



**FRED HUTCHINSON CANCER CENTER
UNIFORM GUIDANCE FOR FEDERAL AWARDS**

Independent Auditor's Report in Accordance with the
Uniform Guidance for Federal Awards

Year Ended June 30, 2022

**FRED HUTCHINSON CANCER CENTER
UNIFORM GUIDANCE FOR FEDERAL AWARDS**

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KPMG LLP
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Independent Auditors' Report

The Board of Trustees
Fred Hutchinson Cancer Center:

Report on the Audit of the Consolidated Financial Statements

Opinion

We have audited the consolidated financial statements of Fred Hutchinson Cancer Center (Fred Hutch) which comprise the consolidated statement of financial position as of June 30, 2022, and the related consolidated statements of activities, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the consolidated financial position of Fred Hutch as of June 30, 2022, and the changes in its net assets and its cash flows for the year then ended in accordance with U.S. generally accepted accounting principles.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of Fred Hutch and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with U.S. generally accepted accounting principles, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Fred Hutch's ability to continue as a going concern for one year after the date the consolidated financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.



In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Fred Hutch's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Fred Hutch's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated October 14, 2022 on our consideration of Fred Hutch's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Fred Hutch's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Fred Hutch's internal control over financial reporting and compliance.

KPMG LLP

Seattle, Washington
October 14, 2022

FRED HUTCHINSON CANCER CENTER
Consolidated Statement of Financial Position
June 30, 2022
(in thousands)

Assets

Current assets:	
Cash and cash equivalents	\$ 365,050
Assets whose use is limited	170,635
Patient accounts receivable, net	145,450
Grants and contracts receivable, net	72,067
Short-term investments	767,960
Other current assets	95,670
Total current assets	1,616,832
Land, buildings and equipment, net of accumulated depreciation	813,534
Right of use assets	225,552
Long-term investments	149,769
Other assets	186,464
Total assets	\$ <u><u>2,992,151</u></u>

Liabilities and Net Assets

Current liabilities:	
Accounts payable and accrued liabilities	\$ 161,630
Current portion of long-term debt and lease liabilities	18,045
Other current liabilities	105,737
Total current liabilities	285,412
Long-term debt, net of current portion	1,089,000
Collaborative arrangement	428,824
Long-term lease liabilities, net of current portion	226,457
Deferred credit on cashflow hedges	18,075
Total liabilities	2,047,768
Net assets:	
Without donor restrictions	739,788
With donor restrictions	204,595
Total net assets	944,383
Total liabilities and net assets	\$ <u><u>2,992,151</u></u>

See accompanying notes to consolidated financial statements.

FRED HUTCHINSON CANCER CENTER

Consolidated Statement of Activities

Twelve months ended June 30, 2022

(in thousands)

	Without donor restriction	With donor restriction	Total
Revenues and other support:			
Research grants and contracts	\$ 660,241	—	660,241
Patient service revenue	269,929	—	269,929
Contributions	40,796	17,737	58,533
Investment income and realized gains, net	164,971	5,929	170,900
Clinical service fee revenue	18,367	—	18,367
Service and other income	48,340	—	48,340
Net assets release from restrictions	16,647	(16,647)	—
Total revenues	<u>1,219,291</u>	<u>7,019</u>	<u>1,226,310</u>
Operating expenses:			
Salaries, wages and benefits	418,347	—	418,347
Subawards	209,902	—	209,902
Purchased services	146,339	—	146,339
Collaborative arrangement	11,661	—	11,661
Supplies	152,293	—	152,293
Rent, utilities and maintenance	44,019	—	44,019
Interest, Depreciation and Amortization	55,692	—	55,692
Other	39,251	—	39,251
Total expenses	<u>1,077,504</u>	<u>—</u>	<u>1,077,504</u>
Change in net assets from operations	<u>141,787</u>	<u>7,019</u>	<u>148,806</u>
Other changes in net assets:			
Change in net unrealized fair value of investments	(269,343)	(14,337)	(283,680)
Change in net unrealized fair value of swap instruments	21,853	—	21,853
Loss on debt refinancing	(5,744)	—	(5,744)
Other net asset changes	(798)	(4,596)	(5,394)
Total other changes in net assets	<u>(254,032)</u>	<u>(18,933)</u>	<u>(272,965)</u>
Total changes in net assets	<u>(112,245)</u>	<u>(11,914)</u>	<u>(124,159)</u>
Net assets balance at beginning of year	<u>852,033</u>	<u>216,509</u>	<u>1,068,542</u>
Net assets balance at end of year	<u>\$ 739,788</u>	<u>204,595</u>	<u>944,383</u>

See accompanying notes to consolidated financial statements.

FRED HUTCHINSON CANCER CENTER

Consolidated Statements of Cash Flows

For the period ended June 30, 2022

(In thousands)

Cash flows from operating activities:	
Change in net assets	\$ (124,159)
Adjustments to reconcile change in net assets to net cash provided by (used in) operating activities:	
Depreciation and amortization	39,993
Decrease in noncash deferred revenue	(1,000)
Equity in earnings of unconsolidated related party	(22,753)
Change in net unrealized fair value of investments	283,680
Change in net realized fair value of investments	(129,341)
Gain on sale of pediatric transplant program	(3,670)
Change in value of split interest agreements	4,596
Change in fair value of swap instruments	(21,797)
Loss on defeasance of debt	5,744
Noncash contributions	(9,791)
Restricted contributions	(1,086)
Changes in assets and liabilities:	
Grants and contracts receivable	(9,018)
Patient accounts receivable	1,960
Other current assets	5,119
Other assets	(7,040)
Assets whose use is limited	(3,598)
Accounts payable and accrued liabilities	2,783
Other current liabilities	17,644
Change in right of use assets and lease liabilities	815
Net cash provided by operating activities	<u>29,081</u>
Cash flows from investing activities:	
Additions to land, buildings, equipment and rental property	(51,123)
Buy-out purchase of equity investor	(285,884)
Net cash and restricted cash acquired in acquisition	402,474
Purchase of investments	(548,266)
Sale of investments	<u>576,192</u>
Net cash provided by investing activities	<u>93,393</u>
Cash flows from financing activities:	
Proceeds from new debt	1,154,420
Additions to deferred financing costs	(2,770)
Repayment of debt	(848,256)
Contributions restricted for long-term investment	<u>1,086</u>
Net cash provided by financing activities	<u>304,480</u>
Net increase in cash and cash equivalents	426,954
Cash, cash equivalents and restricted cash at beginning of year	<u>42,626</u>
Cash, cash equivalents and restricted cash at end of period	<u><u>\$ 469,580</u></u>
Supplemental cash flow disclosure:	
Interest paid	\$ 14,584
Capital expenditures in accounts payable	28,283
Reclassification of land	29,779

See accompanying notes to consolidated financial statements.

FRED HUTCHINSON CANCER CENTER

Consolidated Financial Statements

June 30, 2022

(In thousands)

(1) Organization

Fred Hutchinson Cancer Center (Fred Hutch) is a Washington not-for-profit corporation organized and operated exclusively for charitable, scientific, and educational purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986. It unites innovative research and compassionate care to prevent and eliminate cancer and infectious disease. It is driven by the urgency of our patients, the hope of our community and our passion for discovery to pursue scientific breakthroughs and healthier lives for every person in every community. Fred Hutch is designated by the National Cancer Institute as a comprehensive cancer research center.

Fred Hutch was formed in April 2022 when Fred Hutchinson Cancer Research Center (FHCRC), a cancer, infectious disease and biomedical research center, combined with the Seattle Cancer Care Alliance (SCCA), an integrated cancer care provider. Concurrent with the business combination, Fred Hutch entered into a Restructuring Agreement with University of Washington Medicine (UWM) forming a clinically integrated adult oncology program spanning two institutions. See Business Combination Note 2.

In support of its mission, Fred Hutch controls the following not-for-profit affiliates

- The Hutchinson Centre Research Institute in Uganda Limited (HCRIU) is a Uganda not-for-profit corporation. It is organized and operated for the purpose of researching, detecting, treating, and preventing infection-related cancers in Uganda and throughout the world. Fred Hutch is the sole member of HCRIU. The income and property of HCRIU are restricted to be used in meeting its organizational objectives. The net assets of HCRIU of \$(14,663) as of June 30, 2022, are not considered pledged obligations under debt covenants.
- Hutchinson Centre Research Institute of South Africa (HCRISA) is a South Africa not-for-profit corporation. It is organized and operated for the purpose of promoting and conducting clinical, laboratory, and other research aimed at the prevention, early detection, diagnosis, and treatment of HIV/AIDS, Tuberculosis, and other infectious diseases and cancer in South Africa and throughout the world. Fred Hutch is the sole member of HCRISA. The income and property of HCRISA are restricted to be used in meeting its organizational objectives. The net assets of HCRISA of \$6,259 as of June 30, 2022, are not considered pledged assets under debt covenants.
- Seattle Vaccine Research Fund (SVRF), a Washington State not-for-profit corporation, is exempt from federal taxes under Section 501(c)(3). It is operated for the purpose of providing anti-retrovirals to eligible participants of HIV Trials Network. The net assets of SVRF of \$2,519 as of June 30, 2022, are not considered pledged assets (obligations) under Fred Hutch's debt covenants.

