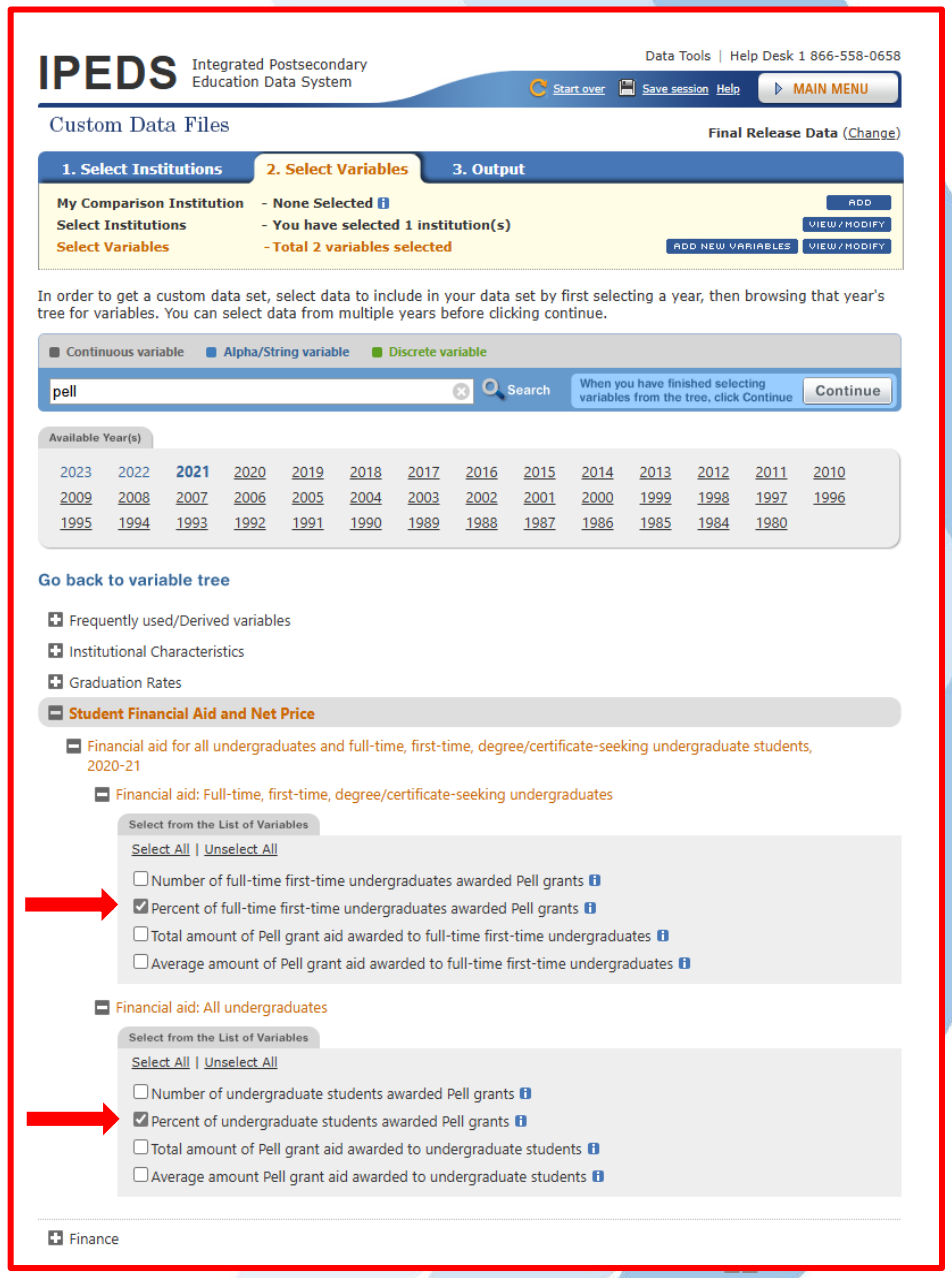
Funding Mechanism	Dollar Amount	Awards
Other Research-Related	$753,298	2
Research Centers	$6,603,136	7
RPGs - Non SBIR/STTR	$5,733,997	14
Training - Institutional	$341,337	2
Total	$13,431,768	25

