FACT BOOK

National Cancer Institute The information set forth in this publication is compiled and amended annually by the financial management staff of the National Cancer Institute and is intended primarily for use by members of the Institute, principal advisory groups to the Institute and others involved in the administration and management of the National Cancer Program. Questions regarding any of the information contained herein may be directed to the Financial Management Branch, National Cancer Institute, 9000 Rockville Pike, Bethesda, Maryland, 20892.

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This publication may be viewed on the World Wide Web by pointing a browser to the Financial Management Branch homepage on the National Cancer Institutes website: www.cancer.gov.

Fiscal Year 2000 Annual Report*

BUDGET IN REVIEW

This report provides a summary of the distribution of the FY 2000 budget among the various National Cancer Institute (NCI) research programs and funding mechanisms, funding policies influencing grant awards, and comparisons with prior year allocations. Additional information on the NCI budget is accessible from the NCI Home Page (http://www.nci.nih.gov/).

Summary

Funds available to the NCI in fiscal year 2000 totaled over \$3.311 billion, reflecting an increase of 15% and \$420 million over the previous fiscal year. This increase represented the largest single year dollar expansion in the NCI's 63 year existence. Thus, the NCI research community was able to initiate many of the research opportunities and challenges presented in the annual NCI Budget Proposal: *The Nation's Investment in Cancer Research*.

Fiscal highlights from FY 2000 include:

- Of the \$420 million increase, over 54% --\$225 million -- was allocated for Research Grants
- The greatest number of Research Project Grants (RPG)-- 4,526 -- in NCI's history were funded
- Nearly 1/3 rd of the total NCI budget supported ongoing non-competing (Type 5) RPGs
- Over 1/4th of the RPGs awarded were new (Type 1) or competing renewal (Type 2)awards
- RO1 grants were funded to the 22nd percentile
- Over 300 grants and \$67 million were funded as Small Business Innovation Research awards
- \$83 million or 20% of the FY 2000 increase was allocated for Cancer Prevention & Control
- The percent of the budget that Intramural Research represented dropped to 15.3%, down from 18% in 1996
- Staff and funds that supported the research contract effort located at the NCI at Frederick were transferred into the NCI Intramural Research program
- Research Career training activities (K awards) expanded by 1/3 rd

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^{*} This Executive Summary was presented on December 5, 2000 to the National Cancer Advisory Board (NCAB) of National Cancer Institute (NCI) in response to their request for an annual budget report and is designed to be an extract of the major financial events in 2000. Further details of these events are given in the remaining sections of this Fact Book.

Distribution of the Budget by Funding Mechanism for FY 1999 and 2000

Summary Points

Of the \$420 million increase:

- \$225 million, representing 54% of the increase was allocated for the Research Grants budget mechanism; an additional \$83 million (20%) was funded through the Cancer Prevention & Control budget mechanism
- Over \$157 million or 1/3rd of the increase was provided to the Research Project Grant (RPG) category, excluding Small Business Innovation Research awards
- Within the RPG category, nearly \$114 million of the increase was allocated to cover increased expenses for non-competing grants
- 4,526 RPGs, of which 306 were Small Business Innovation Research awards, were supported
- Funds for training and career development of current and future research scientists funded through Research Career Awards grew by over 33%
- Staff and funds that supported the contract located at the NCI at Frederick were transferred into the NCI Intramural Research program in FY 2000

NCI Dollars by Mechanism for FY 1999 and 2000

(in thousands)

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			Change '99-00		
	1999	2000*	Am't	%	
Research Project Grants:					
Noncompeting	\$936,030	\$1,050,107	\$114,077	12%	
Admin Supplements	22,831	23,721	890	4%	
Competing	344,995	387,083	42,088	12%	
Subtotal RPG	1,303,856	1,460,911	157,055	12%	
Small Business Innovation Research	57,917	67,090	9,173	16%	
Total RPG	1,361,773	1,528,001	166,228	12%	
Cancer Centers	153,157	169,068	15,911	10%	
SPOREs	42,564	52,282	9,718	23%	
Total, Centers & SPOREs	195,721	221,350	25,629	13%	
Research Career Program	30,802	40,869	10,067	33%	
Cancer Education	16,761	16,821	60	0%	
Clinical Cooperative Groups	120,175	144,608	24,433	20%	
Other Grants	31,869	30,378	-1,491	-5%	
Subtotal, Other	199,607	232,676	33,069	17%	
Total, Research Grants	1,757,101	1,982,027	224,926	13%	
National Research Service Awards	57,168	56,179	-989	-2%	
R&D Contracts	214,133	251,579	37,446	17%	
Intramural Research	448,226	507,785	59,559	13%	
Research Management & Support	105,600	120,586	14,986	14%	
Cancer Prevention & Control	306,342	389,425	83,083	27%	
Construction	3,000	3,500	500	17%	
Total NCI	2,891,570	3,311,081	419,511	15%	
AIDS research included above	[239,190]	[244,623]	[5,433]	2%	

Note: Staff and funds that supported the research contract effort located at the NCI at Frederick were transferred into the NCI Intramural Research program in FY2000

^{*} Does not include \$3.5 million received by the NCI from the US Postal Service's sale of the Breast Cancer Stamp

Percent Share of Total NCI Dollars

- Cancer Prevention and Control's part of the budget has increased from 9.6% to 11.8%
- Intramural Research's share has declined from 18.0% to 15.3%
- Other mechanisms show slight shifts in their percentage share
- To move a percentage point in FY 2000 would have required a redirection of approximately \$33 million

	1996	1997	1998	1999	2000
Research Project Grants	45.9%	47.0%	48.7%	47.1%	46.1%
Cancer Centers	6.1%	5.5%	5.3%	5.3%	5.1%
SPOREs	1.1%	1.2%	1.2%	1.5%	1.6%
Clinical Cooperative Groups	4.0%	3.7%	3.7%	4.2%	4.4%
Intramural Research	18.0%	17.3%	17.3%	15.5%	15.3%
R&D Contracts	7.4%	7.7%	6.8%	7.4%	7.6%
Cancer Prevention & Control	9.6%	9.7%	9.9%	10.6%	11.8%

Funding Trends

(in millions)

- The NCI budget has increased by almost \$1.1 billion or 47% from FY1996
- Funds for Research Project Grants have increased 48%, the same rate as the total NCI budget
- SPOREs, Clinical Cooperative Groups, Cancer Prevention & Control, and R&D Contracts have experienced percentage increases greater than the total NCI growth
- Intramural Research and Centers have expanded at a smaller percentage than the total NCI growth

	1996	1997	1998	1999	2000
Total NCI	\$2,254.9	\$2,389.1	\$2,527.5	\$2,891.6	\$3,311.1
Research Project Grants	1,034.5	1,123.3	1,230.8	1,361.8	1,528.0
Intramural Research	406.9	412.5	437.8	448.2	507.8
Cancer Centers	138.4	131.9	134.0	153.2	169.1
SPOREs	24.7	28.8	30.9	42.6	52.3
Clinical Cooperative Groups	89.2	88.5	93.0	120.2	144.6
Cancer Prevention & Control	216.2	231.9	249.9	306.3	389.4
R&D Contracts	166.3	184.3	171.1	214.1	251.6

	1996 to	1997 to	1998 to	1999 to	1996 to
% Growth by Mechanism	1997	1998	1999	2000	2000
Total NCI	6%	6%	14%	15%	47%
Research Project Grants	9%	10%	11%	12%	48%
Intramural Research	1%	6%	2%	13%	25%
Cancer Centers	-5%	2%	14%	10%	22%
SPOREs	17%	7%	38%	23%	112%
Clinical Cooperative Groups	-1%	5%	29%	20%	62%
Cancer Prevention & Control	7%	8%	23%	27%	80%
R&D Contracts	11%	-7%	25%	17%	51%

Research Project Grants

(in thousands)

- 90% of competing dollars supported grants awarded within the established payline; 10% supported grants as an exception to the payline
- RFA funds remained at the FY 1999 dollar level and were 6% of FY 2000 competing dollars
- Monies used to fund exception grants decreased in FY 2000, to 11% of competing funds compared with 18% in FY 1999
- On average grants were reduced 11-12% below recommended levels
- Funds -- \$15 million -- for Accelerated Executive Review permitted the award of 53 grants
- Research applications submitted to NCI increased by approximately 4%

	1999		20	000*
_	No.	Amount	No.	Amount
Total RPGs	4,351	\$1,361,773	4,526	\$1,528,001
Small Business Innovation Research	291	57,917	306	67,090
RPGs, less SBIR Program	4,060	1,303,856	4,220	1,460,911
Continuation or non-competing grants funded	2,816	930,346	3,101	1,040,265
Competing grants funded	1,244	344,995	1,119	387,083
Administrative supplements		22,831		23,721
Partial assessment for DHHS Program Evaluation		5,684		9,842
Funds set aside within competing dollars for:				
Grants within paylines:	1,057	283,454	986	345,621
Traditional R01	746	189,770	724	216,671
Program projects (P01)	28	38,461	39	73,307
RFA grants	71	24,176	56	24,450
RFA's share of competing grant funds		7.0%		6.3%
Exception grants	187	61,541	132	41,462
Exception grants share of competing grant funds		18%		11%
Competing application requests	3,878		4,026	
Funding Success Rate	32%		28%	
Percentile funding for R01 grants (R01)	24th		22^{nd}	
Average cost for competing grants		\$277		\$346
Average reduction below recommended levels		-11%		-10% **

^{*} Does not include \$3.5 million received by the NCI from the US Postal Service's sale of the Breast Cancer Stamp

^{**} P01 round 2 and P01 round 3 average reduction from recommended levels was -15%.

Research Career Awards – "K" Program

(in thousands)

- The Research Career Award mechanism had a 33% growth in FY2000
- K08 Clinical Investigator award, K23 Mentored Patient Oriented and K24 Mid-Career Patient Oriented Awards received funding emphasis
- The National Heart, Lung, and Blood Institute is administering the K30 Institutional Curriculum Awards; NCI's effort in FY 2000 was \$1.6 million

		1999		200	00
	_	No.	Amount	No.	Amount
K01	Temin Awards	25	\$2,809	21	\$2,660
K01	Minority Mentored Career Development Award	16	2,144	37	4,729
	Subtotal K01s	41	4,953	58	7,389
K04	Research Career Development (phasing out)	6	414	2	127
K07	Preventive Oncology	38	3,618	44	4,469
K08	Clinical Investigator	121	11,461	133	14,402
K11	Physician Investigator (phasing out)	9	823	2	181
K12	Institutional Clinical Oncology Research	20	6,833	21	7,671
K22	Transition Career Development	0	0	4	560
K23	Patient-Oriented Career	10	1,310	23	2,964
K24	Patient-Oriented CareerMid Career	13	1,390	29	3,108
	Subtotal Research Career Program	258	30,802	316	40,871
K30	Institutional Curriculum Awards- Administered	4	800	8	1,600
	by NHLBI				
	Total Research Career Program	262	31,602	324	42,471

Research Dollars by Various Cancers

(in millions)

- Funding listed below for various cancers may overlap
- Funding for cancers listed below do not represent the entire NCI budget

	1996	1997	1998	1999	2000
Total NCI Budget	\$2,254.9	\$2,389.1	\$2,551.3	\$2,891.0	\$3,311.1
Brain & Central Nervous System Cancers	41.6	46.1	54.3	63.5	71.9
Breast Cancer	317.5	332.0	348.7	387.2	438.7
Cervical Cancer	51.6	55.8	58.0	66.3	67.0
Colorectal Cancer	98.0	103.2	121.0	152.9	175.8
Head and Neck Cancers	34.3	38.5	41.9	45.9	47.0
Hodgkin's Disease	8.0	8.1	8.3	8.2	9.4
Leukemia	79.3	91.2	103.4	122.2	141.7
Liver Cancer	31.4	35.3	38.1	39.8	46.2
Lung Cancer	119.4	132.4	139.8	151.0	175.0
Melanoma	36.0	43.3	50.3	60.1	67.9
Non Hodgkin's Lymphoma	49.9	52.7	57.1	66.2	70.4
Ovarian Cancer	36.5	41.7	40.8	56.5	65.5
Pancreatic Cancer	8.1	10.2	14.2	17.3	20.0
Prostate Cancer	71.7	82.3	86.9	135.7	203.2
Stomach Cancer	7.6	9.3	8.2	7.6	8.2
Uterine Cancer	8.1	8.1	12.2	13.8	16.0

National Cancer Institute

Director=s Biography Richard D. Klausner, M.D.

Dr. Klausner was appointed as the Director of the National Cancer Institute (NCI) on August 1, 1995. From 1984 until 1997 he was Chief of the Cell Biology and Metabolism Branch of the National Institute of Child Health & Human Development. Dr. Klausner received his undergraduate degree from Yale University and his medical degree from Duke University. After post-graduate medical training at Harvard, he began his research career at the National Institutes of Health in 1979.

Dr. Klausner is well known for his contributions to multiple aspects of cell and molecular biology. Over the past several years, he has been recognized as one of the 20 most highly cited scientists in the world in this burgeoning area of biology and biomedical research. Dr. Klausner-s research has illuminated the genetics and biochemistry of metals as essential but toxic nutrients for virtually all forms of life, has illuminated the pathways by which molecules traffic and speak to each other within the cell, and has described novel mechanisms by which tumor suppressor genes function.