(2) Business Combination and Restructure Agreement

On April 1, 2022, FHCRC purchased the membership interest held by Seattle Children's Hospital (SCH) in SCCA on behalf of both FHCRC and UWM. The total consideration paid to SCH was \$285,900. UWM subsequently issued a promissory note to Fred Hutch for half of the purchase price. The note has a term of 10 years and an interest rate of 4.8%. The balance on the note was \$140,089 as of June 30, 2022 and included in Other Assets and Other Current Assets.

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Consolidated Financial Statements

June 30, 2022

(In thousands)

On April 1, 2022, FHCRC merged with SCCA to form Fred Hutch. The transaction was treated as an acquisition by a not-for-profit and business combination with FHCRC as the acquirer. The transaction was accounted for in accordance with Topic 805, *Business Combinations*. The fair value of SCCA's acquired assets, and assumed liabilities as of April 1, 2022, were as follows:

Acquired assets:

Cash, cash equivalents, and restricted cash	\$	402,474
Assets whose use is limited		75,224
Patient accounts receivable, net		147,410
Short-term investments		334,840
Other current assets		51,055
Land, buildings and equipment, net of accumulated depreciation		331,331
Right-of-use assets		204,275
Other assets		18,611
	\$	<u>1,565,220</u>

Assumed liabilities:

Accounts payable and accrued liabilities	\$	89,056
Other current liabilities		20,736
Long-term debt		392,956
Lease liabilities		204,824
	\$	<u>707,572</u>

On April 1, 2022 and concurrent with the business combination transaction, Fred Hutch entered into the Restructuring and Enhanced Collaboration Agreement (Restructuring Agreement) with UWM. In consideration for UWM relinquishing its membership interest in SCCA, UWM and Fred Hutch restructured their cancer programs into a clinically integrated adult oncology program and enhanced cancer research collaborations that integrate clinical care and research to provide the best possible patient care. Under a management agreement, Fred Hutch will provide management services to participating UWM oncology programs.

The Restructuring Agreement includes a Financial Alignment Plan. The plan prescribes the methodologies to allocate the clinical resources and provides for a perpetual flow of funds between FHCC and UWM to support the integrated program. The flow of funds is expected to be predominantly from FHCC to UWM, but under certain conditions payments from UWM to FHCC may be required. The Financial Alignment Plan was accounted for in accordance with Topic 808, *Collaborative Arrangements* with a recorded long-term liability at fair value of \$428,824. A Collaborative Arrangement expense of \$11,661 was recorded for the year ended June 30, 2022.

As a result of the business combination, a prior year land transaction between FHCRC and SCCA was reclassified from a Right-of-use asset to Land. This is a non-cash transaction and noted on the cash flow statement.

FRED HUTCHINSON CANCER CENTER

Consolidated Financial Statements

June 30, 2022

(In thousands)

(3) Summary of Significant Accounting Policies

(a) Basis of Presentation

The consolidated financial statements include the accounts of Fred Hutchinson Cancer Center and its controlled affiliates, collectively referred to as Fred Hutch. All significant intercompany balances and transactions between Fred Hutch and its controlled affiliates have been eliminated in consolidation.

(b) Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles (GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

(c) Cash and Cash Equivalents

Included in cash and cash equivalents are cash equivalents of \$40,002 as of June 30, 2022 invested in liquid debt instruments with original maturities of three months or less. Cash equivalents within investment accounts is reflected as investment activity on the statement of cash flows.

Fred Hutch maintains cash and cash equivalents on deposit at financial institutions, which at times exceed the limits insured by the Federal Deposit Insurance Corporation. This exposes Fred Hutch to insolvency risk if the financial institution becomes insolvent.

Cash and cash equivalents	\$	365,050
Cash included within investments		7,825
Cash held by trustee in assets whose use is limited		<u>96,705</u>
Total cash and cash equivalents	\$	<u><u>469,580</u></u>

(d) Assets whose use is limited

Assets whose use is limited include net assets without donor restrictions designated by the Board of Directors (the Board) for future capital purpose over which the Board retains control and may, at its direction, subsequently use for other purposes. Assets whose use is limited also include net assets with donor restrictions and funds held under the terms of FHCC's trust indenture. As of June 30, 2022, the fair value of assets whose use is limited is as follows:

Board-designated investments – Clinical expansion	\$	70,109
Donor restricted funds		3,821
Funds held under trust indenture		<u>96,705</u>
Assets whose use is limited	\$	<u><u>170,635</u></u>

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June 30, 2022

(In thousands)

(e) *Supplies Inventory*

Inventory consisting primarily of surgical, medical, and pharmaceutical supplies, is carried at the lower of cost (first-in, first-out method) or net realizable value in other current assets.

(f) *Land, Buildings, and Equipment*

Land, buildings, and equipment acquisitions are recorded at cost. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed using the straight-line method. Interest costs incurred on borrowed funds during the period of construction of capital assets are capitalized. Improvements and replacements of land, buildings, and equipment are capitalized; maintenance and repairs costs are expensed. The costs and related accumulated depreciation of property, plant and equipment sold or retired are removed from the accounts and the resulting gain or loss is recognized.

Long-lived assets, such as property, plant, and equipment, are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount of the long-lived asset may not be recoverable.

Fred Hutch receives reimbursement for a portion of its property, plant, and equipment through direct and indirect cost reimbursement primarily from the federal government in connection with federal grants.

(g) *Leases*

Fred Hutch is a lessee in noncancelable operating leases for research, clinic, and office space that expire over the next forty years and generally contain renewal options for periods ranging from two to fifty years. Fred Hutch has a finance lease for equipment as of June 30, 2022. Leases are accounted for in accordance with Topic 842, *Leases*. Fred Hutch determines if an arrangement is or contains a lease at inception. A right-of-use (ROU) asset and a lease liability are recognized at the lease commencement date.

The lease liability represents Fred Hutch's obligation to make lease payments discounted to the present value of the unpaid lease payments at the commencement date of each lease.

The ROU asset represents the lessee's right to use or control the use of a specified asset for a lease term and is initially measured at cost, which comprises the initial amount of the lease liability adjusted for lease payments made at or before the lease commencement date, plus any initial direct costs incurred less any lease incentives received. The ROU asset is subsequently measured throughout the lease term at the carrying amount of the lease liability, plus (minus) and prepaid (accrued) lease payments, less the unamortized balance of lease incentives received. These lease agreements do not contain any material residual value guarantees or material restrictive covenants. Leasehold improvements are capitalized at cost and amortized over the lesser of their expected useful life or the lease term.

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(In thousands)

Fred Hutch uses an incremental borrowing rate at the commencement date in determining the discounted present value of lease payments. The incremental borrowing rate is a hypothetical rate based on Fred Hutch's implicit credit rating.

Fred Hutch has elected not to recognize ROU assets and lease liabilities for lease terms of 12 months or less. Rent for these leases is expensed in the period incurred. Fred Hutch has elected not to apply the short-term lease recognition and measurement exemption for other classes of leased assets. Options for lease extensions that Fred Hutch is reasonably certain of exercising are considered in determining the lease term used to establish the right-of-use assets and lease liabilities.

Certain lease agreements contain both lease and non-lease components. Fred Hutch accounts for lease and non-lease components separately. Payments for the lease and non-lease (service) components are allocated based on estimated stand-alone values.

Fred Hutch also has leases that include variable payments based on measures such as level of use. These payments are expensed as incurred and reported in other operating expenses.

(h) Intangible Assets

Intangible assets are stated at fair value. All intangible assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Intangible assets are amortized over the expected life of the asset.

In 2022 there were no impairment charges.

(i) Patient Services Revenue

Fred Hutch treats contracts with similar characteristics as a portfolio for the patient services revenue stream under *Accounting Standards Update No. 2014 09 – Revenue from Contracts with Customers (Topic 606)* as the revenue represents a large volume of similar contracts with similar classes of customers. Patient services revenues are comprised of two primary portfolios: clinical services and retail pharmacy operations.

Patient service revenue is reported at the estimated net realizable amount from patients, third party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third party payors. Retroactive agreements are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

Clinical services are the services performed by physicians and other medical professionals to aid in the diagnosis and treatment of cancer. Fred Hutch satisfies clinical service performance obligations over time as services are rendered and thus, recognizes revenue for clinical services over time based on actual charges incurred. Fred Hutch believes that this method provides a useful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. Fred Hutch bills patients and third-party payors several days after the services are performed and/or the patient is discharged from the facility.

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June 30, 2022

(In thousands)

The transaction price is based on standard charges for goods and services provided, reduced by contractual adjustments provided to third party payors and discounts provided to uninsured patients in accordance with Fred Hutch policy and implicit price concessions provided to the uninsured patient. Fred Hutch estimates the contractual adjustment for unpaid accounts based on contractual agreements, its discounts policies, and historical experience by class of patient. Fred Hutch analyzes the discounts on patient service revenue by portfolio of inpatient and outpatient clinical services and payor classification. Fred Hutch has sufficient historical information on these payor groups' collection rates and other information that allows Fred Hutch to analyze these statistics against the portfolio and conclude that the revenue for a given portfolio would not be materially different than if accounting for revenue on a contract-by-contract basis.