Determining 35% Pell Student Eligibility in IPEDS

- Navigate to IPEDS and find the Custom Data Files button in the Use The Data drop-down menu from the site banner
- Follow the Steps 1-3 to search for your Pell % starting with Select Institutions
- In Step 2: Select Variables, you must select the indicated (red arrows) % Pell award variables for each year separately
  - After selecting a year, search for "pell" to limit variables to that key word
  - Expand the Student Financial Aid and Net Price variable tree to select the indicated variables



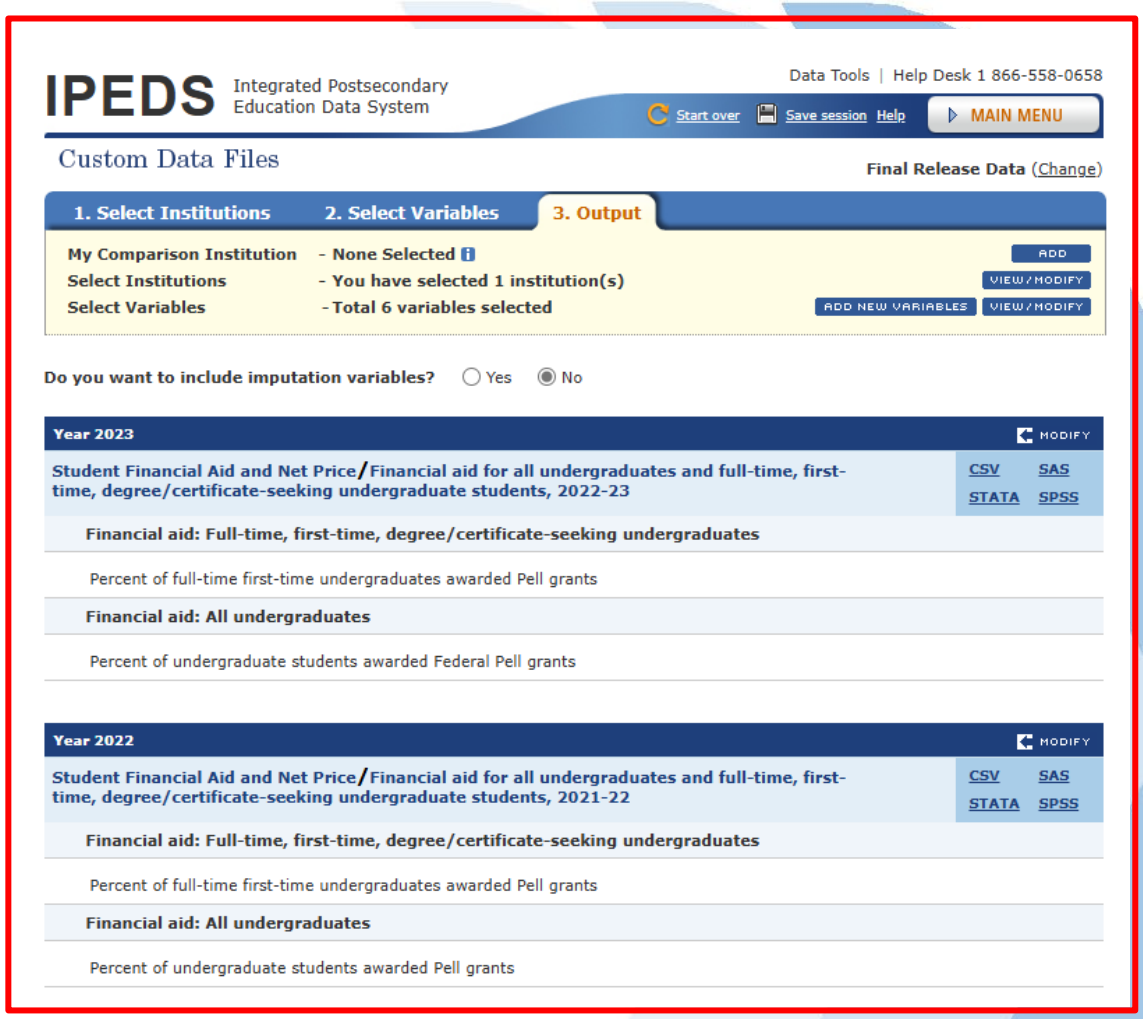




National Institutes of Health

Determining 35% Pell Student Eligibility in IPEDS cont.