His work has been recognized with numerous honors and awards including the Dickson Prize and the William Damashek Prize for Major Discoveries in Hematology. In 1993, Dr. Klausner was elected to the National Academy of Sciences and chaired their project charged with writing standards for science education for the United States from kindergarten through 12th grade. This project represents the first comprehensive attempt to describe a vision of scientific literacy for all students and to provide the criteria for the educational system required to achieve the fulfillment of that vision.

Dr. Klausner is the past President of the American Society for Clinical Investigation. In October 1996, he was elected to the Institute of Medicine. He is the author of over 300 scientific articles and several books.

Former Directors of the National Cancer Institute

Samuel Broder, M.D.

December 1988-March 1995

Dr. Broder joined NCI in 1972 as a Clinical Associate in the Metabolism Branch. In 1981, he became Associate Director for NCI's Clinical Oncology Program. In 1985 he led the laboratory team that discovered the therapeutic effects of AZT and other drugs now approved for the treatment of AIDS including DDI and DDC.

Vincent T. DeVita, Jr., M.D. January 1980 - June 1980 (Acting) July 1980 - August 1988

Dr. DeVita joined NCI in 1963 as a Clinical Associate in the Laboratory of Chemical Pharmacology. He served NCI as head of the Solid Tumor Service, Chief of the Medicine Branch, Director of the Division of Cancer Treatment and Clinical Director prior to his appointment as Director of NCI.

Arthur Canfield Upton, M.D.July 1977 - December 1979

Prior to his tenure as NCI Director, Dr. Upton served as Dean of the School of Basic Health Sciences at the State University of New York at Stony Brook.

Frank Joseph Rauscher, Jr., Ph.D. May 1972 - October 1976

Dr. Rauscher served as Scientific Director for Etiology, NCI, prior to his appointment as Director of NCI in 1972.

Carl Gwin Baker, M.D. November 1969 - July 1970 (Acting) July 1970 - April 1972

During his tenure with PHS, Dr. Baker served as Scientific Director for Etiology, NCI, and as Acting Director of NCI prior to his appointment as Director in July 1970.

Kenneth Milo Endicott, M.D. July 1960 - November 1969

Dr. Endicott served as Chief of the Cancer Chemotherapy National Service Center, PHS, and as Associate Director, NIH, prior to being appointed Director, NCI in July 1960.

John Roderick Heller, M.D. May 1948 - June 1960

Dr. Heller joined PHS in 1934 and became Chief of the Venereal Disease Division prior to his appointment as Director of NCI in 1948.

Leonard Andrew Scheele, M.D.July 1947 - April 1948

Dr. Scheele served in various capacities during his tenure with PHS prior to his appointment as Assistant Chief and, subsequently, Director of NCI in July 1947.

Roscoe Roy Spencer, M.D. August 1943 - July 1947

Dr. Spencer became NCI's first Assistant Chief and, subsequently, was appointed Director of the Institute in 1943.

Carl Voegtlin, Ph.D. January 1938 - July 1943

Dr. Voegtlin served as Professor of Pharmacology and Chief of the Division of Pharmacy at the Hygienic Laboratory prior to becoming the first Director of NCI in 1938.

National Cancer Advisory Board

Membership and Term

2002 ChairpersonPhillip A. Sharp, Ph.D.Center for Cancer ResearchMassachusetts Institute of Technology

Cambridge, Massachusetts 02139

- 2006 Samir Abu-Ghazaleh, M.D. Avera Cancer Institute Sioux Falls, South Dakota 57105
- 2006 James O. Armitage, M.D.
 College of Medicine
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- 2006 Ralph S. Freedman, M.B.B.Ch., Ph.D. Department of Gynecologic Oncology The University of Texas Houston, Texas 77030
- 2006 James H. French , M.D. The Center for Plastic Surgery Annandale, Virginia 22003
- 2006 Arthur W. Nienhuis, M.D.St. Jude Children's Research Hospital Memphis, Tennessee 38105
- 2004 Mr. Stephen C. Duffy
 American Academy of Facial Plastic
 & Reconstrutive Surg. & International
 Federation of Facial Plastic Surg. Society
 Alexandria, Virginia 22314
- 2004 Elmer E. Huerta, M.D., M.P.H. Cancer Risk Assess. & Screening Ctr. Washington Hospital Center Washington, DC 20010
- 2004 Susan M. Love, M.D.
 Department of Surgery
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- 2004 The Honorable James E. McGreevey Mayor, Woodbridge Township Woodbridge, New Jersey 07095
- 2004 Larry Norton, M.D.
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- 2002 Richard J. Boxer, M.D.Medical College of WisconsinUrology Specialists S.C.Milwaukee, WI 53209
- 2002 Frederick P. Li, M.D.
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- 2002 Sandra Millon-Underwood, Ph.D., R.N.
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- 2002 Ivor Royston, M.D.Sidney Kimmel Cancer CenterSan Diego, California 92121
- 2002 Ms. Ellen L. StovallNational Coalition for Cancer SurvivorshipSilver Spring, MD 20910

Executive Secretary Marvin R. Kalt, Ph.D.

Committee Management Officer
Ms. Linda Quick-Cameron

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Deputy Director, Office of Biological
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Linda Rosenstock, M.D., M.P.H. Director National Institute for Occupational Safety and Health Washington, D.C. 20201-0001

The Honorable Donna E. Shalala, Ph.D. Secretary
Department of Health and Human Services
Washington, D.C. 20201

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NCAB SUBCOMMITTEE ASSIGNMENTS

Subcommittee on Activities and Agenda

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Dr. Frederick P. Li

Dr. Susan M. Love

Dr. Arthur W. Neinhuis

Dr. Larry Norton

Ms. Ellen Stovall

EXECUTIVE SECRETARY: Dr. Marvin Kalt

(301) 496-5147

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Dr. Richard J. Boxer

Dr. Ralph S. Freedman

Dr. Elmer E. Huerta

Dr. Larry Norton

Dr. Kenneth Olden (NIEHS, Ex Officio)

Dr. Amelie G. Ramirez

Dr. Phillip A. Sharp (Ex Officio)

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Dr. Susan M. Love

Dr. Alison Martin (FDA, Ex Officio)

Dr. Ivor Royston

Ms. Ellen Stovall

ACTG. EXECUTIVE SECRETARY: Dr. Ellen Feigal

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Subcommittee on Special Actions

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Committee of the Whole

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Hon. James E. McGreevey

Dr. Sandra Millon-Underwood

Dr. Arthur W. Nienhuis

Dr. Amelie G. Ramirez

Dr. Phillip A. Sharp (Ex Officio)

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Mr. Steven C. Duffy

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Dr. Amelie G. Ramirez

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Dr. Sandra Millon-Underwood

Dr. Larry Norton

Dr. Amelie G. Ramirez

EXECUTIVE SECRETARY: Dr. Susan Sieber

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Board of Scientific Counselors

Intramural Programs

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	Subcommittee A	: Clinical Sciences	
Appointees	Expiration of Appointment	Appointees	Expiration of Appointment
Martin Abeloff, MD, Chair	2001		
Chi V Dang M.D., Ph.D. Elizabeth Fontham, DPH Laurence Kolonel, M.D., Ph.D. Richard O'Reilly, M.D, Alice Pentland, M.D. Arthur Porter, M.D. Michael Thun, M.D, Carlos Arteaga, M.D. Martin Cheever, M.D. David Hunter, SCD Michael Kastan, M.D. Olufunmilayo Olopade, MBBS David Savitz, Ph.D.	2005 2005 2005 2005 2005 2005 2005 2004 2004	Margaret Tempero, M.D. Michael Cleary, M.D. Deborah Collyar, B.S. Timothy Eberlein, M.D. Elizabeth Holly, Ph.D., Frank McCormick, Ph.D. Beverly Mitchell, M.D. James Mule, Ph.D. Theodore Colton, SCD Mark Israel, M.D. Timothy Kinsella, M.D. John Mendelsohn, M.D. John Potter, MBBS, Ph.D.	2004 2003 2003 2003 2003 2003 2003 2003
	Subcommittoo	Executive Secretary - Abby Sandler, Ph.D 3: Basic Sciences).
5 0.''I 5 5 0 :		5. Basic Sciences	
Bruce Stillman, Ph.D., Chair Frederick Alt, Ph.D. Gideon Dreyfuss, Ph.D. Richard Kolodner, Ph.D. Brook Mossman, Ph.D. Dinshaw Patel, Ph.D. Eileen White, Ph.D, Jon Clardy, Ph.D. David Housman, Ph.D. Thomas Kelly, Ph.D., M.D. Gregory L. Verdine, Ph.D. E. Peter Geiduschek, Ph.D.	2001 2005 2005 2005 2005 2005 2005 2004 2004	Suzanne Sandmeyer, Ph.D. Andrey Shaw, M.D. Mario Capecchi, Ph.D. Stephen Goff, Ph.D. Beatrice Hahn, M.D. Inder Verma, Ph.D. Max Cooper, M.D. Naomi Rosenberg, Ph.D. Anna Marie Skalka, Ph.D. Craig Thompson, M.D. Robert Tjian, Ph.D.	2003 2003 2002 2002 2002 2002 2001 2001

Executive Secretary - Florence Farber, Ph.D.

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Hoda Anton-Culver, Ph.D.	2004	Franklyn G. Prendergast, M.D., Ph.D.	2002				
Esther H. Chang, Ph.D.	2004	Joseph V. Simone, M.D.	2002				
Mary Beryl Daly, M.D., Ph.D.	2004	Louise C. Strong, M.D.	2002				
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Tyler E. Jacks, Ph.D.	2002	Robert C. Young, M.D.	2001				

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Director and CEO North General Hospital

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Frances M. Visco, Esq. 2000

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National Breast Cancer Coalition

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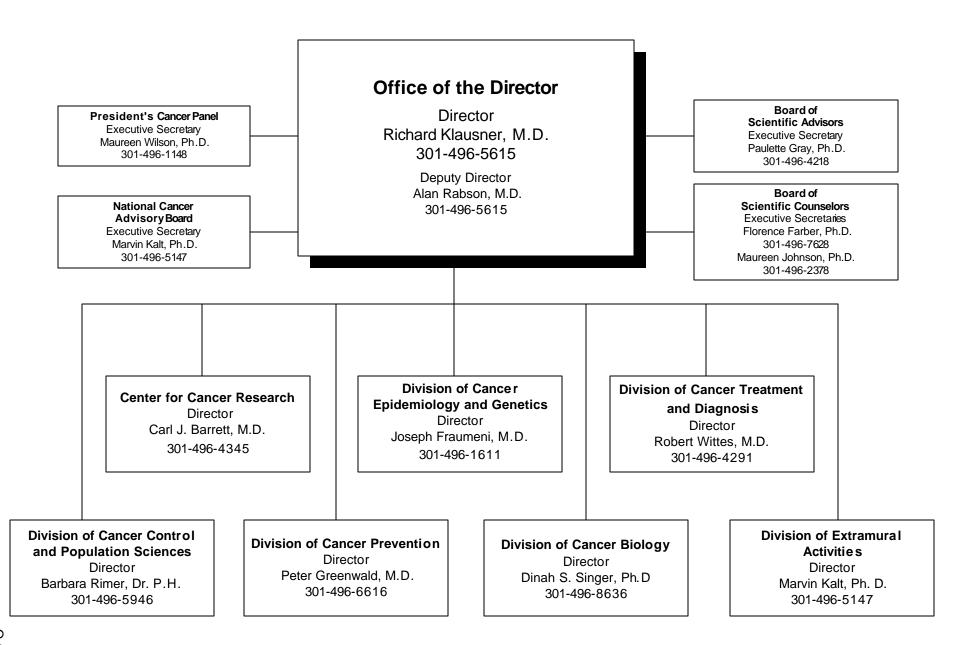
Director, Division of Cancer Treatment and Diagnosis