Retail pharmacy operations consist of sales of prescription and over the counter drugs. These revenues are recognized at a point in time, upon delivery of prescription and over the counter drugs to the patient. Fred Hutch sends billing information to the insurance companies at the time of prescription fulfillment. Patient responsible portion is billed at the time of prescription pick up.

Fred Hutch has elected to apply the optional exemption in FASB Accounting Standards Codification (ASC) 606-10-50-14a *Revenue from Contracts with Customers* as all Fred Hutch's performance obligations relate to contracts with a duration of less than one year. As such, Fred Hutch is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period as permitted in ASC 606-10-50-14a. The unsatisfied or partially unsatisfied performance obligations referred to above are primarily related to inpatient clinical services at the end of the reporting period. The performance obligations for these contracts are generally completed when the patients are discharged, which generally occurs within one and a half weeks after the end of the reporting period.

For patients that do not qualify for financial assistance, Fred Hutch recognizes that a portion of their patients will be unable or unwilling to pay for the services provided. Fred Hutch determines its estimate of implicit price concessions based on historical collection experience by primary payor class of patients. The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts Fred Hutch expects to collect based on its collection history with those patients.

Changes to the initial estimate of the transaction price are recorded as adjustments to patient service revenue in the period of the change while subsequent changes that are determined to be the result of an adverse change in the payor's ability to pay are recorded as bad debt expense.

(j) Charity

Fred Hutch provides care to patients who meet certain criteria under its financial assistance policy without charge or at amounts less than its established rates. Because Fred Hutch does not pursue collection of amounts determined to qualify as financial assistance, they are not reported as revenue. The estimated net cost of financial assistance provided was approximately \$3,581 in 2022. The net cost of financial assistance was calculated using a percentage of cost to charges, which was 45% in 2022. The number of financial assistance patients served was 1,107 in 2022.

FRED HUTCHINSON CANCER CENTER

Consolidated Financial Statements

June 30, 2022

(In thousands)

(k) Research Grants and Contracts Revenue

Fred Hutch recognizes revenue from grants and contracts on the research it performs. Grantors include both federal and nonfederal sponsors with approximately 86% of Fred Hutch's research revenue derived from federal agencies for the year ended June 30, 2022.

Research grants and contracts that represent exchange transactions are recognized as revenue as performance obligations are satisfied by achieving milestones or meeting barriers as disclosed in the agreement.

Research grants and contracts that represent non-exchange transactions are recognized as grant revenue in the period Fred Hutch meets the conditions for revenue recognition, namely when it incurs reimbursable program expenditures.

Fred Hutch has estimated that contingent contributions associated with grants and contracts that do not meet the requirements for revenue recognition are estimated at \$318,827 as of June 30, 2022.

(l) Deferred Revenue and Grants and Contracts Receivable

Deferred revenue represents grant and contract funds received in advance for research to be performed by Fred Hutch in future periods. When Fred Hutch has received more funds than it has earned for a project, the difference is recorded as deferred revenue. When Fred Hutch has earned more revenue than project funds received, a receivable from the funding agency is recognized to the extent of remaining funding commitments in the grant and contracts receivable.

(m) Donor-Restricted Contributions

Unconditional promises to give cash and other assets to Fred Hutch are reported at fair value at the date the promise is received. Conditional promises to give are reported at fair value at the date the gift is received or when the conditions are met. The gifts are reported as donor restricted contributions if the donor stipulates either a time or purpose restriction. When a time restriction expires or a purpose restriction is fulfilled, the donor restricted net assets are reclassified as without donor restrictions and reported in the statements of activity as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as without donor restrictions in the accompanying consolidated financial statements.

(n) Perpetual Trusts and Charitable Remainder Trusts

Fred Hutch is the beneficiary of irrevocable perpetual trusts and charitable remainder trusts for which Fred Hutch is not the trustee. These funds held in trust by others represent resources neither in the possession nor under the control of Fred Hutch and are administered by third party-trustees.

When Fred Hutch is notified of the existence of an irrevocable perpetual trust and can reasonably value its interest, Fred Hutch recognizes its beneficial interest in the outside trust at fair value as a contribution. The contribution is classified as an increase in donor restricted net assets based on restrictions placed by the donor. The changes in the fair value of the irrevocable perpetual trusts are reflected as investment changes restricted by donors in restricted net assets on the consolidated statement of activity.

FRED HUTCHINSON CANCER CENTER

Consolidated Financial Statements

June 30, 2022

(In thousands)

When Fred Hutch is notified of an irrevocable charitable remainder trust for which it is not the trustee, Fred Hutch recognizes its beneficial interest in the outside trust as a contribution at fair value, which is measured as the present value of the estimated expected future benefits to be received. The contribution is classified as an increase in restricted net assets based on restrictions placed by the donor upon Fred Hutch's beneficial interest. Periodic adjustments recorded to the beneficial interest to reflect changes in the fair value, life expectancy, and discount rate are recognized based on information from outside trustees. At June 30, 2022, there was \$3,428 of charitable remainder trusts for which Fred Hutch is not the trustee are reflected as a receivable from trusts that are included in other current assets in the accompanying consolidated statement of financial position.

(o) Foreign Currency Translation and Transaction Gains and Losses

The consolidated financial statements include foreign currency amounts attributable to foreign operations. The foreign currency amounts have been translated into U.S. dollars using year-end exchange rates for certain assets and liabilities, historical rates for net assets and average monthly rates for revenues and expenditures. Unrealized gains or losses arising from fluctuations in the year-end exchange rates of non U.S.- dollar assets and liabilities are recorded as net asset adjustments from foreign currency translation, and gains or losses resulting from actual foreign exchange transactions are recorded in revenue and expenses in the consolidated statements of activities.

(p) Net Assets with Donor Restrictions

Donor restricted net assets include amounts restricted for time or purpose and amounts that are restricted in perpetuity. Fred Hutch's net assets restricted in perpetuity consist of various endowment funds and Fred Hutch's interest in perpetual trusts. Income earned on funds restricted in perpetuity is used for operations in accordance with the terms of each endowment fund and the Uniform Prudent Management of Institutional Funds Act (UPMIFA).

(q) Functional Expense Allocation Methodology

Fred Hutch's consolidated financial statements report certain categories of expenses that are attributable to more than one function. These expenses are allocated based on the appropriate metrics and consistently applied. Management believes the basis of allocation among related program or supporting functions is reasonable.

(r) Statement of Activities

The statement of activities describes the results of financial events included in the change in net assets. Contributions received are recorded either with or without donor restrictions. Investment income may be donor restricted or without donor restriction. Research grants and contracts revenue and related expenses incurred are unrestricted. Changes in asset values resulting from "mark--to--market" adjustments are shown as unrealized gains and losses under other changes in net assets. A total increase or decrease in net assets for each net asset grouping is shown to roll forward the beginning of the year balance to the end of the year balance.

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(s) Commercialization Income

Fred Hutch actively works to develop scientific discoveries into new products and services. Revenue is generated from licensing agreements, partnerships, and royalty streams, and new businesses are reported within Service and Other Income.

(t) Federal Income Taxes

Fred Hutch has obtained a determination letter from the Internal Revenue Service that it is exempt from federal income taxes under Section 501(c)(3), except for unrelated business income. Unrelated business income typically is trade or business activity regularly carried on and is not related to furthering the exempt purpose of Fred Hutch.

(u) Recent Accounting Pronouncements

In September 2020, the FASB issued ASU 2020-07, Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets. This ASU changes the presentation and disclosure requirements for not-for-profit entities to increase transparency about contributed nonfinancial assets. The ASU is effective for annual periods beginning after June 15, 2021, and interim periods within annual periods beginning after June 15, 2022, with early adoption permitted. Fred Hutch has implemented ASU 2020-07 and all provisions are included in the consolidated financial statements.

(4) Due from Government Agencies

Fred Hutch incurs facilities and administrative (F&A) costs to support its government sponsored research activities. Sponsors are charged for these costs through an F&A cost rate, which is applied to modified total direct research costs. Both direct and F&A costs are recovered by Fred Hutch from research programs supported by federal and other grant revenue.

The fixed federal F&A rate for grant and contract supported programs is determined by prospective negotiation with the Department of Health and Human Services (DHHS) based on an estimate of the costs that will be incurred during the period to which the rate applies. Any difference between the costs recovered through the fixed F&A cost rate and actual F&A costs for a year are generally incorporated with the federal government through future rates. No estimated settlement was recorded as of June 30, 2022.