- In Step 3: Output, you can download a CSV (comma separated values) Excel-compatible text file for each year
- Use "Percent of full-time first-time undergraduates awarded Pell grants" or "Percent of undergraduate students awarded Federal Pell grants" to determine your institution's eligibility
- The average of one of these variables should be above 35% for the three preceding fiscal years
- If the previous year's IPEDS awards datum is not available, it is the institution's responsibility to accurately calculate that value



Example CSV Output:

E8

	A	B	C	D	E
1	unitid	institution name	year	SFA2223.Percent of full-time first-time undergraduates awarded Pell grants	SFA2223.Percent of undergraduate students awarded Federal Pell grants
2	131520	Howard University	2023	44	41

National Institutes of Health

Completing Your Application

Institutions New to NIH? Make sure that you register!

Institution must complete the following registrations:

- **UEI** (Unique Entity Identifier) - a 12-character string created in SAM.gov*
- **SAM** (System for Award Management) – requires annual renewal
- **Grants.gov** – required to submit grants
- **eRA Commons** – required to do business with NIH

*The application must be submitted by an eligible organization with a **Unique Entity Identifier (UEI)** and a **unique NIH eRA Institutional Profile File (IPF) number**. For institutions with multiple campuses, eligibility can be considered for an individual campus (e.g., main, satellite, etc.) as the applicant organization only if a UEI and a unique NIH eRA IPF number are established for the individual campus. For institutions that use one UEI or NIH IPF number for multiple campuses, eligibility as the applicant organization is determined for the campuses together.