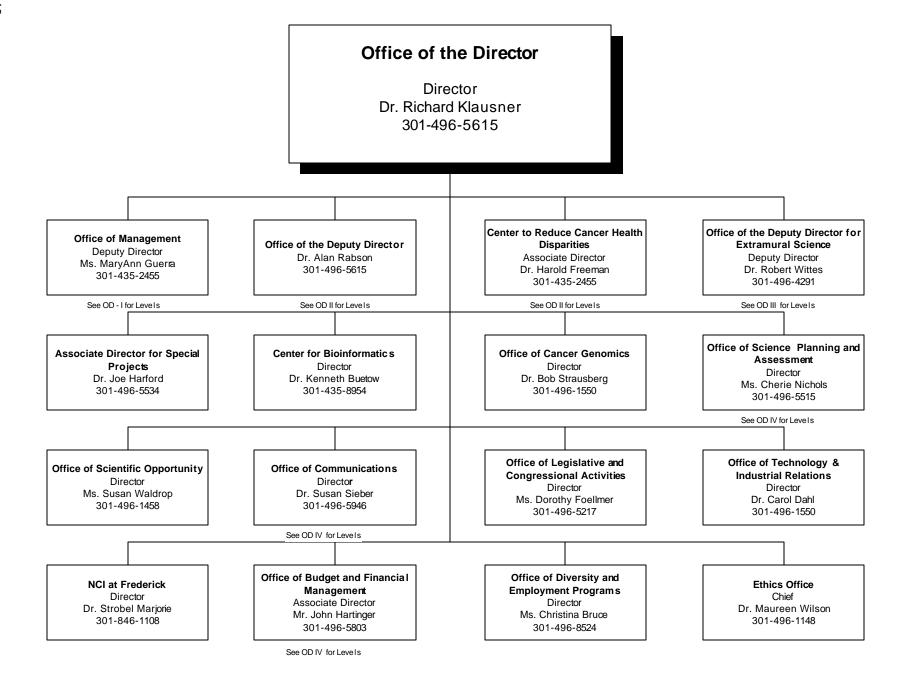
Deputy Director for Extramural Science

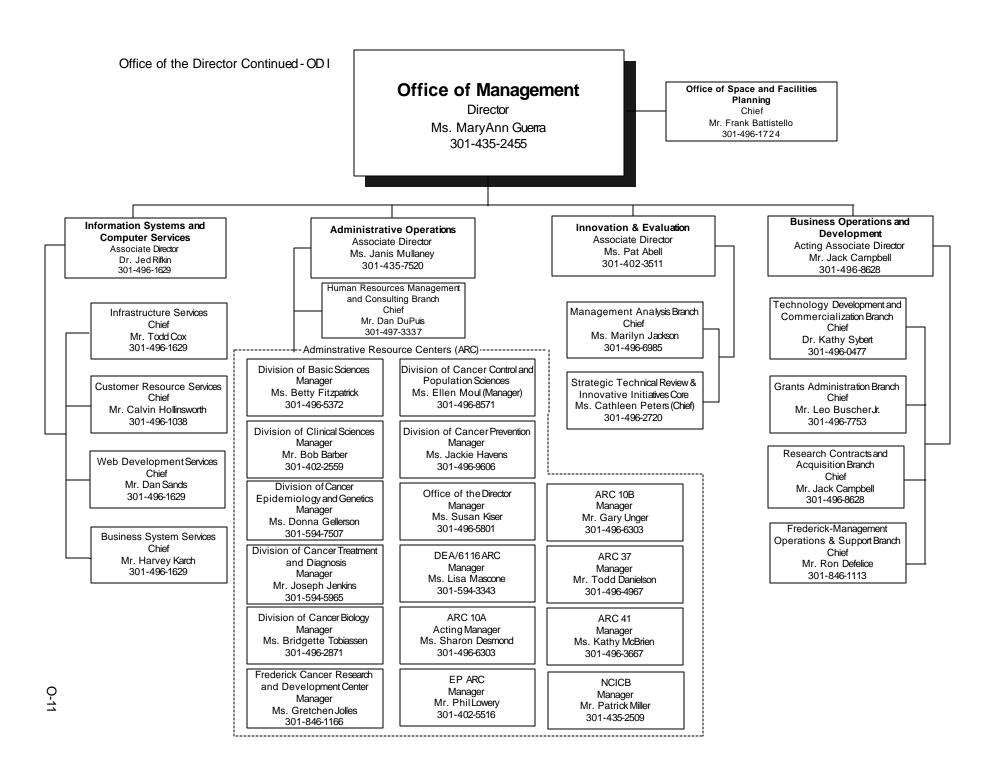
Sandy Koeneman, M.S., M.P.A.

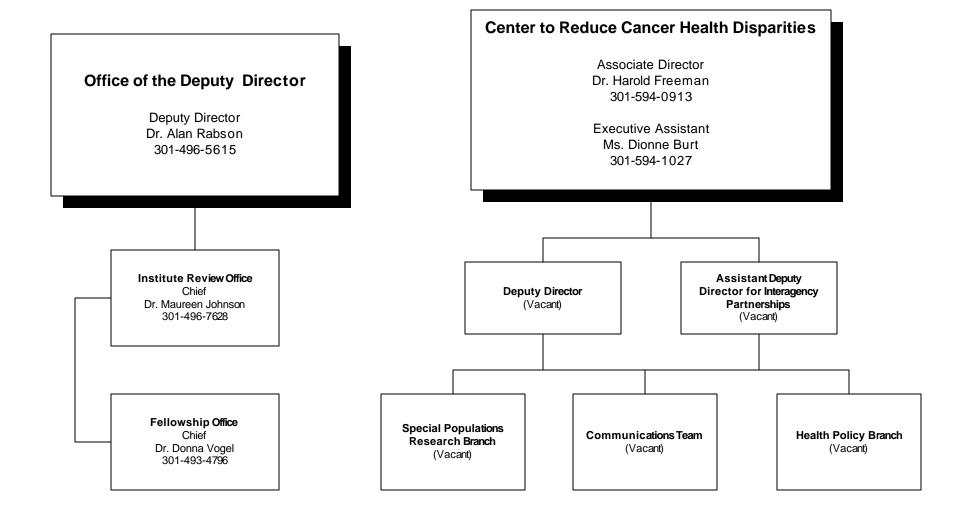
Executive Secretary

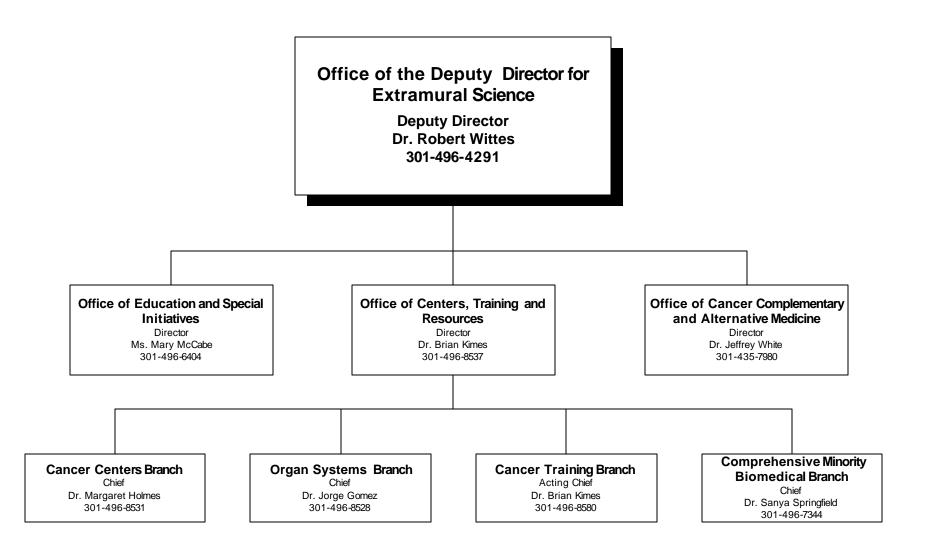
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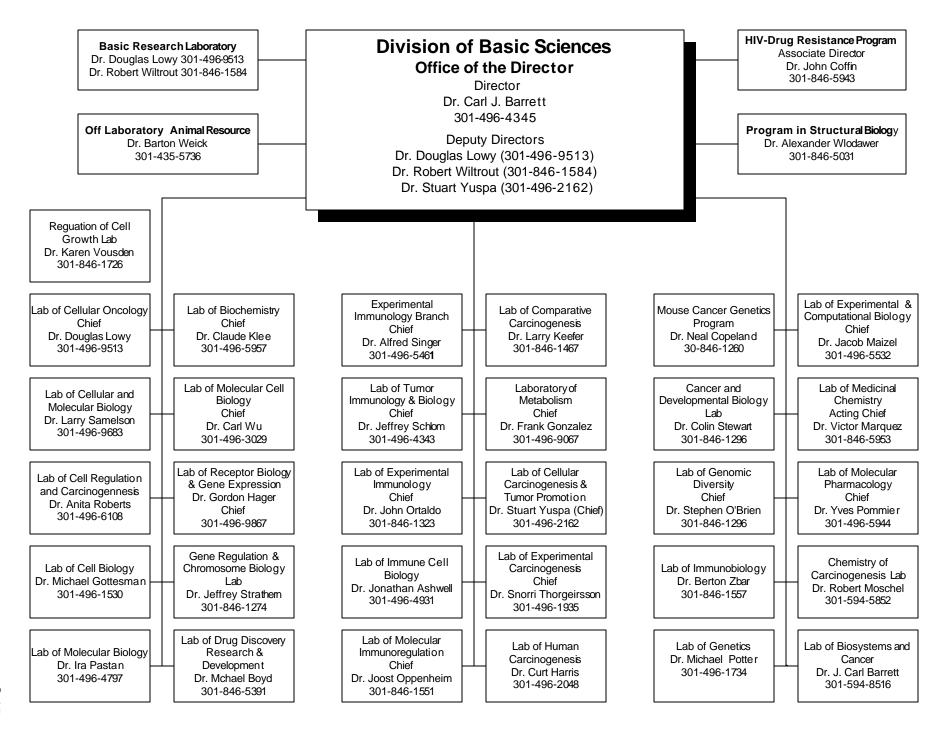


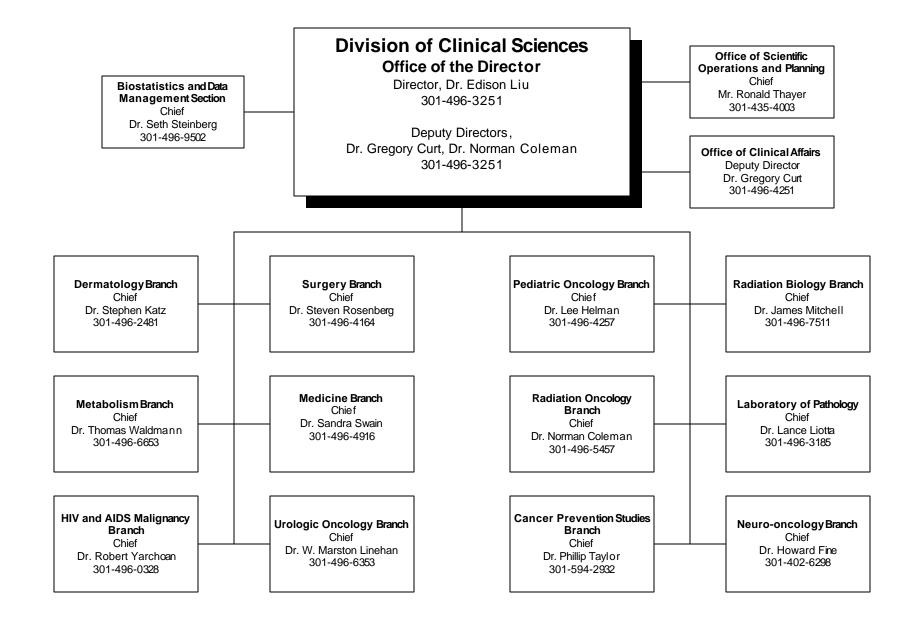
Office of Communications Director Dr. Susan Sieber 301-496-5946 Cancer Information Products and Systems Associate Director Dr. Ann Thum 301-496-9096 Outreach and Partnerships Associate Director Ms. Elisabeth Handley 301-402-5575 Media and Public Communications Acting Associate Director Mr. Jim Mathews 301-496-6631 Communications Coordination Associate Director Ms. Nelvis Castro 301-594-5114 **Technologies and Services** Associate Director Mr. Michael Moore 301-594-3331

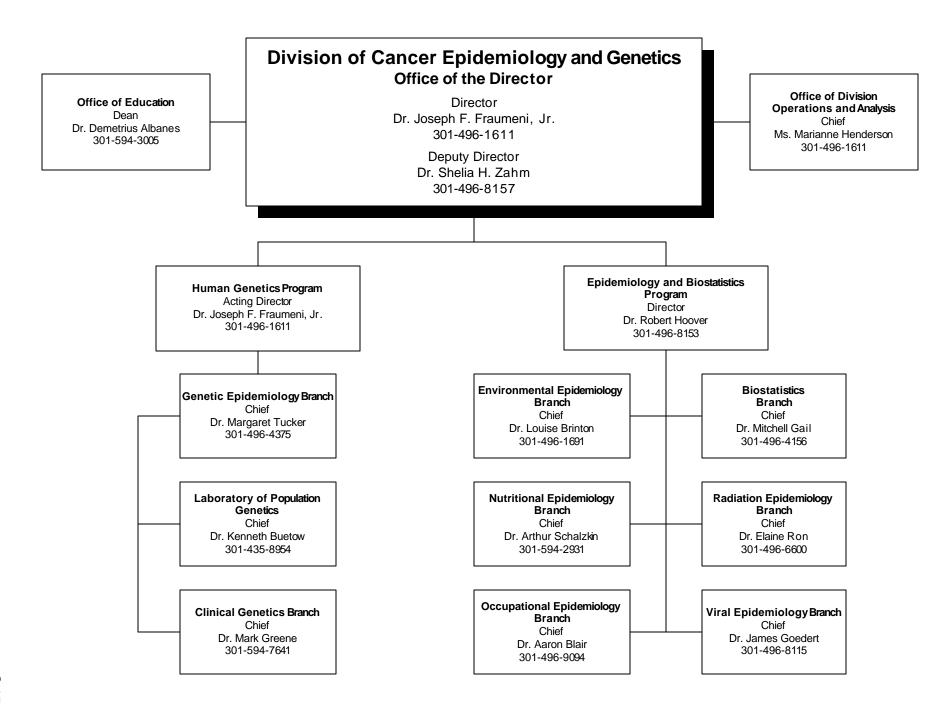
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Resources Branch Chief Dr. Kirt J. Vener 301-496-7174

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Research Program Review Section

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Research Resources Review Section

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Number of 1997 Deaths for the Five Leading Cancer Sites by Age Group and Sex

All Ages		Under 15		15-34		35-54		55-74		75+	
Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Lung & Bronchus	Lung & Bronchus	Leukemia	Leukemia	Leukemia	Breast	Lung & Bronchus	Breast	Lung & Bronchus	Lung & Bronchus	Lung	Lung & Bronchus
91,227	61,922	299	233	585	530	8,563	9,588	51,420	32,541	31,158	23,457
Prostate	Breast	Brain & ONS	Brain & ONS	NHL	Leukemia	Colon & Rectum	Lung & Bronchus	Colon & Rectum	Breast	Prostate	Colon & Rectum
32,889	41,943	228	207	468	381	2,788	5,810	12,873	16,992	22,349	16,494
Colon & Rectum	Colon & Rectum	Endocrine	Endocrine	Brain & ONS	Cervix	NHL	Colon & Rectum	Prostate	Colon & Rectum	Colon & Rectum	Breast
28,075	28,619	107	74	412	303	2,013	2,262	10,132	9,716	12,207	14,833
Pancreas	Pancreas	NHL	Soft Tissue	Soft Tissue	Brain & ONS	Brain & ONS	Ovary	Pancreas	Ovary	Pancreas	Pancreas
13,470	14,205	47	52	204	254	1,700	1,958	6,860	6,087	4,966	7,607
NHL	Ovary	Soft Tissue	Bone & Joints	Colon & Rectum	NHL	Pancreas	Cervix Uteri	NHL	Pancreas	Leukemia	NHL
12,286	13,507	42	31	189	194	1,606	1,740	5,256	5,598	4,657	5,849

Source: National Center for Health Statistics (NCHS) public - use file for 1997 deaths.