(5) Availability and Liquidity

Fred Hutch regularly monitors its ability to meet its cash flow requirements and operating needs. The availability of financial assets is primarily affected by management's designation and external limitations

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imposed by donors. The following financial assets on the statements of financial position are expected to be readily available for general expenditures within one year:

Financial assets:

Cash and cash equivalents	\$ 365,050
Assets whose use is limited	170,635
Patient accounts receivable, net	145,450
Grants and contracts receivable, net	72,067
Other current assets	17,596
Other assets (a)	177,884
Investments	<u>917,729</u>
Total financial assets, at year-end	<u>1,866,411</u>

Less those unavailable for general expenditures within one year:

Assets whose use is limited (c)	170,635
Other assets (b)	152,020
Investments (c)	<u>148,420</u>
Total unavailable for general expenditures within one year	<u>471,075</u>

Financial assets available for general expenditures within one year

\$ 1,395,336

- a. Other Assets include the UW promissory note to Fred Hutch, notes and pledges receivable, other assets and VAT recoverable, net of values.
- b. Other assets of \$152,020 as of June 30, 2022 are classified as unavailable within one year. This amount includes \$140,089 for the UW promissory note to Fred Hutch with a term of 10 years, \$4,900 of pledges for donor restricted endowments, \$3,614 of deferred gifts to be collected beyond one year, and \$3,417 of other amounts.
- c. Assets whose use is limited totaling \$170,635 and investments totaling \$148,420 as of June 30, 2022, are considered unavailable within one year. The investment total amount includes \$4,531 required reserves for charitable annuities, \$143,889 of donor restricted endowment funds, net of appropriations for expenditures in 2022 in the amount of \$5,880.

As part of Fred Hutch's liquidity management, it makes financial assets available based on forecasted liquidity requirements. Fred Hutch invests cash in excess of current requirements in short-term-investments. In the event of unanticipated liquidity needs, Fred Hutch has committed lines of credit in the amount of \$30,000. If necessary, it can also increase liquidity from long-term investments.

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(6) Investments

Donor restricted, board-designated and undesignated investments are carried at fair value and include cash and cash equivalents, equity securities, debt securities, and alternative investments.

FASB ASC Topic 820-10-50, *Fair Value Measurement*, provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1 – Quoted prices (unadjusted) in active markets accessible at the measurement date for identical investments.
- Level 2 – Inputs based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in inactive markets, data other than quoted prices that are observable for the asset or liability, and data that are derived principally from or corroborated by observable market data by correlation or other means.
- Level 3 – Inputs that are derived principally from or corroborated by unobservable market data by correlation or other means.

The level in the fair value hierarchy within which a fair value measurement in its entirety falls is based on the lowest-level input that is significant to the fair value measurement in its entirety.

Management classifies investments expected to mature or be sold within the following year or not designated or restricted for other purposes as short-term investments. Fred Hutch has designated \$767,960 of investments as short-term as of June 30, 2022.

(a) *Fair Value Calculation Methodology*

The following methods and assumptions were used to estimate the fair value of each class of financial instruments for which it is practicable to estimate that value:

Cash and cash equivalents – The carrying amount of cash designated for investment approximates fair value due to the short-term-maturity of those instruments (90 days or less).

Investments and trusts – Investments in equity and debt securities, beneficial interest in charitable remainder trusts and perpetual trusts are measured at fair value based on quoted market prices, if available, or estimated using quoted market prices for similar securities. Alternative investments are measured at fair value based on each fund's net asset value (NAV) as a practical expedient. Other equity securities, which are shares held in a nonpublic entity, are measured at fair value based on management's valuation model. Management's model utilizes data and assumptions that are not observable to market participants.

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Long-term debt – The carrying amount of long-term-debt with variable interest rates approximates fair value because interest rates are adjusted either daily or weekly for the variable rate demand bonds. The carrying amount of the fixed rate debt is calculated based upon the net present value of the future cash outflows of the associated fixed rate debt discounted at the interest rates in effect as of June 30, 2022.

Cash flow hedges – The carrying amounts of the interest rate swaps are at estimated fair values based on the net present value of the associated variable cash flows, adjusted for Fred Hutch's and the respective counterparty's nonperformance risk.

(b) Fair Value Hierarchy

In accordance with ASC Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of financial position.

The following tables present assets and liabilities that are measured at fair value on a recurring basis as of June 30, 2022:

	<u>June 30, 2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Investments measured by fair value level:				
Cash and cash equivalents imbedded in investment	\$ 7,876	7,876	—	—
U.S. Treasury notes and bills	34,460	34,460	—	—
Global equity securities and mutual funds	384,892	382,848	2,044	—
Governments, mortgage, and corporate debt funds	381,916	182,622	199,294	—
Commodity investments and funds	11,767	11,767	—	—
Other equity securities	10,317	9,350	—	967
Total investments by fair value level	<u>\$ 831,228</u>	<u>628,923</u>	<u>201,338</u>	<u>967</u>
Investments measured using NAV:				
Global equity securities and mutual funds	43,262			
Global real estate funds	123			
Private equity and venture capital funds	14,976			
Directional hedge securities	28,140			
Total investments measured using NAV	<u>86,501</u>			
Total investments	<u>\$ 917,729</u>			

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	<u>June 30, 2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Investments measured by fair value level:				
Assets:				
Beneficial interest in charitable remainder trusts	\$ 3,428	—	—	3,428
Beneficial interest in perpetual trusts	32,460	—	—	32,460
Assets whose use is limited	73,930	73,930	—	—
Liabilities:				
Deferred credit on cash flow hedges	\$ (18,075)	—	(18,075)	—

There was no material activity in Level 3 investments during the current year. No new charitable remainder trusts were added during the year ended June 30, 2022.

Fred Hutch's interests in certain non-readily marketable alternative investments, such as hedge funds and private equity limited partnerships, are stated at fair value based on NAV estimates used as a practical expedient reported to Fred Hutch by investment fund managers. The valuation method for investments measured using NAV per share (or its equivalent) is presented in the following table.

	<u>June 30, 2022</u>	<u>Redemption or liquidation</u>	<u>Days notice</u>	<u>Unfunded commitment</u>
Global equity securities and mutual funds	\$ 43,262	Monthly	30	N/A
Global real estate funds	123	Quarterly	90	N/A
Private equity and venture capital funds	14,976	N/A	N/A	12,199
Directional hedge securities	<u>28,140</u>	Qtrly – Every 2 years	30 – 184	N/A
Total investments measured using NAV	\$ <u>86,501</u>			

Global equity securities and mutual funds: This investment category includes public equity investments in separately managed accounts, log-only comingled funds, and passive market indices. Fair values have been determined using the NAV per share of the investments. All of the investments in this category can be redeemed within a year.

Global real estate funds – This category includes real estate, natural resources and other hard assets. Fair values have been determined using the NAV per share (or its equivalent) of the ownership in the partners' capital. All of the investments in this category can be redeemed within a year.

Private equity and venture capital funds – This category includes buyout, venture, and special situation funds. Fair values have been determined using the NAV per share (or its equivalent) of the ownership interest in partners' capital. These investments can never be redeemed with the funds with

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the exception of one investment. Distributions from each fund will be received as the underlying investments are liquidated. It is expected that the majority of the underlying assets of the funds will be liquidated over the next 15 years.

Directional hedge securities – The categories include public equity investments in separately managed accounts, long and short comingled funds. Fair values have been determined using the NAV per share (or its equivalent) of the ownership in the partners' capital or the investment fund. Approximately 97% of the investments in this category can be redeemed within next year and 3% can be redeemed in two years.

Fred Hutch's investments contain endowment funds with donor restrictions for research and other related purposes. As required by GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed-restrictions. Fred Hutch's board designated-investments include funds designated by the board of trustees to function as endowments and funds designated for the clinic expansion. The board of trustees may also elect to remove designations on funds previously designated.

(c) Components of Investment Income for the year ended June 30 are as follows:

Investment income:	
Interest and dividend income	\$ 19,652
Net realized gains	129,341
Equity in earnings of SCCA investment prior to business combination	<u>22,753</u>
	171,746
Less investment management fees	<u>(846)</u>
Total investment income	<u>\$ 170,900</u>

(7) Endowments

(a) Return Objectives and Risk Parameters

Fred Hutch has adopted investment and spending policies for its endowment that aim to provide resources to its programs. The endowment includes donor restricted-funds as well as board designated-investments. Under this policy, as approved by the investment committee of Fred Hutch's board of trustees, the primary objective of the investment of the endowment is to provide a rate of total return that exceeds the rate of inflation (as represented by the Consumer Price Index All-Urban Consumers) plus 5% over the long term. Fred Hutch defines the long term as five years and more. Consistent returns are to be emphasized over individual year results. The endowment should experience risk (volatility and variability of return) no greater than that of the market. Fred Hutch defines the market as the portfolio's asset allocation policy applied to the Russell 3000 Index, the Morgan Stanley Capital Europe, Australia, Far East (EAFE) Index or its equivalent, and the Bloomberg Barclays U.S. Aggregate Bond Index.

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(b) Strategies Employed for Achieving Objectives

Fred Hutch relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends) to achieve its long-term-rate of return objectives. Fred Hutch utilizes an efficient frontier approach to establish the appropriate asset allocation balancing long-term-return objectives within prudent risk constraints. The investment committee of Fred Hutch's Board of Trustees review Fred Hutch's asset allocation at least once a year.

(c) Spending Policies and How the Investment Objectives Relate to Spending Policies

Fred Hutch's spending policy for individual endowment funds is to appropriate for distribution each year 5% of the endowment fund's average fair value over the prior three years, provided that the fair value of the endowment fund exceeds the corpus. Certain board designated-funds held for future capital and debt obligations do not make distributions. For the remaining endowment funds, Fred Hutch appropriates distributions to support its programs.