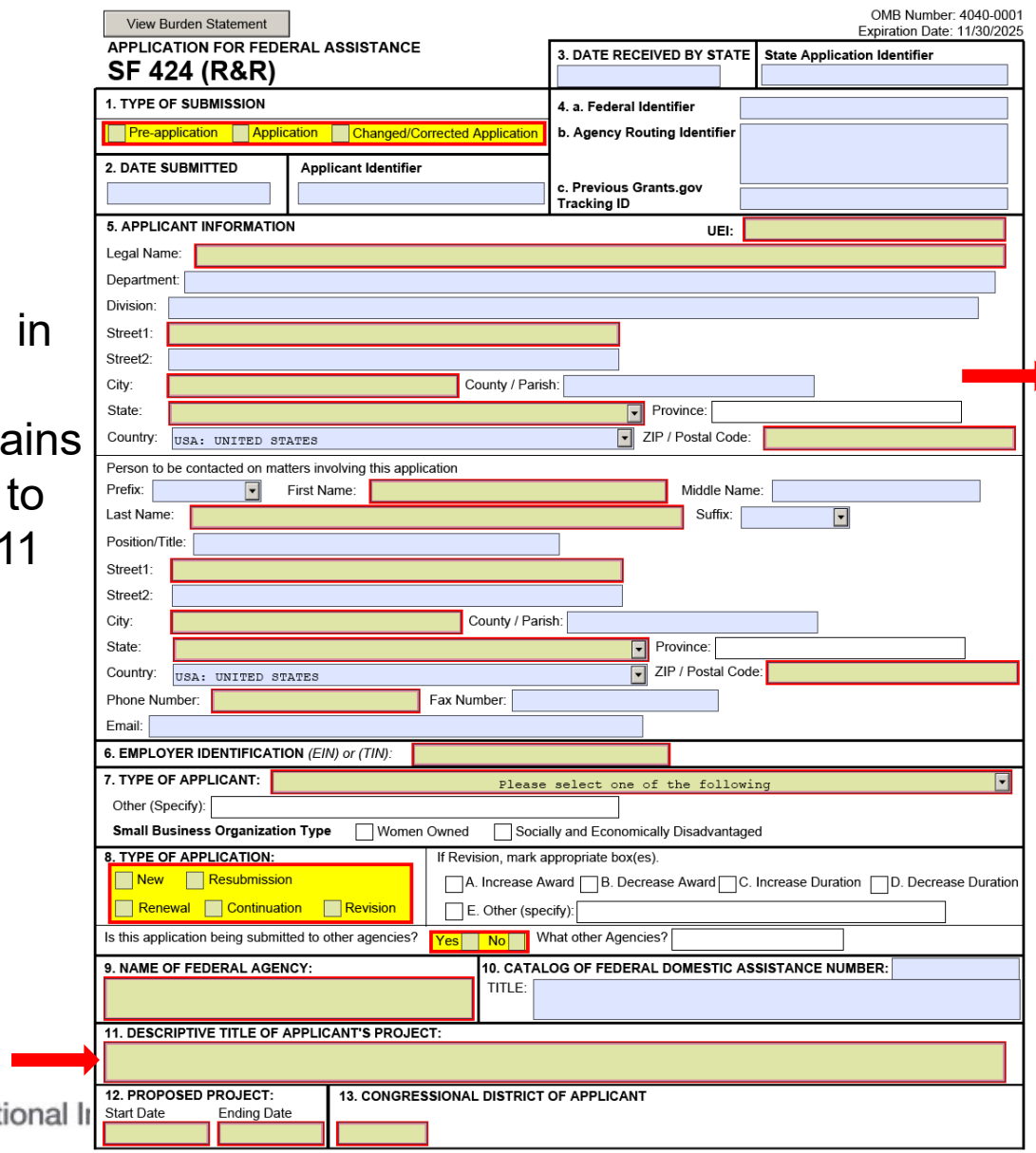






Preparing SF 424 (R&R) Cover Form

- All fields highlighted in red are required
- Following slide contains instructions relating to RLI-S10 for items #11 and #15



View Burden Statement

OMB Number: 4040-0001
Expiration Date: 11/30/2025

APPLICATION FOR FEDERAL ASSISTANCE
SF 424 (R&R)

3. DATE RECEIVED BY STATE | State Application Identifier

1. TYPE OF SUBMISSION
Pre-application | Application | Changed/Corrected Application

4. a. Federal Identifier
b. Agency Routing Identifier
c. Previous Grants.gov Tracking ID

2. DATE SUBMITTED | Applicant Identifier

5. APPLICANT INFORMATION
UEI:
Legal Name:
Department:
Division:
Street1:
Street2:
City: | County / Parish:
State: | Province:
Country: USA: UNITED STATES | ZIP / Postal Code:

Person to be contacted on matters involving this application
Prefix: | First Name: | Middle Name:
Last Name: | Suffix:
Position/Title:
Street1:
Street2:
City: | County / Parish:
State: | Province:
Country: USA: UNITED STATES | ZIP / Postal Code:
Phone Number: | Fax Number:
Email:

6. EMPLOYER IDENTIFICATION (EIN) or (TIN):

7. TYPE OF APPLICANT: Please select one of the following
Other (Specify):
Small Business Organization Type: Women Owned | Socially and Economically Disadvantaged

8. TYPE OF APPLICATION:
New | Resubmission | Renewal | Continuation | Revision
If Revision, mark appropriate box(es).
A. Increase Award | B. Decrease Award | C. Increase Duration | D. Decrease Duration
E. Other (specify):
Is this application being submitted to other agencies? Yes | No | What other Agencies?