NHL = Non Hodgkin's Lymphoma ONS = Other Nervous System

Relationship of Cancer to the Leading Causes of Death in the United States, 1997

		Number	Age	Percent
		of	Adjusted	of
Rank	Cause	Deaths	Rate*	Total
				Deaths
	All Causes	2,313,844	652.0	100.0%
1	Heart Disease	726,906	193.7	31.4%
2	CANCER	539,566	163.7	23.3%
3	Cerebrovascular Diseases	159,786	40.6	6.9%
4	Emphysema, Bronchitis & Asthma	109,022	30.5	4.7%
5	Accidents	95,544	31.4	4.1%
6	Pneumonia & Influenza	86,443	21.1	3.7%
7	Diabetes Mellitus	62,634	18.2	2.7%
8	Human Immunodeficiency Virus Infection	30,517	10.2	1.3%
9	Suicide and Self-Inflicted Injury	25,331	6.7	1.1%
10	Cirrhosis of the Liver	25,171	8.2	1.1%
11	Nephritis & Nephrosis	22,395	6.0	1.0%
12	Septicemia	19,798	7.3	0.9%
13	Homicide	16,724	4.7	0.7%
14	Atherosclerosis	16,510	5.0	0.7%
15	Aortic Aneurysm	16,056	3.7	0.7%
	Other and III-Defined	361,441	101.1	15.6%

Source: NCHS Public-use file for 1997 deaths.

^{*} Rate per 100,000 Population and age adjusted to 1970 US population

Estimated New Cancer Cases and Deaths by Sex for All Races 2000

	Estimated New Cases		Estimated Deaths			
Primary Site	Total	Male	Female	Total	Male	Female
All Sites	1,220,100	619,700	600,400	563,100	291,100	272,000
Oral Cavity and Pharynx	30,200	20,200	10,000	7,800	5,100	2,700
Tongue	6,900	4,500			1,100	600
Mouth	10,900	6,500	4,400		1,300	1,000
Pharynx	8,200	5,900	2,300		1,500	600
Other Oral Cavity	4,200	3,300			1,200	500
Digestive System	226,600	117,600			69,300	60,500
Esophagus	12,300	9,200	3,100		9,200	2,900
Stomach	21,500	13,400	8,100		7,600	5,400
Small Intestine	4,700	2,300			600	600
Colon	93,800	43,400			23,100	24,600
Rectum	36,400	20,200	16,200		4,700	3,900
Anus, Anal Canal, & Anorectum	3,400	1,400			200	300
Liver and Intrahepatic Bile Duct	15,300	10,000	5,300		8,500	5,300
Gallbladder & Other Biliary	6,900	2,900	4,000		1,200	2,200
Pancreas Other Dispetive	28,300	13,700			13,700	14,500
Other Digestive	4,000	1,100			500	800
Respiratory System	179,400	101,500	77,900		93,100	68,800
Larynx	10,100	8,100			3,100	800
Lung and Bronchus	164,100	89,500	74,600		89,300	67,600
Other Respiratory	5,200	3,900	1,300	1,100	700	400
Bones and Joints	2,500	1,500	1,000	1,400	800	600
Soft Tissues	8,100	4,300	3,800	4,600	2,200	2,400
Skin (excl. basal & squamous)	56,900	34,100	22,800	9,200	6,000	3,600
Melanomas Of Skin	47,700	27,300	20,400		4,800	2,900
Other non-epithelial skin	9,200	6,800	2,400		1,200	700
Breast	184,200	1,400	182,800	41,200	400	40,800
Genital Organs	265,900	188,400	77,500	59,000	32,500	26,500
Cervix Uteri	12,800		12,800			4,600
Endometrium (uterus)	36,100		36,100			6,500
Ovary	23,100		23,100			14,000
Vulva	3,400		3,400			800
Vagina and other genital organs, female	2,100		2,100	600		600
Prostate	180,400	180,400		31,900	31,900	
Testis	6,900	6,900		300	300	
Penis and other genital	1,100	1,100		300	300	
organs, male	0					
Urinary System	86,700	58,600	28,100		15,700	8,900
Urinary Bladder	53,200	38,300				
Kidney and Renal Pelvis	31,200					
Ureter and other urinary organs	2,300	1,500			300	200
Eye and Orbit	2,200				100	100
Brain and Other Nervous System	16,500	9,500			7,100	5,900
Endocrine Glands	20,200	5,600	14,600		1,000	1,100
Thyroid	18,400	4,700			500	700
Other Endocrine	1,800	900	900	900	500	400
Lymphomas and Myelomas	62,300	35,900	26,400	27,500	14,400	13,100
Hodgkin's Disease	7,400	4,200		1,400	700	700
Non-Hodgkin's Lymphoma	54,900	31,700	23,200	26,100		12,400
Multiple Myeloma	13,600	7,300			5,800	5,400
Leukemias	30,800	16,900			12,100	9,600
Lymphocytic Leukemias	11,300	6,400				2,600
Myeloid Leukemias	14,100	7,400			5,200	4,200
Other Leukemias	5,400	3,100			3,400	2,800
All Other Sites	34,000	15,700			18,500	18,100

Source: Cancer Facts & Figures-2000, American Cancer Society (ACS), Atlanta, Georgia 2000.

Excludes basal and squamous cell skin and in situ carcinomas except urinary bladder.

Incidence projections are based on rates from the NCI SEER Program 1979-1996.

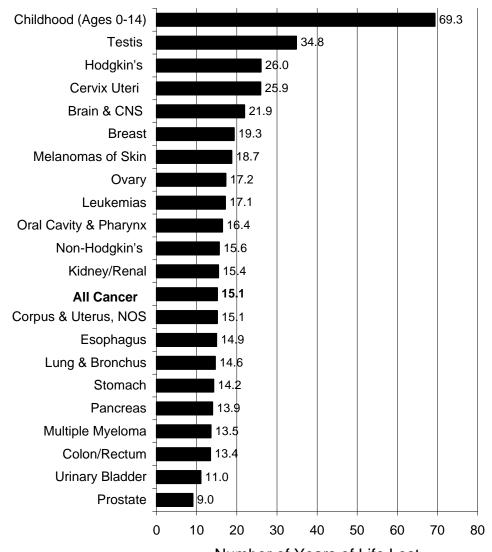
The Cost of Cancer

The direct medical cost of cancer is derived from the national data on costs per treatment episode. This estimate does not include the cost of the productivity lost while individuals are away from work due to treatment or disability or the value of lost productivity due to premature death. Figures for the direct medical cost of cancer and expenditures for all personal health care for 1995 are as follows:

(in Millions)

All Costs	Direct Cost
All Cancers*	\$ 41,200
All Health Care	\$878,464
Percent Relationship of Cancer to All Health	5%

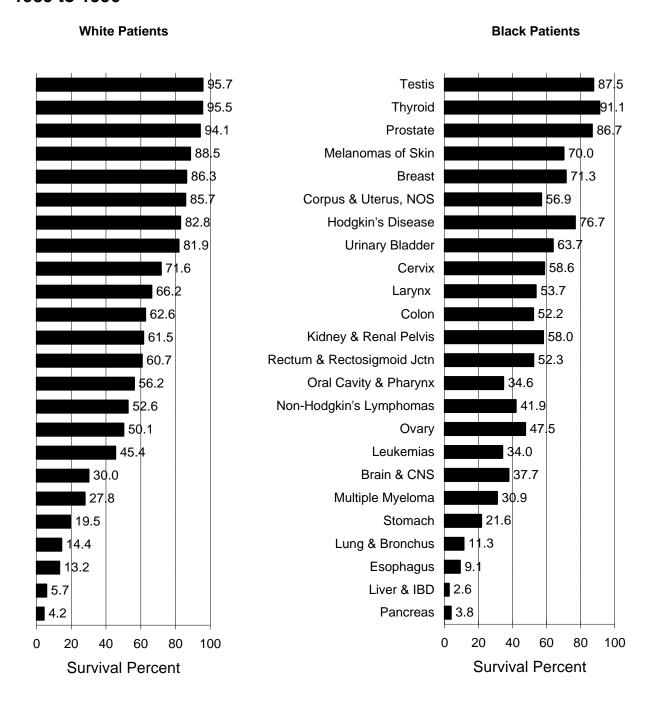
^{*}Hodgson TA, Cohen AJ. 1999. Medical Expenditures for major diseases. Health Care Financing Review, 21:119-64.



Number of Years of Life Lost source: NCHS public-use data and 1996 life table

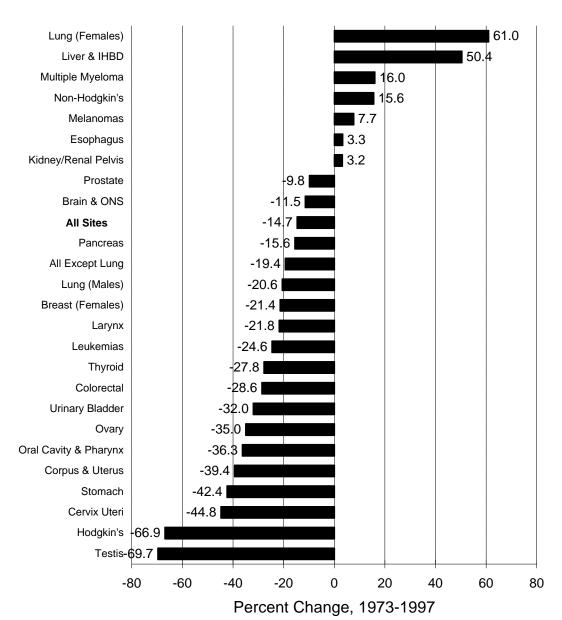
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5 Year Relative Survival Rates by Site White and Black Patients, Males and Females 1989 to 1996



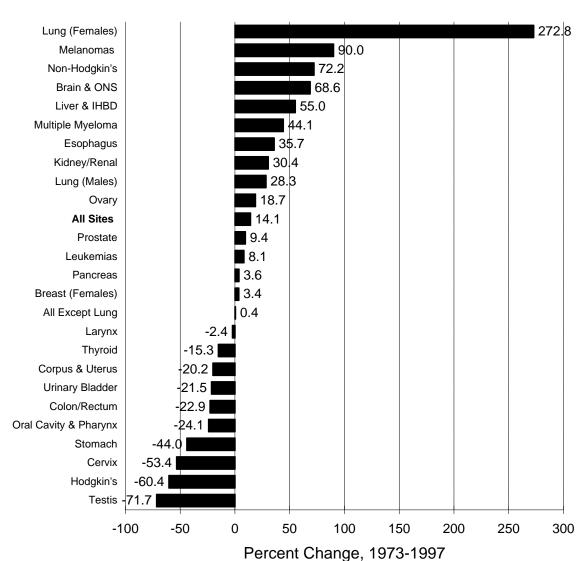
Data From NCI SEER Program http://www.seer.cancer.gov/

Ages Under 65



source: NCHS public-use data and 1996 life table

Ages Over 65



source: NCHS public-use data and 1996 life table

Cancer Mortality Rates By Race United States, 1993-1997

	Mortality Rates	Ratio	
Cancer Site	Blacks	Whites	Blacks/Whites
All Sites	219.1	165.0	1.3
Males	299.6	203.8	1.5
Females	166.9	138.5	1.2
All Sites Except Lung & Bronchus	159.9	116.1	1.4
Males	202.9	135.9	1.5
Females	133.5	103.8	1.3
Lung and Bronchus	59.2	48.9	1.2
Males	96.7	67.9	1.4
Females	33.4	34.7	1.0
Breast (Females)	31.3	24.4	1.3
<50 years	8.6	4.9	1.8
50+ years	101.4	84.6	1.2
Prostate	53.6	22.6	2.4
Cervix	5.6	2.4	2.3
Larynx	2.7	1.2	2.3
Stomach	7.9	3.6	2.2
Esophagus	7.2	3.3	2.2
Multiple Myeloma	6.2	2.9	2.1
Oral Cavity and Pharynx	4.6	2.4	1.9
Corpus and Uterus, NOS	5.7	3.1	1.8
Liver and Intrahepatic Bile Duct	4.8	3.2	1.5
Pancreas	11.7	8.1	1.4
Colon and Rectum	22.8	16.8	1.4
Breast	31.3	24.4	1.3
Lung and Bronchus	59.2	48.9	1.2
Thyroid	0.3	0.3	1.0
Hodgkins Disease	0.5	0.5	1.0
Kidney and Renal Pelvis	3.5	3.6	1.0
Leukemias	5.9	6.4	0.9
Urinary Bladder	3.0	3.3	0.9
Ovary	6.3	7.8	0.8
Non-Hodgkins Lymphomas	4.9	7.1	0.7
Brain and Other Nervous System	2.5	4.4	0.6
Testis	0.1	0.3	0.3
Melanomas of the Skin	0.4	2.5	0.2

Data source: NCHS public-use data file for 1993-1997 deaths. Rates are per 100,000 and are age adjusted to 1970 US population.