(d) Funds with Deficiencies

Unless otherwise agreed with the donor, Fred Hutch's policy has been to maintain the value of the original corpus of each individual donor restricted-endowment fund. From time to time, the fair value of assets in such endowment funds may fall below this level or such other level as may have been agreed to by the donor or required by law. Losses on donor restricted-endowment funds reduce net assets with donor restrictions. As of June 30, 2022, there were 9 funds with a fair market value below the original corpus value.

(e) Endowment Allocation and Activity

The following tables show the net asset composition of Fred Hutch's endowment funds by type of fund as of June 30, 2022:

	Without donor restriction	With donor restriction	Total
Donor-restricted endowment funds	\$ —	102,032	102,032
Board designated endowment funds	400,424	—	400,424
	<u>\$ 400,424</u>	<u>102,032</u>	<u>502,456</u>

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The following tables show the activity that has occurred within the endowment net asset accounts for the year ended June 30, 2022:

	Without donor restrictions	With donor restrictions	Total
Endowment net assets, beginning of year	\$ 488,350	109,722	598,072
Investment return:			
Investment income	8,500	1,925	10,425
Net realized gain/(loss)	56,919	4,461	61,380
Net appreciation (depreciation) – unrealized	(127,464)	(14,115)	(141,579)
Total investment return	(62,045)	(7,729)	(69,774)
Contributions	—	11,565	11,565
Distributions	—	(167)	(167)
Board transfers In/(Out)	(23,466)	(7,637)	(31,103)
Appropriation of endowment assets for expenditure	(2,415)	(3,722)	(6,137)
Endowment net assets, end of year	\$ 400,424	102,032	502,456

Contributions to the endowment are only added when cash is received; pledges are recorded outside of the endowment net assets until collected.

(8) Land, Buildings, and Equipment

Summaries of land, buildings, improvements and equipment at cost as of June 30 are as follows:

Land	\$ 142,661
Buildings and improvements	703,015
Equipment	255,105
Construction in progress	210,632
	1,311,413
Less accumulated depreciation	(497,879)
Total land, buildings and equipment, net of accumulated depreciation	\$ 813,534

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Buildings are depreciated on a straight-line basis over 45 years, while improvements and equipment are depreciated over 3 to 30 years, depending on the nature of the asset. Interest expense on borrowed funds during construction is a component of the cost of assets. The amount capitalized represents interest on funds expended for construction. Capitalization of interest ceases when the asset is placed in service. Construction in progress includes \$17,487 of capitalized interest, of which \$2,214 was capitalized in the year ended June 30, 2022.

Depreciation expense for the fiscal year ended June 30, 2022, amounted to approximately \$39,993.

(9) Long-Term-Debt

Summaries of long-term-debt as of June 30 are as follows:

Washington Health Care Facilities Authority Revenue Bonds, Series 2022C, due in varying amounts through 2052 plus interest at a variable interest rate	\$	55,000
Washington Health Care Facilities Authority Revenue Bonds, Series 2022D, due in varying amounts through 2034 plus interest at a fixed interest rate		103,545
Washington Health Care Facilities Authority Revenue Bonds, Series 2022E, due in varying amounts through 2052 plus interest at a variable interest rate		125,000
Taxable Bonds, Series 2022, due in 2052 plus interest at a fixed interest rate		300,000
Washington Health Care Facilities Authority Revenue Bonds, Series 2021, (SCCA), due in varying amounts through 2048 plus interest at fixed rates, net of unamortized bond premium of \$6,129		43,054
Washington Health Care Facilities Authority Revenue Bonds, Series 2020, (SCCA), due in varying amounts through 2055 plus interest at fixed rates, net of unamortized bond premium of \$41,551		274,476
Taxable Bonds, Series 2020, (FHCRC) due in varying amounts through 2050 at a fixed interest rate		121,225
Washington Health Care Facilities Authority Revenue Bonds, Series 2014, (SCCA), due in varying amounts through 2055 plus interest at fixed rates, net of unamortized bond premium of \$3,929		71,854
Notes payable, net of unamortized discount \$380		6,062
		1,100,216
Less current portion		(3,959)
Less deferred financing costs		(7,257)
Long-term debt, net	\$	<u>1,089,000</u>

All of the Revenue Bonds above are subject to the terms of Fred Hutch's Master Trust Indenture which defines the members of the Obligated Group for the long-term debt, establishes a collateral pledge on the gross receivables of the Obligated Group and provides covenants, including a requirement to maintain a debt service coverage ratio of 1.10 to 1.00.

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On March 10, 2022, Fred Hutch issued \$166,035 Taxable Bonds, Series 2022A as the first tranche of a taxable bridge loan (Bridge Loan). The proceeds of this tranche of the Bridge Loan were used to establish escrow accounts for the purpose of defeasing \$66,765 of the Washington Health Care Facilities Authority Revenue Bonds, Series 2015 (Fred Hutchinson Cancer Research Center) and \$92,110 of the Washington Health Care Facilities Authority Revenue Bonds, Series 2017B (Fred Hutchinson Cancer Research Center).

On March 31, 2022, Fred Hutch issued \$404,840 Taxable Bonds, Series 2022B as the second tranche of the Bridge Loan for the purpose of establishing an escrow account to defease \$19,015 of the Washington Health Care Facilities Authority Revenue Bonds, Series 2017A (Fred Hutchinson Cancer Research Center), establishing an escrow account to defease \$85,715 of the Washington Health Care Facilities Authority Revenue Bonds, Series 2017C (Fred Hutchinson Cancer Research Center), and buying out the Seattle Children's interest in the SCCA.

On June 30, 2022, Fred Hutch issued \$283,540 of tax--exempt revenue bonds Series 2022 C,D,E, and \$300,000 Taxable Bonds Series 2022. The proceeds were used to refinance the Bridge Loan, finance general corporate purposes of Fred Hutch and pay for the costs of issuing the Series 2017C, D, E Bonds and the Taxable Bonds Series 2022. The Series 2022D Bonds have a fixed interest rate of 3.34% while the Taxable Bonds Series 2022 have a fixed interest rate of 4.97%. The Series 2022C Bonds and Series 2022E Bonds have a variable interest rate.

In fiscal year 2021, Fred Hutch borrowed the proceeds of the Washington Health Care Facility Authority's \$37,605 Revenue Bonds, Series 2021 (the 2021 Bonds). The bonds are issued for the purpose of providing the funds necessary, together with certain other moneys, to (1) finance, refinance, or reimburse a portion of the costs of acquisition of Seattle Proton Holdings, construction, remodeling, renovating, and equipping of certain health care facilities owned and operated by the Center, (2) redeem all of the outstanding Wisconsin Public Finance Authority Revenue Bonds, Series 2018A (Seattle Proton Center, LLC) acquired in the Business combination, and (3) pay certain costs incurred in the issuance and sale of the 2021 Bonds. The 2021 Bonds have fixed interest rates ranging from 3.00% to 5.00%

In fiscal year 2021, Fred Hutch borrowed the proceeds of the Washington Health Care Facility Authority's \$232,925 Revenue Bonds, Series 2020 (the 2020 Bonds). The Bonds are issued for the purpose of providing the funds necessary to (1) finance, refinance, or reimburse a portion of the costs of acquisition, construction, remodeling, renovating and equipping certain health care facilities owned and operated by Fred Hutch (2) advance refund and defease all of the Washington Health Care Facilities Authority Revenue Bonds, Series 2010 (Seattle Cancer Care Alliance) previously owned, (3) fund capitalized interest and (4) pay certain costs incurred in the issuance costs of the 2020 bonds. The 2020 bonds have fixed interest rates ranging from 4.00% to 5.00%.

In fiscal year 2020, Fred Hutch issued taxable bonds (the 2020 Taxable Bonds) with a par amount of \$121,225 and a maturity date of January 1, 2050. The 2020 Taxable Bonds are in varying amounts with a fixed average coupon rate of 3.95%. The proceeds were used to defease the Washington Health Care Facilities Authority Revenue Bonds, Series 2011A (Fred Hutchinson Cancer Research Center). The 2020 Taxable Bonds were issued under a public bond placement.

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In fiscal year 2015, Fred Hutch borrowed the proceeds of the Washington Health Care Facility Authority's \$86,950 Revenue Bonds, Series 2014 (the 2014 Bonds). The 2014 Bonds are issued for the purpose of providing the funds necessary to advance refund and defease all the Washington Health Care Facility Authority, Revenue Bonds, Series 2008 (Seattle Cancer Care Alliance), and pay certain costs in connection with the issuance of the 2014 Bonds. The 2014 Bonds have fixed interest rates ranging from 4.00% to 5.00%.

As a result of the business combination with Seattle Proton Holdings and SCCA in February 2021, Fred Hutch assumed two notes payable. The remaining principal and accrued interest balances totaling \$5,529 and \$533 respectively, on June 30, 2022. The terms of the notes state the unsecured debt accrues interest at a rate of 5.0% per year. Future payments of principal and interest on these notes will be made only from excess cash generated by the proton facility as defined in the agreements, if certain financial ratios have been met, and the aggregate amount of all such payments, when combined with payments made on the intercompany note do not exceed \$1,100 for any fiscal year.