9. NAME OF FEDERAL AGENCY:
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:
TITLE:

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

12. PROPOSED PROJECT:
Start Date | Ending Date
13. CONGRESSIONAL DISTRICT OF APPLICANT

SF 424 (R&R) APPLICATION FOR FEDERAL ASSISTANCE — Page 2

14. PROJECT DIRECTOR/PRINCIPAL INVESTIGATOR CONTACT INFORMATION
Prefix: | First Name: | Middle Name:
Last Name: | Suffix:
Position/Title:
Organization Name:
Department:
Division:
Street1:
Street2:
City: | County / Parish:
State: | Province:
Country: USA: UNITED STATES | ZIP / Postal Code:
Phone Number: | Fax Number:
Email:

15. ESTIMATED PROJECT FUNDING
a. Total Federal Funds Requested
b. Total Non-Federal Funds
c. Total Federal & Non-Federal Funds
d. Estimated Program Income

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
a. YES — THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE:
b. NO — PROGRAM IS NOT COVERED BY E.O. 12372; OR
PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances * and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious. or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)
I agree
*The list of certifications and assurances, or an Internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

18. SFLLL (Disclosure of Lobbying Activities) or other Explanatory Documentation
Add Attachment | Delete Attachment | View Attachment

19. Authorized Representative
Prefix: | First Name: | Middle Name:
Last Name: | Suffix:
Position/Title:
Organization:
Department:
Division:
Street1:
Street2:
City: | County / Parish:
State: | Province:
Country: USA: UNITED STATES | ZIP / Postal Code:
Phone Number: | Fax Number:
Email:
Signature of Authorized Representative | Date Signed

20. Pre-application — Add Attachment | Delete Attachment | View Attachment
21. Cover Letter Attachment — Add Attachment | Delete Attachment | View Attachment

Preparing SF 424 (R&R) Cover Form cont.

- Follow all instructions in the SF424 (R&R) Application Guide
- #11 Title - Provide a descriptive title that includes the generic name of the requested instrument
- #15 Estimated Project Funding:
  - Total Federal Funds Requested:
    - For instrument cost of $25,000- $250,000, enter the total cost
    - For instrument cost greater than $250,000, enter $250,000 and provide additional information in Total Non-Federal Funds
  - *Total Non-Federal Funds: The difference between instrument price and $250K. Explain how the difference will be paid in the Equipment section on the SF 424 (R&R)*
  - *Total Federal & Non-Federal Funds: Enter the total cost of the instrument from the quote*
  - *Program Income: Enter zero as this does not apply to this NOFO*

Adding SF424 Other Project Information to your Application

RESEARCH & RELATED Other Project Information

OMB Number: 4040-0001
Expiration Date: 11/30/2025

1. Are Human Subjects Involved? ☐ Yes ☐ No
   1.a. If YES to Human Subjects
   Is the Project Exempt from Federal regulations? ☐ Yes ☐ No
   If yes, check appropriate exemption number. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8
   If no, is the IRB review Pending? ☐ Yes ☐ No
   IRB Approval Date:
   Human Subject Assurance Number:
2. Are Vertebrate Animals Used? ☐ Yes ☐ No
   2.a. If YES to Vertebrate Animals
   Is the IACUC review Pending? ☐ Yes ☐ No
   IACUC Approval Date:
   Animal Welfare Assurance Number:
3. Is proprietary/privileged information included in the application? ☐ Yes ☐ No
4.a. Does this Project Have an Actual or Potential Impact - positive or negative - on the environment? ☐ Yes ☐ No
4.b. If yes, please explain:
4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? ☐ Yes ☐ No
4.d. If yes, please explain:
5. Is the research performance site designated, or eligible to be designated, as a historic place? ☐ Yes ☐ No
5.a. If yes, please explain:
6. Does this project involve activities outside of the United States or partnerships with international collaborators? ☐ Yes ☐ No
6.a. If yes, identify countries:
6.b. Optional Explanation:

7. Project Summary/Abstract		Add Attachment	Delete Attachment	View Attachment
8. Project Narrative		Add Attachment	Delete Attachment	View Attachment
9. Bibliography & References Cited		Add Attachment	Delete Attachment	View Attachment
10. Facilities & Other Resources		Add Attachment	Delete Attachment	View Attachment
11. Equipment		Add Attachment	Delete Attachment	View Attachment
12. Other Attachments	Add Attachments	Delete Attachments	View Attachments	☐