Cancer Incidence Rates By Race United States, 1993-1997

	Incidence Ra	Ratio	
Cancer Site	Blacks	Blacks/Whites	
All Sites	455.2	401.9	1.1
Males	615.5	469.9	1.3
Females	340.9	355.0	1.0
All Sites Except Lung and Bronchus	382.3	345.5	1.1
Males	505.0	397.6	1.3
Females	295.1	310.4	1.0
Lung and Bronchus	72.9	56.4	1.3
Males	110.5	72.3	1.5
Females	45.7	44.5	1.0
Breast(Females)	102.8	115.3	0.9
<50 years	33.2	31.8	1.0
50+ years	317.4	373.1	0.9
Colon and Rectum	50.2	43.5	1.2
Colon excluding Rectum	38.6	31.2	1.2
Rectum and Rectosigmoid Junction	11.6	12.3	0.9
Multiple Myeloma	9.7	4.1	2.4
Esophagus	8.0	3.6	2.2
Stomach	11.5	5.8	2.0
Prostate	238.9	141.1	1.7
Larynx	6.4	3.8	1.7
Liver and Intrahepatic Bile Duct	5.3	3.2	1.7
Pancreas	13.9	8.4	1.7
Cervix Uteri	11.4	7.1	1.6
Oral Cavity and Pharynx	13.0	9.9	1.3
Lung and Bronchus	72.9	56.4	1.3
Kidney and Renal Pelvis	11.5	9.4	1.2
Colon and Rectum	50.2	43.5	1.2
Breast(females)	102.8	115.3	0.9
Hodgkins Disease	2.4	2.9	0.8
Leukemias	8.2	10.6	0.8
Non-Hodgkins Lymphomas	12.6	16.5	0.8
Ovary	10.5	15.4	0.7
Corpus and Uterus, NOS	15.3	22.6	0.7
Brain and Other Nervous System	3.8	6.5	0.6
Thyroid	3.0	5.5	0.5
Urinary Bladder	9.7	18.1	0.5
Testis	1.0	5.3	0.2
Melanomas of the Skin	0.9	15.6	0.1

Data source: NCI SEER Program.

Rates are per 100,000 and are age adjusted to 1970 US population.

The Prevalence of Cancer: Estimated Number of Persons Diagnosed With Cancer United States, 1997

Brimany Sita	Estimated Prevalence		
Primary Site	Total	Males	Females
ALL SITES	8,918,000	3,756,000	5,162,000
Brain and			
Other Nervous System	99,000	54,000	2,167,000
Breast	2,181,000	14,000	2,167,000
Cervix Uteri	209,000	0	209,000
Colon	853,000	394,500	458,500
Corpus Uteri	569,000	0	569,000
Hodgkin's Disease	168,000	89,000	79,000
Kidney and Renal Pelvis	224,000	136,000	88,000
Larynx	126,000	100,000	26,000
Leukemias	168,000	88,000	70,000
Lung and Bronchus	413,000	206,000	207,000
Melanomas of Skin	544,000	266,000	278,000
Non-Hodgkin's Lymphoma	332,000	166,000	166,000
Oral Cavity and Pharynx	208,000	127,000	81,000
Ovary	203,000	0	203,000
Pancreas	27,000	13,500	13,500
Prostate	1,247,000	1,247,000	0
Rectum	370,000	196,000	174,000
Stomach	77,000	43,000	34,000
Testis	142,000	142,000	0
Thyroid	233,000	57,000	176,000
Urinary Bladder	619,000	450,000	169,000
Childhood (0-14 yrs)	174,000	89,000	85,000

Source: U.S. 1997 cancer prevalence rates are based on 1997 cancer prevalence rates from the Connecticut registry of the SEER program and 1/1/1997 population estimates based on the average of 1996 and 1997 population estimates from the U.S. Bureau of the Census. Connecticut prevalence rates are based on 1940-1996 cancer incidence and survival rates. These estimates can not be compared to previous estimates.

A. Actual Obligations Resulting From Appropriated Funds:

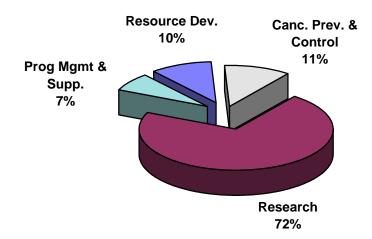
FY 2000 Appropriation	\$3,332,317
Real transfer from other NIH Institutes through the NIH Director's one percent transfer authority	-2,778
Real transfer to other HHS Agencies through	2,770
Secretary's one percent transfer authority	-695
Rescission	-17,763
Lapse	0
Actual Obligations Subtotal	3,311,081

B. Reimbursable Obligations:

AIDS Reimbursement from Office of the Director, NIH	916
Other Reimbursements	15,016
Reimbursements	15,932

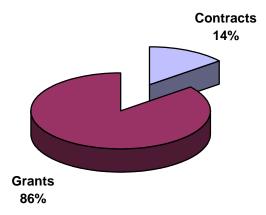
C. Total NCI Obligations: \$3,327,013 *

^{*}EXCLUDES Insight Awards to Stamp Out Breast Cancer(PAR-99-128). In FY 2000, there were 404 R21 applications and 32 R21 awards for \$3,499.



Budget Activity	Amount	Percent
Research:		
Cancer Causation	\$814,064	24.6%
Detection and Diagnosis Research	214,993	6.5%
Treatment Research	822,677	24.8%
Cancer Biology	514,939	15.6%
Subtotal Research	2,366,673	71.5%
Resource Development:		
Cancer Centers Support	222,377	6.7%
Research Manpower Development	116,104	3.5%
Construction	3,500	0.1%
Subtotal Resource Development	341,981	10.3%
Cancer Prevention and Control	366,550	11.1%
Program Management and Support	235,877	7.1%
*Total NCI	3,311,081	100.0%

^{*}EXCLUDES Insight Awards to Stamp Out Breast Cancer(PAR-99-128). In FY 2000, there were 404 R21 applications and 32 R21 awards for \$3,499.



Mechanism	Amount	Percent
Contracts:		_
R& D Contracts	\$235,647	9.2%
Interagency Agreements	15,932	0.6%
Cancer Control Contracts	107,764	4.2%
Construction Contracts	2,012	0.1%
Subtotal Contracts	361,355	14.1%
Grants:		
Research Project Grants	1,528,001	59.5%
Cancer Centers/SPORES	221,350	8.6%
Training Activities	56,179	2.2%
Other Research Grants	232,676	9.1%
Cancer Control Grants	165,022	6.4%
Construction Grants	1,488	0.1%
Subtotal Grants	2,204,716	85.9%
Total Extramural Funds	2,566,071	100.6%
Total Intramural/RMS/Control Inhouse	745,010	
*Total NCI	\$3,311,081	

^{*}EXCLUDES Insight Awards to Stamp Out Breast Cancer(PAR-99-128). In FY 2000, there were 404 R21 applications and 32 R21 awards for \$3,499.

NCI Obligations by Mechanism, Fiscal Year 2000 (Dollars in Thousands)

		Number	Amount ^c	% of Total	
Research Project					
Grants	Non-Competing	3,101	\$1,050,107	31.7%	
	Administrative Supplements	(266)	23,721	0.7%	
	Competing	1,119	387,083	11.7%	
	Subtotal, without SBIR/STTR Grants	4,220	1,460,911	44.1%	
	SBIR/STTR Grants-R41-44	306	67,090	2.0%	
	Subtotal, Research Project Grants	4,526	1,528,001	46.1%	
Centers & Spores	Cancer Centers Grants-P30	60	169,068	5.1%	
	SPOREs-P20/P50	22	52,282	1.6%	
	Subtotal, Centers	82	221,350	6.7%	
Other Research	Career Program				
	Temin & Minority Mentored Awards-K01	58	7,389	0.2%	
	RCDA-K04	2	127	0.0%	
	Preventive Oncology-K07	44	4,469	0.1%	
	Clinical Investigator-K08	134	14,401	0.4%	
	Physician Investigator-K11	2	181	0.0%	
	Clinical Oncology-K12	21	7,670	0.2%	
	Transitional Career Development-K22	4	560	0.0%	
	Mentored Patient Oriented RCDA-K23	23	2,964	0.2%	
	Mid-Career Invest. & Patient Orient. Res-K24	29	3,108	0.2%	
	Subtotal, Career Program	317	40,869	1.2%	
	Cancer Education Program-R25	83	16,821	0.5%	
	Clinical Cooperative Groups-U10	140	144,608	4.4%	
	Minority Biomedical Support-S06		3,341	0.1%	
	Scientific Evaluation-U09/T09	2	4,664	0.1%	
	Continuing Education	3	402	0.0%	
	Resource Grants-R24/U24	34	20,344	0.6%	
	Conference Grants-R13	74	1,627	0.0%	
	Subtotal, Other Research Grants	653	232,676	7.0%	
Subtotal, Research G		5,261	1,982,027	59.9%	
NRSA Fellowships	Trainees	1,600	56,179	1.7%	
R&D Contracts	R&D Contracts	135	251,173	7.6%	
	SBIR Contracts	4	406	0.0%	
	Subtotal, Contracts	139	251,579	7.6%	
Intramural Research:	Program		402,984	12.2%	
	NIH Management Fund		104,801	3.2%	
	Subtotal, Intramural Research FTEs	: 1,790	507,785	15.3%	
RMS	Research Mgmt and Support	793	103,825	3.1%	
	NIH Management Fund		16,761	0.5%	
	Subtotal, RMS FTEs	: 793	120,586	3.6%	
Cancer Prevention	1720	1 2 2	,,,,,,	222.0	
and Control:	Cancer Control Grants	210	165,022	5.0%	
ana John Ji.	Cancer Control Contracts	170	107,764	3.3%	
	Inhouse	1.5	104,948	3.2%	
	NIH Management Fund	+	11,691	0.4%	
	Subtotal, Prevention and Control FTEs	: 211	389,425	11.8%	
Construction	7720		3,500	0.1%	
	rtr.	2 704			
*Total NCI	FTEs FTEs	2,794	3,311,081	100.0%	

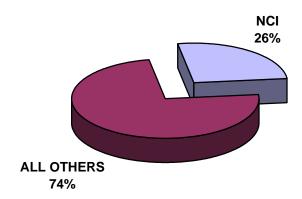
^{*}EXCLUDES Insight Awards to Stamp Out Breast Cancer(PAR-99-128). In FY 2000, there were 404 R21 applications and 32 R21 awards for \$3,499.