The following schedule shows future long-term-maturities by year:

2023	\$	3,959
2024		13,729
2025		14,238
2026		14,769
2027		15,315
Thereafter		<u>986,977</u>
		1,048,987
Plus unamortized net premiums		<u>51,229</u>
	\$	<u><u>1,100,216</u></u>

(10) Retirement Plan

Fred Hutch has a 403(b) defined contribution-plan for its salaried employees. Employees are generally eligible after one year of service. Fred Hutch contributes 7% of each employee's compensation up to the Social Security wage base limit and 12% on compensation above that limit. For certain management employees, Fred Hutch contributes 10% of compensation up to the Social Security wage base limit and 15% above the limit.

Retirement plan contributions for the year ended June 30, 2022, were \$22,021.

(11) Annuities

Fred Hutch administers gift annuities for which it makes periodic distributions to the annuitants. When contributed assets are initially received, the assets are recorded at fair value within the investments balance, and contribution revenue is recorded equal to the value of the contributed assets received less the annuity liability. The present value of distributions to annuitants totaled \$2,364 on June 30, 2022. The

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reserve fund requirement as determined by actuarial means was \$2,701 on June 30, 2022. The liability is revalued annually based upon actuarially computed present values and recorded in accrued liabilities. Present values are based on life expectancy and discount rates ranging between 4% and 10%. Fred Hutch maintains segregated funds that exceed the actuarial value of the annuity liability as required by law.

(12) Leases

As a part of the business combination (refer to Note 2), Fred Hutch assumed various operating and one finance lease for clinical, office, and equipment.

Payments due under the lease contracts include fixed payments plus market rate adjustments. The leases do not include any variable lease costs.

The components of the lease cost for the year ended June 30, 2022 were as follows:

Operating lease costs	\$	15,191
Finance lease costs		<u>290</u>
Total lease costs	\$	<u><u>15,481</u></u>

Weighted average remaining lease term and discount rates are as of June 30:

Weighted average remaining lease term in years:	
Operating lease	16.67
Finance lease	4.14
Weighted average discount rate:	
Operating lease	3.21 %
Finance lease	3.76 %

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Supplemental cash flow information and noncash activity related to leases are as follows on June 30:

	Balance Sheet Classification	2022
Assets:		
Operating Right-of-Use	Lease right-of-use assets	\$ 221,176
Finance Right-of-Use	Lease right-of-use assets	4,376
Total Leased Assets		<u>\$ 225,552</u>
Liabilities:		
Current		
Operating	Current portion of operating right-of-use lease liabilities	\$ 13,076
Finance	Current portion of operating right-of-use lease liabilities	1,010
Non-current		
Operating	Long-term right-of-use lease liabilities, net of current portion	223,091
Finance	Long-term right-of-use lease liabilities, net of current portion	3,366
Total Leased Liabilities		<u>\$ 240,543</u>

The cash paid for amounts included in lease costs was \$11,598 for operating leases and \$193 for financing leases during the year ended June 30, 2022.

Maturities of lease liabilities under noncancelable leases as of June 30, 2022, are as follows:

	Operating	Finance	Total
2023	\$ 20,121	1,158	21,279
2024	20,255	1,158	21,413
2025	19,618	1,158	20,776
2026	19,692	1,158	20,850
2027	20,138	95	20,233
Thereafter	213,093	—	213,093
Total undiscounted cash flows	312,917	4,727	317,644
Less: Imputed Interest	(76,750)	(351)	(77,101)
Present value of lease liabilities	<u>\$ 236,167</u>	<u>4,376</u>	<u>240,543</u>

Real estate obligations exclude legally binding minimum lease payments for leases signed but not yet commenced as of June 30, 2022, in amounts of \$2,529 for operating lease.

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(13) Contingencies

(a) Litigation and Compliance with Laws and Regulations

Fred Hutch is subject to litigation and regulatory investigations arising in the normal course of its business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effects on Fred Hutch's future financial position or results from operations.

The research industry is subject to numerous federal, state, and local laws and regulations. Some of these laws govern licensure, accreditation, and government program participation requirements.

Government agencies are actively conducting investigations concerning possible violations of these statutes and regulations by research facilities. Violations of these laws and regulations could result in expulsion from government programs, together with the imposition of significant fines and penalties. Management believes that Fred Hutch is in material compliance with all applicable laws and regulations. Compliance with laws and regulations is subject to future government review and interpretation of such laws and regulations as well as regulatory actions unknown or unasserted at this time.

The healthcare industry is subject to numerous laws and regulations of federal, state, and local governments. These laws and regulations include, but are not limited to, matters such as licensure, accreditation, governmental healthcare program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government agencies are actively conducting investigations concerning possible violations of fraud and abuse statutes and regulations by healthcare providers. Violations of these laws and regulations could result in expulsion from government healthcare programs, together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Through its compliance program, Fred Hutch maintains an effective and safe program for reporting and addressing potential regulatory concerns. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions known or unasserted at this time.

(b) Contingent Liability

Fred Hutch received federal grant funding for a portion of the construction of its South Lake Union Campus. Because Fred Hutch received federal grant funding for a portion of its campus, the government retains an interest in the net proceeds received if portions of the campus are sold. Fred Hutch has not recorded any liability related to this interest as it is contingent upon the sale of the facility, and management has determined the probability of this transaction occurring to be remote.

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(In thousands)

(c) *Impact from COVID-19*

The impacts from the COVID-19 pandemic continue to evolve and management continues to monitor and attempt to mitigate the impacts. COVID-19 has had a broad impact on commerce and financial markets around the world. Future impacts, whether positive or negative, will depend on certain developments, including the duration and spread of the outbreak and its impact on funding agencies, donors, employees and vendors, all of which cannot be determined. Accordingly, the extent to which COVID-19 may impact the consolidated financial position and changes in net assets and cash flows of Fred Hutch remains uncertain and the accompanying consolidated financial statements include no adjustments relating to any potential future effects of this pandemic beyond June 30, 2022

(14) **Functional Expenses**

Fred Hutch provides clinical healthcare and research services. The following tables present expenses by both their nature and function for the years ended June 30, 2022:

	Program services Clinical	Program services Research	Management and General	Fundraising	Grand Total
Salaries, wages and benefits	\$ 47,517	305,394	56,778	8,658	418,347
Subawards	—	209,908	(6)	—	209,902
Purchased services	50,815	72,953	19,239	3,332	146,339
Collaborative arrangement	—	11,661	—	—	11,661
Supplies	104,681	44,960	2,630	22	152,293
Rent, utilities and maintenance	9,696	20,051	14,265	7	44,019
Interest and depreciation	4,591	42,802	8,146	153	55,692
Other	2,786	17,352	16,855	2,258	39,251
Total operating expenses	\$ <u>220,086</u>	<u>725,081</u>	<u>117,907</u>	<u>14,430</u>	<u>1,077,504</u>

(15) **Professional Liability Insurance**

Fred Hutch has claims made-professional and general liability insurance for 2022. Fred Hutch has accrued an actuarial estimate of unreported instances and claims as of June 30, 2022, which is included in accounts payable and accrued liabilities.

(16) **Related Party-Transactions**

Fred Hutch purchases many services and products from its related parties. By leveraging the existing infrastructure of its related parties, Fred Hutch has financially benefited from avoiding duplication of overhead and services. Each year Fred Hutch negotiates services and costs with its related parties. Fred Hutch purchases various goods and services from its related parties for use in the operation of its 20-bed licensed hospital and its ambulatory cancer care services. Purchases include physician and other clinical and non-clinical labor, certain support functions such as information technology, facility and equipment rental, pharmaceutical and other medical supplies, data collection and analysis, and license rights to related party organizations' names.

FRED HUTCHINSON CANCER CENTER

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(In thousands)

Fred Hutch also sells various goods and services to its related parties including programmatic direction for cancer services, other clinical and non-clinical labor, and facility rental.

The following table summarizes, by related party, the impact of these transactions to the accompanying consolidated statements of activities and financial position.

	<u>Service and other income</u>	<u>Purchased services</u>	<u>Supplies</u>	<u>Other</u>	<u>Total</u>
UW	\$ 3,237	\$ 35,444	2,500	1,284	39,228

Amounts due from or due to related parties included in other current assets and other current liabilities for the various transactions described above are as follows on June 30:

	<u>Due from related parties</u>	<u>Due to related parties</u>
UW	\$ 4,098	16,907

(17) Service and Other Income

Service and other income includes income from noncore sources, including service agreements, commercialization (note 2), related party-transactions (note 16), professional services, core resources, rent, parking, and similar activities. Fred Hutch had \$48,340 of service and other income for the year ended June 30, 2022.

(18) Net Patient Service Revenue

Fred Hutch has agreements with third-party payors that provide payments to Fred Hutch at amounts different from its established rates. Patient services revenues were billed to the following payors for the year ended June 30, 2022:

Commercial	\$ 168,146
Medicare	91,283
Medicaid	8,111
Self-pay and other	2,389
Total patient services revenue	\$ 269,929

For the year ended June 30, 2022, revenue recognized from performance obligations related to prior periods (for example, due to changes in transaction price) was insignificant.

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(In thousands)

A summary of the payment arrangements with major third-party payors is as follows:

(a) Commercial

Fred Hutch negotiates contracts for reimbursement of care provided to patients with commercial third-party insurance payors.