RESEARCH & RELATED Senior/Key Person Profile

PROFILE - Project Director/Principal Investigator

Prefix: * First Name: Middle Name:
* Last Name: Suffix:
Position/Title:
Department:
Organization Name:
Division:
* Street1:
Street2:
* City: County:
* State: Province:
* Country: USA: UNITED STATES * Zip / Postal Code:
* Phone Number: Fax Number:
* E-Mail:
Credential, e.g., agency login:
* Project Role: PD/PI Other Project Role Category:

* Attach Biographical Sketch		Add Attachment	Delete Attachment	View Attachment
Attach Current & Pending Support		Add Attachment	Delete Attachment	View Attachment

PROFILE - Senior/Key Person 1

Prefix: * First Name: Middle Name:
* Last Name: Suffix:
Position/Title:
Department:
Organization Name:
Division:
* Street1:
Street2:
* City: County:
* State: Province:
* Country: USA: UNITED STATES * Zip / Postal Code:
* Phone Number: Fax Number:
* E-Mail:
Credential, e.g., agency login:
* Project Role: Other Project Role Category:

* Attach Biographical Sketch		Add Attachment	Delete Attachment	View Attachment
Attach Current & Pending Support		Add Attachment	Delete Attachment	View Attachment

Next Person

ADDITIONAL SENIOR/KEY PERSON PROFILE(S)		Add Attachment	Delete Attachment	View Attachment
Additional Biographical Sketch(es) (Senior/Key Person)		Add Attachment	Delete Attachment	View Attachment
Additional Current and Pending Support(s)		Add Attachment	Delete Attachment	View Attachment

OMB Number: 4040-0001
Expiration Date: 11/30/2025

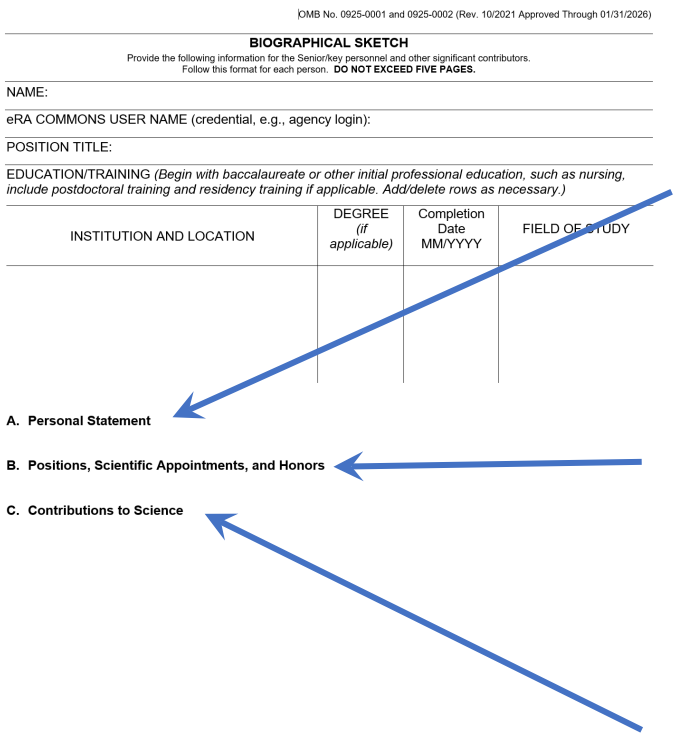
SF 424 (R&R) Other Project Information

- **Project Summary/Abstract**:
  - Provide a succinct description of the requested instrument
  - **Explain the need for the instrument**
  - Describe how access to the instrument will stimulate biomedical research and/or support education and increase research capacity at the applicant institution

- **Project Narrative** (two or three sentences): Describe the relevance of the instrument to public health and its impact on research and education at the applicant institution

- **Bibliography & References Cited**: List only publications that are relevant to the researchers' expertise in operation and usage of the instrument or relevant to projects that will be supported by the instrument

NIH Biographical Sketch



OMB No. 0925-0001 and 0925-0002 (Rev. 10/2021 Approved Through 01/31/2026)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE *(if applicable)*	Completion Date MM/YYYY	FIELD OF STUDY