Division Obligations by Mechanisms, Fiscal Year 2000 (Dollars in Thousands)

DBS	DCS	DCEG	DCTD	DCB	DCCPS	DCP	DEA	OD	Research Grants	Program Support
									\$1,050,107	
									23,721	
									387,083	
									1,460,911	
									67,090	
									1,528,001	
								\$169,068		
								52,282		
								221,350		
								7000		
								7389		
								127		
								4,469		
								14,401		
								181		
								7,670		
								560 2,964		
								3,108		
								40,869		
								16,821		
								. 0,02	144,608	
									3,341	
									4,664	
									402	
									20,344	
									1,627	
								57,690	174,986	
								279,040	1,702,987	
								56,179		
		\$6,695	\$75,669	\$4,394	\$19,147			110,715		\$34,553
			199		207					
		6,695	75,868	4,394	19,354			110,715		34,55
\$180,449	\$126,394	52,548	2,745					33,983		6,86
										104,80
180,449	126,394	52,548	2,745					33,983		111,666
			23,059	7,660			12,490	47,227		13,38
										16,76
			23,059	7,660			12,490	47,227		30,150
			9,798		53,638	\$92,465		9,121		
		2,853	264		23,037	58,777		22,833		
	4,936	7,557	4,028		18,159	14,996	118	52,317		2,83
										11,69
	4,936	10,410	14,090		94,834	166,238	118	84,271		14,528
180,449	131,330	69,653	115,762	12,054	114,188	400.005	12,608	3,500 614,915	4 706 225	190,897
		CO CEO	116 767	12 06/	11/11/12/2	166,238	17 608	61/1015	1,702,987	100 90

NIH Management Fund Reimbursement Fiscal Year 2000

(Dollars in Thousands)



DISTRIBUTION OF NCI PAYMENT	Amount	Share of NCI
Clinical Center	\$67,967	51.0%
Center for Scientific Review	5,221	3.9%
Center for Information Technology	6,575	4.9%
GSA Rental Payments for Space	14,211	10.7%
Other Research Services	35,109	26.3%
Other OD	4,170	3.1%
Total, NCI Payment	133,253	100.0%
Other NIH Institutes Managment Fund	379,482	
NIH Managment Fund	\$512,735	

The Management Fund provides for the financing of certain common research and administrative support activities which are required in the operations of NIH:

Clinical Center: Admissions and followup, anesthesiology, diagnostic x-ray, nuclear medicine, clinical pathology, blood bank, rehabilitation medicine, pharmacy, medical records, nursing services, patient nutrition service, housekeeping services, laundry, and social work

Center for Scientific Review: Initial scientific review of applications, assignment of research grant applications to institutes

Center for Information Technology: Research and development program in which concepts and methods of computer science are applied to biomedical problems

GSA Rental Payments for Space: Building rental including utilities and guard services

Other Research Services: Procurement, safety, engineering, biomedical engineering, veterinary resources, and library

Special Sources of Funds

CRADAs

As a result of the Federal Technology Transfer Act of 1986 (PL 99-502), government laboratories are authorized to enter into Cooperative Research and Development Agreements (CRADAs) with private sector entities. Licensing agreements are usually incorporated into the CRADA document which addresses patent rights attributable to research supported under the CRADA.

CRADA Receipts Deposited to the U.S. Treasury (Dollars in Thousands)

	(Dollars III Tribusarius)					
		Carryover				
		from Prior				
	Fiscal Year	Year	Collections	Obligations		
	1992	\$101	\$1,627	\$466		
	1993	1,262	2,509	1,582		
	1994	2,189	2,248	1,917		
	1995	2,570	2,653	1,478		
	1996	3,745	2,229	1,394		
	1997	4,580	13,434	6,631		
	1998	11,383	5,351	7,266		
	1999	9,468	3,646	4,707		
	2000	8,240	2,743	4,616		
	2001	6,367				

Royalty Income

NCI retains a portion of the royalty income generated by the patents related to NCI-funded research. A major portion of this royalty income is used to reward employees of the laboratory, further scientific exchange and for education and training in accordance with the terms of the Federal Technology Transfer Act (PL 99-502). Receipts are also used to support costs associated with processing and collecting royalty income and for technology transfer efforts in NCI and NIH.

Royalty Income Funding History (Dollars in Thousands)

	1= =	10010011107	
		Inventor	_
Years	Collections*	Payments	Other
1991/1992	\$2,084	\$431	\$1,653
1992/1993	2,105	451	1,654
1993/1994	5,700	983	4,717
1994/1995	11,244	1,235	10,009
1995/1996	9,031	953	8,078
1996/1997	13,598	2,175	11,423
1997/1998	9,814	2,321	7,493
1998/1999	22,716	5,084	17,632
1999/2000	21,160	4,695	16,465
2000/2001	37,040	4,811	32,229
* 5			

^{*} Does not include assessments by NIH.

Breast Cancer Emergency Supplement – Flood Money

The Emergency Supplement Appropriations Act (PL 105-18) of June 1997, appropriated \$15,000,000 to the Department of Health and Human Services to support high priority health research in the area of environmental influences on breast cancer. \$12,000,000 of the funds were transferred to NCI to support breast cancer research. In FY 1999, NCI obligated \$9,748,403. In FY 2000, NCI obligated \$215,400 with the remaining \$2,423,481 to be used in FY 2001.

Stamp Out Breast Cancer

The Stamp Out Breast Cancer Act (PL 105-41) was established in August 1997 and extended in July 2000 (PL 106-253). This act allows postal customers to contribute to funding for breast cancer research through their voluntary purchases of special rate postage stamps from U.S. Postal Service. The Act required the USPS to transfer 70% to NIH and 30% to the DOD of the funds collected above the postage costs and administrative costs. As of July 2000, NCI has received \$7,251,243. NCI will use the funds to fund research projects directed towards breast cancer, specifically, those grants in response to the NCI RFA for "Insight Awards to Stamp Out Breast Cancer." In FY 2000, 34 R21 grants have been awarded among 398 R21 applications for \$3,498,708 for one year. The second year of the insight awards will be paid in FY 2001.

Research Funding for Various Research Areas

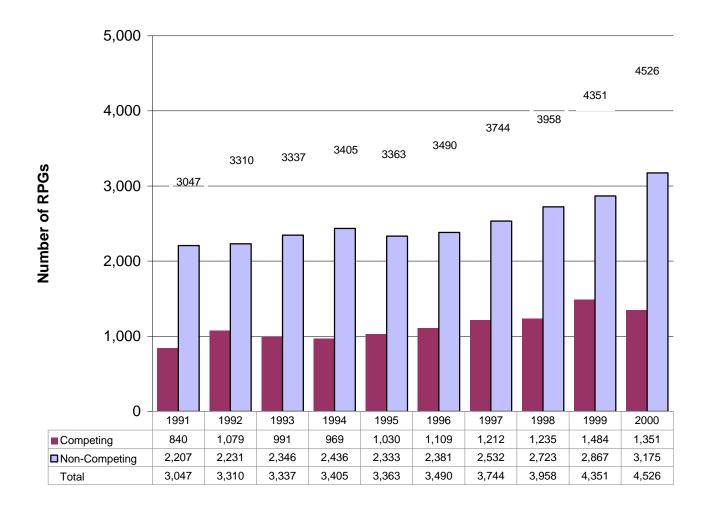
(Dollars in Millions)

The National Cancer Institute reports how appropriated funds are spent in a number of different categories or classifications including specific cancer sites, cancer types, diseases related to cancer, as well as types of research mechanisms. The table below represents funding levels for frequently requested research areas. These research areas do not represent the entire NCI research portfolio. Funding for these areas can overlap and do not add to the total NCI budget. For example, dollars for a clinical trial on breast cancer research would be included in both the Breast Cancer and the Clinical Trials lines in the table below. Similarly, a basic cancer research project may be relevant to cervical, uterine and ovarian cancers and relevant funding would be included in the figures for all three sites.

_	1996	1997	1998	1999	2000
Total NCI Budget	\$2,254.9	\$2,389.1	\$2,551.3	\$2,891.0	\$3,311.1
AIDS	225.4	224.7	225.9	239.2	244.1
Brain & ONS	41.6	46.1	54.3	63.5	71.9
Breast Cancer	317.5	332.0	348.7	387.2	438.7
Cervical Cancer	51.6	55.8	58.0	66.3	67.0
Colorectal Cancer	98.0	103.2	121.0	152.9	175.8
Head and Neck Cancers	34.3	38.5	41.9	45.9	47.0
Hodgkins Disease	8.0	8.1	8.3	8.2	9.4
Leukemia	79.3	91.2	103.4	122.2	141.7
Liver Cancer	31.4	35.3	38.1	39.8	46.2
Lung Cancer	119.4	132.4	139.8	151.0	175.0
Melanoma	36.0	43.3	50.3	60.1	67.9
Non Hodgkin's Lymphoma	49.9	52.7	57.1	66.2	70.4
Ovarian Cancer	36.5	41.7	40.8	56.5	65.5
Pancreatic Cancer	8.1	10.2	14.2	17.3	20.0
Prostate Cancer	71.7	82.3	86.9	135.7	203.2
Stomach Cancer	7.6	9.3	8.2	7.6	8.2
Uterine Cancer	8.1	8.1	12.2	13.8	16.0

Research Project Grants Number of Awards Fiscal Years 1991-2000

Includes Small Business Innovation Research Awards



RPGs Requested and Awarded Fiscal Years 1991-2000

(Dollars in Thousands)

		_		uested	Award		Success	
Fiscal Year		Туре	No.	Amt.	No.	Amt.	Rate	
	Competing	New	2,195	\$512,665	513	\$102,364		
		Renewal	837	286,858	323	94,231		
1991		Supplement	8	1,161	4	421		
		Subtotal	3,040	800,684	840	197,016	27.6%	
	Non-Competing				2,207	594,532		
	Total				3,047	791,548		
	Competing	New	2,508	\$612,369	664	\$119,091		
	, ,	Renewal	815	332,428	398	133,413		
1992		Supplement	23	3,704	17	1,347		
		Subtotal	3,346	948,501	1,079	253.851	32.2%	
	Non-Competing		0,0.0	0.0,00.	2,231	620,006	02.270	
	Total				3,310	873,857		
	Competing	New	3,173	\$746,912	644	\$114,227		
	Competing	Renewal	891		340			
4000				328,657		107,949		
1993		Supplement	75	8,554	7	1,698	00.00/	
	l	Subtotal	4,139	1,084,123	991	223,874	23.9%	
	Non-Competing				2,346	692,436		
	Total				3,337	916,310		
	Competing	New	3,643	\$787,824	657	\$118,403		
		Renewal	935	342,068	308	110,723		
1994		Supplement	20	3,311	4	733		
		Subtotal	4,598	1,133,203	969	229,859	21.1%	
	Non-Competing		,	,,	2,436	704,665		
	Total				3,405	934,524		
	Competing	New	3,345	\$789,560	645	\$119,760		
	Competing	Renewal	1,048	403,577	375			
1005						127,065		
1995		Supplement	21	7,502	10	1,537	00.00/	
	l	Subtotal	4,414	1,200,639	1,030	248,362	23.3%	
	Non-Competing				2,333	704,374		
	Total				3,363	952,736		
	Competing	New	3,071	\$733,313	682	142,249		
		Renewal	947	367,270	422	139,995	27.5%	
1996		Supplement	10	1,921	5	694		
		Subtotal	4,028	1,102,504	1,109	282,938		
	Non-Competing				2,381	751,592		
	Total				3,490	1,034,530		
	Competing	New	3,328	\$828,653	815	160,763		
		Renewal	815	354,054	392	146,912		
1997		Supplement	14	3,136	5 5	755		
1991		Subtotal	4,157	1,185,843	1,212	308,430	29.2%	
	Non Commetter	Jubilliai	4,137	1,100,043			25.270	
	Non-Competing				2,532	814,885		
	Total	Maria	2.25:	Φ=0= 4==	3,744	1,123,315		
	Competing	New	3,054	\$797,477	847	189,746		
		Renewal	697	283,562	382	137,764		
1998		Supplement	18	4,299	6	1,421		
		Subtotal	3,769	1,085,338	1,235	328,931	32.8%	
	Non-Competing				2,723	901,845		
	Total				3,958	1,230,776		
	Competing	New	3,905	\$1,091,110	1,088	237,187		
1999		Renewal	757	340,075	390	145,623		
		Supplement	12	3,882	6	2,353		
		Subtotal	4,674	1,435,067	1,484	385,163	31.8%	
	Non-Competing	Jubiolai	7,017	1,-00,007	2,867	976,610	01.070	
						1,361,773		
	Total	Now	1 1 1 0	C4 0E2 000	4,351			
	Competing	New	4,116	\$1,253,002	957	251,628		
		Renewal	839	435,207	392	175,908		
2000		Supplement	11	2,379	2	231	27.2%	
		Subtotal	4,966	1,690,588	1,351	427,767		
	Non-Competing				3,175	1,100,234		
	Total				4,526	1,528,001		

Includes Small Business Innovation Awards.

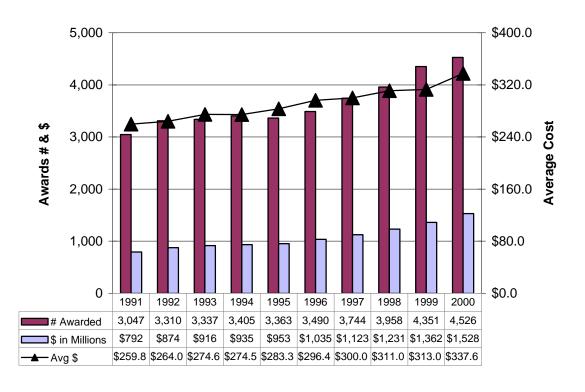
Success rate is the number of awarded grants divided by the number of awards requested.

The requested data excludes applications not recommended for further review.