A. Personal Statement

B. Positions, Scientific Appointments, and Honors

C. Contributions to Science

Biosketch should include:

A. Personal Statement: Describe technical expertise and qualifications directly related to the requested instrument

B. Positions, Scientific Appointments, and Honors: e.g., Tenured, or non-tenured faculty member; awards; etc.

C. Contributions to Science: Record of research accomplishments, student training, mentoring, and teaching if applicable

Who should provide a Biosketch?*:

- Major Users
- Other (Minor) Users
- Technical personnel, as applicable

*SciENcv: *Science Experts Network Curriculum Vitae* is highly recommended to generate a Biosketch

- Each Biosketch should not exceed 5 pages

https://grants.nih.gov/grants/forms/biosketch.htm

Instrumentation Plan

Instrumentation Plan – single PDF titled “Instrumentation Plan”

- **Plan for Research and Education Capacity Building**
  - **Overall Benefit**: Outline how the instrument will benefit the institution's research and/or education, enhance research and education capacity, and contribute to the institution's long-range biomedical research goals
  - **Research and/or Education Projects**: Describe the specific research projects and educational activities that the instrument will enable
  - **Other Users**: Describe how the instrument will benefit other (minor) users
  - **Inventory of Similar Instrumentation:** List similar instruments that exist at the institution and explain why they do not satisfy the research and education needs
  - **Comparison** with other commercially available instruments, if relevant.
- **Technical Expertise:** Describe the technical expertise of individuals who will set up, run and provide training on the instrument, including any manufacturer-provided training
- **Organizational Plan**: Describe day-to-day management, operation, and maintenance of the instrument, how new users will be engaged and trained, and plans for managing access to the instrument for any projects that involve human subjects, vertebrate animals, or biohazards

Equipment Description

Equipment (single PDF attachment)

- Provide a detailed description of the requested instrument, including its manufacturer, model number, specific features, and accessories.
- Include an itemized budget for the main instrument and requested accessories, as well as shipping costs and any applicable taxes including import duties or tariffs.
- **Required:** Include an itemized quote from the vendor with appropriate discounts, accessories, training services, warranties, shipping, and service contracts (up to five years are encouraged)
- When applicable, describe the total Non-Federal Funds cited in the SF424 Cover form (for example, funds provided by the institution)

Applications that do not include a quote will be deemed incomplete

and will be withdrawn without review!!!

Page Limitations

- Follow page limitations instruction described in the SF 424 Application Guide and the Table of Page Limits
- **The Instrumentation Plan** (see Other Attachments section of the SF424(R&R) Other Project Information form) must include the following sections and **each section** may not exceed the following page limitations:
  - **Plan for Research and Education Capacity Building-** up to 4 pages
  - **Technical Expertise-** up to 1 page
  - **Organizational Plan-** up to 2 pages

Letters of Support

Letters of Support - combined in a single PDF named "Letters of Support"

Must include one LoS from the **Authorized Organization Representative or Business Official** that:

- Verifies the institution meets each of the eligibility criteria
- Indicate the institutional commitment to instrument housing, accessibility, and maintenance
- Provide information regarding institutional support for personnel, who need not be a facility manager
- If applicable, state the amount of matching funds for instrument purchase and describe a containment plan for animals or infectious materials by the institutional biosafety officer, etc.

Review Criteria and Related Application Components

Review Criterion	Application Component
Overall Benefit	Project Summary/Abstract; Instrumentation Plan/Plan for Research and Education Capacity Building/Overall Benefit; All sections
Justification of Need	Instrumentation Plan/Plan for Research and Education Capacity Building
Technical Expertise	Instrumentation Plan/Plan for Research and Education Capacity Building/Technical Expertise; Biosketches; Bibliography & References
Research and Education Projects	Instrumentation Plan/Plan for Research and Education Capacity Building
Administration	Instrumentation Plan/Organizational Plan
Institutional Commitment	Letters of Support







Questions?

Please type them into the chat

Reach out to the RLI-S10 management team at:

RLIS10Mailbox