RPG Awards by Activity Code Fiscal Years 1991-2000

(Dollars in Thousands; activity code descriptions on next page)

					,	,	,							SBIR/S	
		R01	P01	R35	R37	R29	RFA	U01	R03	R21	R33	R15	R55	TTR	TOTAL
1991	#	1,949	165	84	163	316	154	85						131	3,047
1331	\$	381,932	190,470	62,137	43,687	29,494	37,435	32,431						13,962	791,548
1992	#	2,050	183	76	162	309	208	123						199	3,310
1332	\$	424,954	205,330	59,878	47,414	29,726	45,107	44,171						17,277	873,857
1993	#	1,955	176	<i>7</i> 5	166	291	282	171					6	215	3,337
1333	\$	430,203	202,852	61,337	51,633	29,053	63,267	56,199					1,365	20,401	916,310
1994	#	1,914	163	72	154	312	319	232	46	5			9	179	3,405
1334	\$	434,612	184,852	61,369	48,699	32,610	70,879	75,444	2,393	353			540	22,773	934,524
1995	#	1,808	149	67	142	342	314	253	44	34			19	191	3,363
1995	\$	439,122	171,524	63,032	45,125	36,014	72,409	81,771	2,488	7,640			1,126	32,485	952,736
1996	#	1,964	144	65	110	388	268	226	85	46			14	180	3,490
1990	\$	504,398	182,609	62,550	37,070	41,170	66,102	88,962	5,443	9,599			984	35,643	1,034,530
1997	#	2,194	149	63	90	446	195	169	101	63			21	253	3,744
1337	\$	583,116	202,317	62,892	30,950	47,413	48,148	81,193	6,411	12,269			1,450	47,156	1,123,315
1998	#	2,454	160	57	75	485	132	157	97	76		2	14	249	3,958
1990	\$	672,873	228,854	57,712	27,212	52,136	42,750	79,370	6,069	11,782		127	684	51,207	1,230,776
1999	#	2,796	169	38	71	413	261	31	108	159	6	2	6	291	4,351
1999	\$	775,961	249,583	38,585	27,377	45,361	112,868	21,319	7,355	22,548	2,079	200	620	57,917	1,361,773
2000	#	3,011	179	21	60	314	269	18	100	223	20	0	5	306	4,526
2000	\$	898,764	286,234	19,413	24,688	34,769	132,872	13,617	7,034	32,897	10,074	99	450	67,090	1,528,001



Activity Code Descriptions

	, , , , , , , , , , , , , , , , , , ,
R01	Research Project (Traditional) discrete, specified, circumscribed project to be performed by the named investigator(s) in an area representing his/her specified interest and competencies.
P01	Research Program Projects broadly based, multidisciplinary, often long-term, research program which has a specific major objective or a basic theme. A program project is directed toward a range of problems having a central research focus in contrast to the usually narrower thrust of the traditional research project.
R35	Outstanding Investigator Grants long-term support to an experienced investigator with an outstanding record of research productivity. This support is intended to encourage investigators to embark on long-term projects of unusual potential in a categorical program area.
R37	Method to Extend Research in Time (MERIT) Award long-term grant support to investigators whose research competence and productivity are distinctly superior and who are highly likely to continue to perform in an outstanding manner. Investigators may not apply for a MERIT award. Program staff and/or members of the cognizant National Advisory Council/Board will identify candidates for the MERIT award during the course of review of competing research grant applications prepared and submitted in accordance with regular PHS requirements.
R29	First Independent Research Support and Transition (FIRST) Award sufficient initial period of research support for newly independent biomedical investigators to develop their research capabilities and demonstrate the merit of their research ideas.
RFA	Request for Applications A formal statement inviting grant or cooperative agreement applications in a well-defined scientific area to accomplish specific program purposes and indicates the amount of funds set aside for the competition and/or the estimated number of awards to be made.
U01	Research Project (Cooperative Agreement) discrete, specified, circumscribed project to be performed by the named investigator(s) in an area representing his/her specific interest and competencies.
R03	Small Grants research support specifically limited in time and amount for studies in categorical program areas. Small grants provide flexibility for initiating studies, which are generally for preliminary short-term projects and are non-renewable.
R21	Exploratory/Developmental Grants Phase I development of new research activities in categorical program areas. Support generally is restricted in level of support and in time.
R33	Exploratory/Developmental Grants Phase II development of new research activities in categorical program areas. Support generally is restricted in level of support and in time.
R15	Academic Research Enhancement Award (AREA) to domestic health professional schools and other institutions offering baccalaureate or advanced degrees in health sciences, except those that have received NIH research grants and/or cooperative agreements. Supports feasibility studies and other small-scale research projects.
R55	Shannon Awards limited support to scientists whose research applications fall short of the cutoff for funding yet are at the "margin of excellence" whereby the perceived quality of the grant is statistically indistinguishable from grants that are funded.
R41	Small Business Technology Transfer (STTR) Grants - Phase I establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R42	Small Business Technology Transfer (STTR) Grants - Phase II establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R43	Small Business Innovation Research (SBIR) Grants - Phase I projects limited in time and amount, to establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R44	Small Business Innovation Research (SBIR) Grants - Phase II in-depth development of R&D ideas whose feasibility has been established in Phase I and which are likely to result in commercial products or services.

Cancer Centers by State (P30 Core Grants), Fiscal Year 2000

(Dollars in thousands)

State Alabama	Grantee Institution	Type	Amount
	Univ of Alabama at Birmingham	Comprehensive	\$4,633
Arizona	Univ of Arizona	Comprehensive	2,464
California	Beckman Research Institute/City of Hope	Comprehensive	2,168
	Burnham Institute	Lab/Basic	3,008
	Salk Institute	Lab/Basic	2,404
	Univ of California at Los Angeles	Comprehensive	3,183
	Univ of California at San Diego	Clinical	1,111
	Univ of California at Irvine	Comprehensive	1,847
	Univ of Southern California	Comprehensive	4,237
	Univ of California San Francisco	Comprehensive	1,281
Colorado	Univ of Colorado Health Sciences Center	Comprehensive	2,788
Connecticut	Yale Univ	Comprehensive	1,988
District of Columbia	Georgetown Univ	Comprehensive	3,006
Florida	Univ of South Florida	Clinical	1,097
Hawaii	Univ of Hawaii at Manoa	Clinical	2,097
Illinois	Northwestern Univ-Robert H. Lurie Cancer Center	Comprehensive	1,654
	Univ of Chicago	Comprehensive	2,467
Indiana	Indiana Univ.	Clinical	1,222
	Purdue Univ West Lafayette	Lab/Basic	1,069
Iowa	University of Iowa	Comprehensive	1,221
Maine	Jackson Laboratory	Lab/Basic	1,925
Maryland	Johns Hopkins Univ	Comprehensive	4,264
Massachusetts	Dana-Farber Cancer Institute	Comprehensive	10,825
Massacriusetts	Massachusetts Institute of Technology	Lab/Basic	2,336
Michigan	Univ of Michigan at Ann Arbor	Comprehensive	3,084
Michigan	Karmanos Cancer Institute/Wayne State Univ		3,004
Minnocoto		Comprehensive	3,034
Minnesota	Mayo Foundation	Comprehensive	
NI - I I	Univ of Minnesota Twin Cities	Comprehensive	1,413
Nebraska	Univ of Nebraska Medical Center	Lab/Basic	1,074
New Hampshire	Dartmouth College	Comprehensive	1,749
New Jersey	Robert Wood Johnson Medical School	Clinical	2,183
New York	Cold Spring Harbor Laboratory	Lab/Basic	3,471
	Columbia Univ New York	Comprehensive	3,530
	Kaplan Cancer Center/NYU	Comprehensive	1,476
	Roswell Park Cancer Institute	Comprehensive	1,206
	Memorial Sloan-Kettering Institute	Comprehensive	5,876
	American Health Foundation	Lab/Basic	2,268
	Albert Einstein College of Medicine/Yeshiva Univ	Comprehensive	4,131
North Carolina	Duke Univ	Comprehensive	5,544
	Univ of North Carolina Chapel Hill	Comprehensive	5,154
	Wake Forest Univ/Bowman Gray Sch. Of Medicine	Comprehensive	C
Ohio	Case Western Reserve Univ	Comprehensive	2,088
	Ohio State Univ	Comprehensive	2,397
Oregon	Oregon Health Sciences Univ	Clinical	1,203
Pennsylvania	Fox Chase Cancer Center	Comprehensive	7,140
	Thomas Jefferson University	Clinical	251
	Univ of Pennsylvania	Comprehensive	4,980
	Univ of Pittsburgh	Comprehensive	3,789
	Wistar Institute	Lab/Basic	2,198
Tonnossoo	St. Jude Children's Research Hospital	Clinical	3,836
Tennessee	Vanderbilt Univ	Clinical	
T			3,274
Texas	San Antonio Cancer Institute	Comprehensive	2,191
116-1-	M.D. Anderson Cancer Center/Univ. of Texas	Comprehensive	5,598
Utah	Huntsman Cancer Institute/Univ of Utah	Clinical	1,144
Vermont	Univ of Vermont	Comprehensive	280
Virginia	Univ of Virginia/Health Sciences Center	Clinical	1,991
	VCU/Massey Cancer Center	Clinical	346
Washington	Fred Hutchinson Cancer Research Center	Comprehensive	7,551
Wisconsin	Univ of Wisconsin Madison	Comprehensive	2,963
	McArdle Laboratory for Cancer Research/Univ. of Wisconsin	Lab/Basic	2,449
	Total P30s	60	165,158
	Planning Grants		1,265
	NCI Co-funded Awards with other NIH Institutes		2,645
	Total Cancer Centers		169,068

Specialized Programs of Research Excellence, Fiscal Year 2000

(Dollars in thousands)

In 1992, the NCI established the Specialized Programs of Research Excellence (SPORE). This program promotes interdisciplinary research and speeds the bidirectional exchange between basic and clinical science to move basic research findings from the laboratory to applied settings involving patients and populations. The goal of the SPORE program is to bring to clinical care settings novel ideas that have the potential to reduce cancer incidence and mortality, and to improve survival, and the quality of life.

Laboratory and clinical scientists work collaboratively to plan, design and implement research programs that impact on cancer prevention, detection, diagnosis, treatment and control. To facilitate this research, each SPORE develops and maintains specialized resources that benefit all scientist working on the specific cancer site, as well as SPORE scientists. An additional SPORE element is a career development program that recruits scientists both within and outside the SPORE institution to enlarge the cadre of laboratory and clinical scientists dedicated to translational research on human cancer. SPOREs meet annually to share data, assess research progress, identify new research opportunities and establish research priorities.

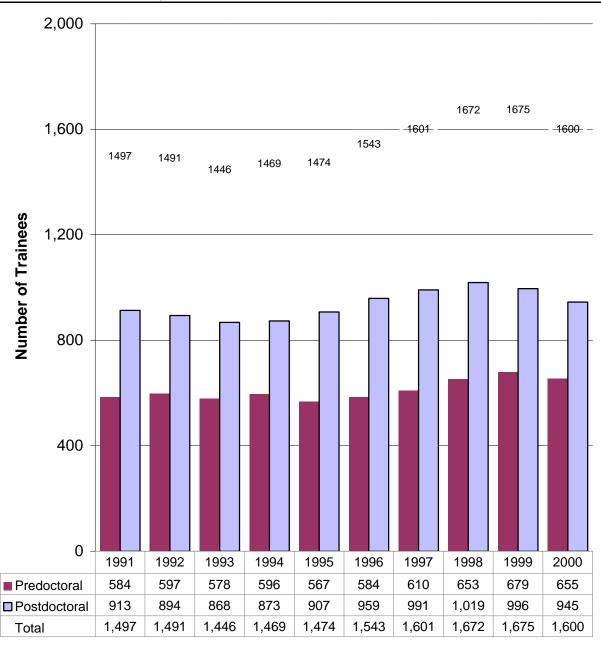
<u>Mechanism</u>	Site	No.	Amount
SPOREs	Breast	9	\$19,436
	Gastrointestinal	2	4,245
	Lung	3	6,400
	Prostate	4	10,335
	Ovarian	4	7,790
	Total P50	22	48,206
Supplement	DNA Array		1,209
	Mammalian Models		439
	Minority Biomedical Su	pplements	339
	Total Supplement		1,987
Co-funded	Urology with NIDDK	(3)	523
	Oral with NIDCR	(3)	1,166
	Genome with NHGRI	(1)	400
	Total Cofunded	(7)	2,089
Total		22	\$52,282

NOTE:

Counted P50s when they are funded as a supplement (T-3) with no other non-competing or competing support.

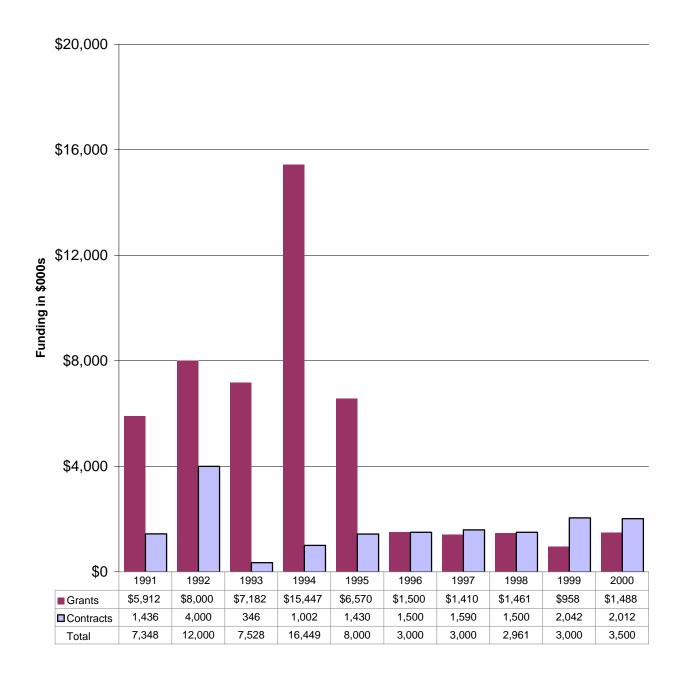
NRSA Predoctoral and Postdoctoral Trainees Fiscal Years 1991-2000

(Full Time Trainee Positions)



Construction/Renovation Funding Fiscal Years 1991-2000

(Dollars in Thousands)



Grant and Contract Awards by State Fiscal Year 2000 (Dollars in thousands)

Alabama 61 \$27,954 17 \$8,520 78 \$36,474 Alabama Alaska 1 184 0 1 184 Alaska Arizona 55 26,378 2 486 57 26,864 Arizona Arkansas 12 5,668 0 0 12 5,668 Arkansas California 671 301,170 23 127,571 694 428,741 California Colorado 92 30,774 2 2,327 94 33,100 Colorado Connecticut 78 25,513 2 3,467 80 28,980 Connecticut Delaware 4 1,399 0 0 4 1,399 Delaware District of Columbia 65 32,264 5 1,820 70 34,083 District of Columbia Florida 91 25,977 2 1,571 93 27,548 Florida Georgia		G	rants	Со	ntracts	То	tal NCI		
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Arizona	Alabama	61	\$27,954	17	\$8,520	78	\$36,474	Alabama	
Arkansas	Alaska	1	184	0		1	184	Alaska	
California	Arizona	55	26,378	2	486	57	26,864	Arizona	
Colorado Connecticut Connectic	Arkansas	12	5,668	0	0	12	5,668	Arkansas	
Colorado Connecticut Connectic	California	671	301,170	23	127,571	694	428,741	California	
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Total 5,019 2,068,243 274 355,837 5,293 2,424,080 Total	Puerto Rico								
			2,068,243	274	355,837	5,293	2,424,080	Total	

Grant and Contract Awards by Country Fiscal Year 2000

(Dollars in Thousands)

	(Grant	Coi	Contract		tal NCI	
Country	No	Amount	No	Amount	No	Amount	Country
Australia	10	\$1,980			10	\$1,980	Australia
Belgium	1	414			1	414	Belgium
Canada	21	4,221			21	4,221	Canada
China			1	25	1	25	China
Costa Rica			1	1,410	1	1,410	Costa Rica
Denmark	1	644	1	49	2	693	Denmark
France	4	927			4	927	France
Germany	1	87			1	87	Germany
India	1	187			1	187	India
Israel	4	557			4	557	Israel
Italy	1	354			1	354	Italy
Jamaica			1	922	1	922	Jamaica
Japan			1	184	1	184	Japan
Mexico	1	52			1	52	Mexico
Netherlands	2	185			2	185	Netherlands
New Zealand			1	50		50	New Zealand
Poland			1	495	1	495	Poland
South Africa	1	187			1	187	South Africa
Spain	1	180				180	Spain
Sweden	2	83	1	101	3	184	Sweden
Switzerland	1	10			1	10	Switzerland
Trinidad/Tobago			1	270	1	270	Trinidad/Tobago
United Kingdom	6	705			6	705	United Kingdom
Total Foreign	58	10,773	9	3,506	65	14,279	

Institutions Receiving More than \$15 Million in NCI Support, FY 2000 (Dollars in thousands)

State	Institution	Grants	Contracts	Construction	Total NCI
Alabama	Univ of Alabama System	\$25,213	\$5,368		\$30,581
Arizona	Univ of Arizona	25,249	486		25,735
	Nat'l Childhood Can. Foundation	16,109			16,109
California	Science Applications Int'l Corp		107,730		107,730
	Scripps Research Institute	15,440			15,440
	Stanford Univ	35,380			35,380
	Univ of California	129,484	2,661		132,146
	Univ of Southern California	27,887	2,357		30,244
Colorado	Univ of Colorado System	14,950	1,325	\$1,488	17,763
Connecticut	Yale Univ	22,536	1,393		23,929
Dist of Columbia	Georgetown Univ	18,974	836		19,811
Florida	State Univ System of Florida	18,557			18,557
Illinois	Northwestern Univ	23,085	842		23,927
	Univ of Chicago	28,326			28,326
	Univ of Illinois System	13,798	3,193		16,991
Maryland	Johns Hopkins Univ	56,364	1,560		57,924
ivial ylaria	Westat, Inc.	00,001	18,981		18,981
Massachusetts	Brigham & Women's Hospital	25,544	10,501		25,544
Massacriasetts	Dana- Faber Cancer Institute	51,072			51,072
	Harvard Univ	35,706			35,706
	Mass General Hospital	28,739			28,739
Michigan	Univ of Michigan	37,523	1,457		38,979
.v.ioi.iigai.i	Wayne State Univ	10,837	6,897		17,734
Minnesota	Mayo Foundation	28,425	327		28,753
	Univ of Minnesota	23,838	1,475		25,313
Missouri	Washington Univ	19,599	1,514		21,113
New Hampshire	Dartmouth College	15,589	120		15,710
New York	City Univ of New York	16,474	120		16,474
INGW TOIK	Columbia Univ	23,363			23,363
		45,198	1,845		47,044
	Memorial Sloan-Kettering Can Ctr New York Univ	16,312	1,045		16,312
	Roswell Park Cancer Institute	18,555			18,555
	Yeshiva Univ	21,715			21,715
North Carolina	Duke Univ	38,401	1,261		39,661
North Carolina	Univ of North Carolina System	30,366	130		39,001
Ohio					
Offic	Case Western Reserve Univ Ohio State Univ	23,856	1,754		25,610
Dannaulyania		18,785	1,748		20,533
Pennsylvania	Fox Chase Cancer Center	27,300	2,656		29,956
	NSABP Foundation, Inc. Thomas Jefferson Univ	17,866			17,866
		19,912 43,103	933		19,912
	Univ of Pennsylvania		2,021		44,036
Tannasaa	Univ of Pittsburgh	32,625	2,021		\$34,646
Tennessee	St. Jude Children's Res. Hosp	20,598			20,598
Toyoo	Vanderbilt Univ	23,705			23,705
Texas	Baylor College of Medicine	29,228			29,228
	CTRC Research Foundation	31,640	0.704		31,640
Litala	Univ of Texas System	96,878	8,704		105,582
Utah	Utah State Higher Ed. System	14,369	2,995		17,363
Virginia	American College of Radiology	15,377			15,377
Washington	Fred Hutchinson Cancer Research	69,323	5,611		74,934
	Univ of Washington	23,476	1,148		24,625
Wisconsin	Univ of Wisconsin System	26,737	1,509		28,247
	Total	1,493,387	190,838	1,488	1,685,712

1938 - 1969 1970 - 1979 1980 - 1989	\$1,875,699,720 6,073,870,500 11,958,860,000	
1990	1,664,000,000	prior to reductions in PL 101-166 (-\$6,839,000) and PL101-239 (-\$22,829,000).
1991	1,766,324,000	prior to reductions in PL 101-517 (-\$8,972,000 for salary and expense reduction; -\$42,568,000 for across-the-board reduction).
1992	1,989,278,000	prior to reductions in PL 102-170 (-\$21,475,000 for salary and expense reduction; -\$1,262,000 for travel reduction; \$15,000,000 transferred to other institutes for cancer research).
1993	2,007,483,000	prior to reductions in PL 102-294 (-\$16,060,000 for .8% reduction to all line items, -\$9,933,000 for S&E reduction, -\$139,000 for consultant services reduction).
1994	2,082,267,000	prior to reduction in PL103-211 (-\$5,885,000 administration reduction).
1995	2,135,119,000	prior to reductions in PL 103-211 (-\$1,883,000 for Procurement reduction; -\$116,000 for SLUC reduction; -\$1,052,000 for Bonus Pay reduction). Includes \$218,199,000 of AIDS funding.
1996	2,251,084,000	Includes \$225,790,000 of AIDS funding.
1997	2,382,532,000	Includes \$224,983,000 of AIDS funding.
1998	2,547,314,000	prior to reductions in PL 105-119 (-\$4,755,000 via the Secretary's 1% transfer authority). Includes \$8,699,000 transferred via the NIH Director's 1% transfer authority, \$41,000 transfer from U.S. Dept of State in PL 105-119, and \$226,414,000 of AIDS funding.
1999	2,927,187,000	prior to reductions in PL 106-51 (-\$1,940,000 for travel and admin expenses). Includes -\$931,000 transferred via the Secretary 1% transfer authority, and -\$6,259,000 transferred via the NIH Director's 1% transfer authority, and \$239,190,000 of AIDS funding.
1990 - 1999	21,752,588,000	
2000	3,332,317,000	Appropriation prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding.
1938-2000	44,993,335,220	

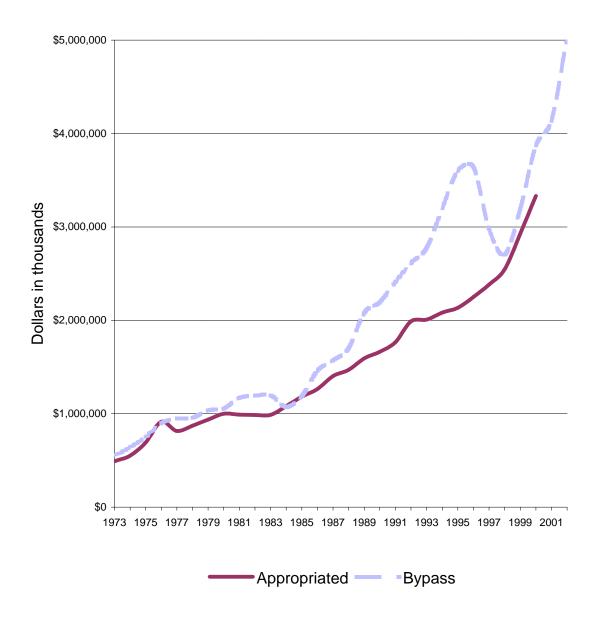
By-Pass Budget Requests Fiscal Years 1973-2002

(In Whole Dollars)

Fiscal	
Year	Request
1973	\$550,790,000
1974	640,031,000
1975	750,000,000
1976	898,500,000
1977	948,000,000
1978	955,000,000
1979	1,036,000,000
1980	1,055,000,000
1981	1,170,000,000
1982	1,192,000,000
1983	1,197,000,000
1984	1,074,000,000
1985	1,189,000,000
1986	1,460,000,000
1987	1,570,000,000
1988	1,700,000,000
1989	2,080,000,000
1990	2,195,000,000
1991	2,410,000,000
1992	2,612,000,000
1993	2,775,000,000
1994	3,200,000,000
1995	3,600,000,000
1996	3,640,000,000
1997	2,977,000,000
1998	2,702,500,000
1999	3,191,000,000
2000	3,873,000,000
2001	4,135,000,000
2002	5,030,000,000

The National Cancer Act in December 1971, included a provision for the Director, NCI to submit an annual budget request directly to the President, with comment only by NIH and DHHS. This Bypass Budget was first submitted for 1973.

Bypass Requests and Appropriations of the NCI 1973-2001



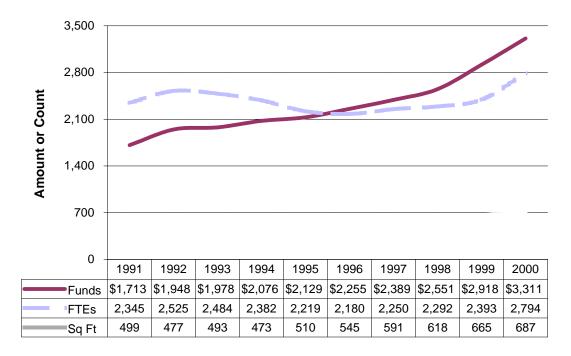
Comparison of Dollars, Positions and Space Fiscal Years 1991-2000

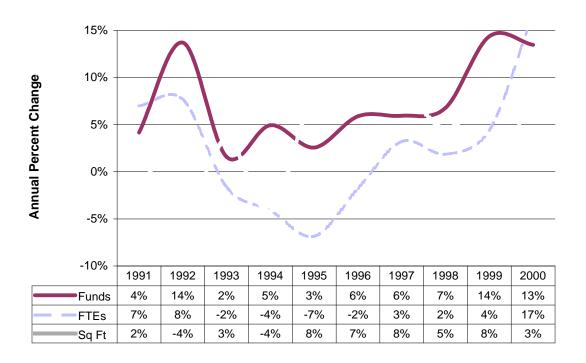
Funds are obligations against the annual appropriation in millions of dollars

FTEs are the number of workyears for appointed employees of the NCI. A workyear equal 2080 hours.

195 contract staff are converted to NCI appointments.

Space is thousands of sq feet excluding the Frederick Cancer Research and Development Center.





Personnel Resources Fiscal Years 1995-2000

Fiscal year	Full Time Appointment	Part Time Appointment	Training Fellows	Total Personnel Resources
1995	1767	483	1055	3305
1996	1841	460	960	3261
1997	1915	422	1023	3360
1998	1921	466	1124	3511
1999	1941	628	1060	3629
2000	2139	831	1202	4172