For certain commercial payors, Fred Hutch has negotiated a single payment (case rate) for a defined period of care (case rate period) related to providing a bone marrow or stem cell transplant. All of Fred Hutch's case rate contracts specify a minimum and maximum payment calculation based on a review of actual gross charges provided during the case rate period. In addition to the case rate payments, the case rate contracts also specify negotiated fee-for-service rates for services performed outside of the case rate period. Case rate contracts extend to Fred Hutch related parties. Fred Hutch serves as the collection agent for the case rate payments. All case rate payments are remitted to Fred Hutch, which in turn remits payments to each respective related party for its proportionate share of services rendered. Any liability to related parties has been accrued in accounts payable and accrued expenses on June 30, 2022.

(b) Medicare

Medicare pays for inpatient hospital services under the prospective payment system (PPS) unless the provider is statutorily exempt from PPS (Exempt Hospital). PPS hospitals are paid a predetermined flat rate for inpatient care that is based on the patient's diagnosis at discharge while Exempt Hospitals are paid based on the "reasonable cost" of the services provided subject to an annual rate of increase limit. Exempt Hospitals receive an interim payment based on a percentage of charges submitted that is adjusted based on the filed cost report. Certain types of cancer hospitals are currently included among the Exempt Hospitals. Fred Hutch's inpatient facility is recognized by Medicare as an Exempt Hospital.

Medicare has historically paid for outpatient services on the basis of the cost of or a portion of the cost of providing the services. The Balanced Budget Act of 1997 required a phased in prospective payment system for outpatient services (OP PPS). The Center's for Medicare and Medicaid Services (CMS), an agency of the United States Department of Health and Human Services, issued regulations implementing OP PPS, which became effective as of August 1, 2000. Before the effective date of OP PPS, the Balanced Budget Refinement Act of 1999 established a "hold harmless" provision for cancer hospitals ensuring that they would be supplemented for certain covered services incurred under OP PPS. Under the hold harmless provision, if the amount of payment the cancer hospital would receive under OP PPS is less than what it would have received before OP PPS' implementation, the amount of payment due to the cancer hospital will be increased by the amount of such difference. As an Exempt Hospital, Fred Hutch qualifies for payment under the hold harmless provision.

The Budget Control Act of 2011 requires automatic spending reductions beginning April 1, 2013 to reduce the federal deficit, including Medicare spending reductions of up to 2% for a fiscal year, with a uniform percentage reduction across all Medicare programs. In 2013, the CMS notified Fred Hutch that Medicare fee-for-service claims with dates of service or dates of discharge on or after April 1, 2013 will incur a 2% reduction in Medicare payments.

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(In thousands)

Settlements with third-party payors for retroactive adjustments due to audits, review or investigations are considered variable consideration and are included in the determination of estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor and Fred Hutch's historic settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations. Adjustments from finalizations of prior-year cost reports and other third-party settlement estimates resulted in an increase of net patient service revenues of approximately \$1,697 in 2022.

(c) Medicaid

Fred Hutch is paid for services provided to Medicaid patients under the state's fee schedule, which is based on a modification of Medicare's prospective payment systems for inpatient and outpatient care. In 2009, the State of Washington enacted a safety net assessment program involving Washington State hospitals to increase funding from other sources and obtain additional federal funds to support increased payments to providers for Medicaid services.

(d) Self-Pay & Other Insurers

Self-pay patients are those who do not qualify for government program payments, such as Medicare and Medicaid, do not have some form of private insurance, and therefore are responsible for their own medical bills. Despite comprising a smaller percent of Fred Hutch's patient service revenues, the risk of collectability is higher with self-pay accounts. Any increases in uninsured individuals or changes to the payor mix could increase amounts due from individuals.

Other Insurers are patients whose funding stems from TRICARE and other insurers such as workers' compensation. TRICARE is the Department of Defense's health care program for members of the armed forces. For inpatient clinical services, TRICARE reimburses Fred Hutch based on a Diagnosis Related Group (DRG) system modeled on the Medicare inpatient PPS. For outpatient clinical services, TRICARE reimburses Fred Hutch based on a PPS that is similar to that utilized for services provided to Medicare beneficiaries.

FRED HUTCHINSON CANCER CENTER

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(In thousands)

(19) Concentration of Credit Risk

Fred Hutch grants credit without collateral to its patients, most of whom are insured under third-party payor agreements. Percentage of outstanding patient accounts receivable by third-party payor and patients are as follows as of June 30, 2022:

Patient accounts receivable:	
Commercial	51%
Medicare	35
Medicaid	11
Self-pay and other	3
Total	100%

(20) Accounting for Derivative Instruments and Hedging Activities

Accounting principles require that every derivative instrument (including certain derivative instruments embedded in other contracts) be recorded on the statement of financial position as either an asset or liability measured at its fair value. These principles require that changes in the derivative instrument's fair value be recognized currently.

(a) Interest Rate Swaps

Fred Hutch has entered into two interest rate swap agreements to mitigate the risks associated with variable rate bond issues. This agreement has been amended in December 2017. The duration of the swaps extended to 2042 to match up the duration of the existing underlying variable rate bonds. The first swap has a notional amount of \$56,577. The interest rate paid by Fred Hutch is fixed at 3.60% while the counterparty pays Fred Hutch 67% of an indexed rate. The second swap has a notional value of \$52,723. The interest rate paid by Fred Hutch is fixed at 3.53% while the counterparty pays Fred Hutch 89% of an indexed rate.

The fair value is the estimated amount the counterparties would receive or pay to terminate the swap agreements at the reporting date based on current interest rates and the current creditworthiness of the swap counterparties. The fair value of the swaps, recorded as deferred credits on cash flow hedges, was \$18,075 on June 30, 2022.

(b) Collateral Posted with Swap Counterparty

The swap agreements contain terms that require Fred Hutch to post collateral with the counterparty if certain conditions are met, including when the fair value amount to terminate the swaps exceeds \$40,000 as of June 30, 2022. No collateral amounts were required to be posted as of June 30, 2022.

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(In thousands)

(c) *Currency hedge activity*

Fred Hutch purchases forward contracts for South African Rand (ZAR) currency. This allows Fred Hutch to mitigate currency risk related to HCRISA research activities in South Africa. Outstanding forward contracts that obligate Fred Hutch to purchase ZAR on June 30, 2022 was R34,000 (\$2,171 USD).

(21) Subsequent Events

Fred Hutch has evaluated subsequent events through October 14, 2022, the date the consolidated financial statements were issued, and has determined there are no material subsequent events.



KPMG LLP
Suite 2800
401 Union Street
Seattle, WA 98101

**Independent Auditors' Report on Internal Control Over Financial Reporting and on
Compliance and Other Matters Based on an Audit of Financial Statements
Performed in Accordance With *Government Auditing Standards***

The Board of Trustees
Fred Hutchinson Cancer Center:

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the consolidated financial statements of Fred Hutchinson Cancer Center (Fred Hutch), which comprise Fred Hutch's consolidated statement of financial position as of June 30, 2022, and the related consolidated statements of activities, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated October 14, 2022.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered Fred Hutch's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of Fred Hutch's internal control. Accordingly, we do not express an opinion on the effectiveness of Fred Hutch's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Fred Hutch's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.



Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

KPMG LLP

Seattle, Washington
October 14, 2022



KPMG LLP
Suite 2800
401 Union Street
Seattle, WA 98101

**Independent Auditors' Report on Compliance for Each Major Federal Program;
Report on Internal Control Over Compliance; and Report on Schedule of Expenditures of
Federal Awards Required by the Uniform Guidance**

The Board of Trustees
Fred Hutchinson Cancer Center:

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Fred Hutchinson Cancer Center's (Fred Hutch's) compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* that could have a direct and material effect on each of Fred Hutch's major federal programs for the year ended June 30, 2022. Fred Hutch's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, Fred Hutch complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Fred Hutch and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Fred Hutch's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to Fred Hutch's federal programs.



Auditors' Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Fred Hutch's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Fred Hutch's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Fred Hutch's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of Fred Hutch's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Fred Hutch's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditors' Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.



Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the consolidated financial statements of Fred Hutch as of and for the year ended June 30, 2022, and have issued our report thereon dated October 14, 2022, which contained an unmodified opinion on those consolidated financial statements. Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

KPMG LLP

Seattle, Washington
October 19, 2022

FRED HUTCHINSON CANCER CENTER

Schedule of Expenditures of Federal Awards

Year ended June 30, 2022

Federal CFDA or Grant		Federal grant/Pass-through grantor/program title	Passed-through to subrecipients	Expenditures
	DIRECT RESEARCH AND DEVELOPMENT AWARDS			
	DEPARTMENT OF HEALTH AND HUMAN SERVICES / NATIONAL INSTITUTES OF HEALTH:			
93.103	U.S. FOOD AND DRUG ADMINISTRATION	FOOD AND DRUG ADMINISTRATION RESEARCH	\$ 35,337	293,309
93.113	NATL INST OF ENVIRONMENTAL HEALTH SCI	ENVIRONMENTAL HEALTH	—	864,751
93.121	NATL INST OF DENTAL CRANIO RESEARCH	ORAL DISEASES AND DISORDERS RESEARCH	241,149	786,463
93.172	NATL HUMAN GENOME RESEARCH INSTITUTE	HUMAN GENOME RESEARCH	—	511,153
93.173	NATL INST ON DEAFNESS AND COMM DISORDER	RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	78,217	1,220,992
93.242	NATL INST OF MENTAL HEALTH	MENTAL HEALTH RESEARCH GRANTS	43,560	297,944
93.273	NATIONAL INSTITUTE ON ALCOHOL ABUSE & AL	ALCOHOL RESEARCH PROGRAMS	—	767
93.279	NATIONAL INSTITUTE ON DRUG ABUSE	DRUG ABUSE AND ADDICTION RESEARCH PROGRAMS	80,003	1,436,699
93.307	NATIONAL INSTITUTE ON MINORITY HEALTH	MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	12,143	85,500
93.310	NATIONAL CANCER INSTITUTE	TRANS-NIH RESEARCH SUPPORT	—	522,682
93.351	OFFICE OF THE DIRECTOR, NIH	RESEARCH INFRASTRUCTURE PROGRAMS	—	205,975
93.353	NATIONAL CANCER INSTITUTE	21ST CENTURY CURES ACT – BEAU BIDEN CANCER MOONSHOT	1,811,346	7,172,433
93.361	NATIONAL INSTITUTE OF NURSING RESEARCH	NURSING RESEARCH	202,290	475,149
93.393	NATIONAL CANCER INSTITUTE	CANCER CAUSE AND PREVENTION RESEARCH	5,352,642	20,471,218
93.394	NATIONAL CANCER INSTITUTE	CANCER DETECTION AND DIAGNOSIS RESEARCH	3,729,027	11,907,913
93.395	NATIONAL CANCER INSTITUTE	CANCER TREATMENT RESEARCH	6,284,580	25,103,659
93.395	NATL HEART, LUNG AND BLOOD INSTITUTE	CANCER TREATMENT RESEARCH	—	74,053
93.396	NATIONAL CANCER INSTITUTE	CANCER BIOLOGY RESEARCH	433,647	8,899,129
93.396	NATL INSTITUTE ON AGING	CANCER BIOLOGY RESEARCH	67,671	383,174
93.397	NATIONAL CANCER INSTITUTE	CANCER CENTERS SUPPORT GRANTS	3,574,556	17,923,059
93.398	NATIONAL CANCER INSTITUTE	CANCER RESEARCH MANPOWER	57,814	2,687,090
93.399	NATIONAL CANCER INSTITUTE	CANCER CONTROL	159,690	1,110,695
93.837	NATL HEART, LUNG AND BLOOD INSTITUTE	CARDIOVASCULAR DISEASES RESEARCH	2,276,944	4,554,182
93.838	NATL HEART, LUNG AND BLOOD INSTITUTE	LUNG DISEASES RESEARCH	1,013,921	2,506,609
93.839	NATIONAL MARROW DONOR PROGRAM	BLOOD DISEASES AND RESOURCES RESEARCH	—	110,323
93.839	NATL HEART, LUNG AND BLOOD INSTITUTE	BLOOD DISEASES AND RESOURCES RESEARCH	2,371,298	7,069,079
93.839	NATL INST OF DIAB AND DIGST AND KONY DSE	BLOOD DISEASES AND RESOURCES RESEARCH	—	178,492
93.846	NATL INST OF ARTH AND MUSC SKIN AND DSE	ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	203,717	1,106,797
93.847	NATL INST OF DIAB AND DIGST AND KONY DSE	DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	367,816	4,317,594
93.853	NATL INST OF NEURO DISORDERS AND STROKE	EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	277,327	2,616,766
93.855	NATL INST OF ALLERGY AND INFECTIOUS DSE	ALLERGY AND INFECTIOUS DISEASES RESEARCH	165,568,819	346,011,241
93.859	NATL INST OF GENERAL MEDICAL SCIENCES	BIOMEDICAL RESEARCH AND RESEARCH TRAINING	218,517	11,815,761
93.865	NATL INST OF CHILD HEALTH & HUMAN DEV	CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	933,805	1,812,695
93.866	NATL INSTITUTE ON AGING	AGING RESEARCH	370,132	477,733
93.989	FOGARTY INTERNATIONAL CENTER	INTERNATIONAL RESEARCH AND RESEARCH TRAINING	—	228,049
93.U24	CENTERS FOR DISEASE CONTROL AND PRV	NOT APPLICABLE	—	118,965
93.U25	FOGARTY INTERNATIONAL CENTER	NOT APPLICABLE	—	60,269
93.U26	NATIONAL CANCER INSTITUTE	NOT APPLICABLE	111,111	12,990,487
93.U27	NATL HEART, LUNG AND BLOOD INSTITUTE	NOT APPLICABLE	1,123,791	10,089,601
93.U28	NATL INST OF ALLERGY AND INFECTIOUS DSE	NOT APPLICABLE	313,603	1,502,298
93.U29	NATL INST OF CHILD HEALTH & HUMAN DEV	NOT APPLICABLE	—	106,662
93.U30	NATL INST OF GENERAL MEDICAL SCIENCES	NOT APPLICABLE	—	213,732
93.U31	NATL INST ON DEAFNESS AND COMM DISORDER	NOT APPLICABLE	—	156,295
93.U32	OFFICE OF THE DIRECTOR, NIH	NOT APPLICABLE	—	1,284
10.310	NATIONAL INSTITUTE OF FOOD AND AGRICULTU	FOOD AND AGRICULTURE RESEARCH	40,316	252,392
12.420	DEPARTMENT OF DEFENSE – USA MEDICAL	MILITARY MEDICAL RESEARCH AND DEVELOPMENT	609,394	8,287,412
12.431	DEPARTMENT OF DEFENSE – ARMY COMMAND	BASIC SCIENTIFIC RESEARCH	—	938,252
12.U33	DEPARTMENT OF DEFENSE – USA MEDICAL	NOT APPLICABLE	—	55,433
47.049	NATIONAL SCIENCE FOUNDATION	MATHEMATICAL AND PHYSICAL SCIENCES	—	4,269
47.074	NATIONAL SCIENCE FOUNDATION	BIOLOGICAL SCIENCES	—	669,724
64.U34	US DEPARTMENT OF VETERANS AFFAIRS	NOT APPLICABLE	—	43,001
64.U35	VA PUGET SOUND HEALTH CARE SYSTEM	NOT APPLICABLE	—	123,894
	Grant total - Direct Research and Development Funds		\$ 197,964,183	520,853,098
10	NATIONAL INSTITUTE OF FOOD AND AGRICULTURE		\$ 40,316	252,392
12	DEPARTMENT OF DEFENSE		609,394	9,281,096
47	NATIONAL SCIENCE FOUNDATION		—	673,993
64	US DEPARTMENT OF VETERANS AFFAIRS		—	166,895
93	DEPARTMENT OF HEALTH AND HUMAN SERVICES / NATIONAL INSTITUTES OF HEALTH		197,314,473	510,478,722
			\$ 197,964,183	520,853,098

See accompanying notes to schedule of expenditures of federal awards.

FRED HUTCHINSON CANCER CENTER
Schedule of Expenditures of Federal Awards
Year ended June 30, 2022

Federal CFDA or Grant	Pass-through Funds – Department of Health and Human Services and Other Federal Agencies	Passed-through entity or award identifying number	Passed-through to subrecipients	Expenditures
93.837	ALBERT EINSTEIN COLLEGE OF MEDICINE: COMPREHENSIVE PEDIATRIC HYPERTENSION DAIGNOSIS AND MANAGEMENT	311257	\$ —	6,860
93.847	METABOLOMICS SIGNATURE UNDERLYING DIET, LIFESTYLE, AND GUT MICROBIOTA FOR DIABETES	311787	—	130,491
93.172	ALTIVUS INSTITUTE FOR BIOMEDICAL SCIENCE: ENCODE MAPPING CENTER – A COMPREHENSIVE CATALOG OF DNASE I HYPERSENSITIVE SITES	PF8996	—	75,865
93.421	AMERICAN PUBLIC HEALTH ASSOCIATION: AN EVALUATION OF THE POTENTIAL ECONOMIC RETURN FROM INVESTMENTS IN CANCER SURVIVORSHIP INTERVENTIONS IN THE UNITED STATES	NA	25,374	46,798
93.393	ARIZONA STATE UNIVERSITY: COUPLE COMMUNICATION IN CANCER: A MULTI-METHOD EXAMINATION	17-132	—	63,778
93.U33	BATELLE MEMORIAL INSTITUTE: WARP SPEED ASSAY DEVELOPMENT	US001-0000797414	—	126,650
93.U34	BATTELLE: ANALYSIS OF PERIPHERAL BLOOD MONONUCLEAR CELLS (PBMCs) GENERATED FROM BATTELLE STUDY B06068 TO ASSESS THE IMMUNE CORRELATES OF PROTECTION (COP) FOR NON-HUMAN PRIMATES (NHPS) VACCINATED AND THEN CHALLENGED WITH SARS-COV-2	US001-0000836737	—	102,023
93.394	BAYLOR COLLEGE OF MEDICINE: BIOMARKERS FOR EARLY DETECTION OF COLORECTAL CANCER IN ULCERATIVE COLITIS	7000000904	—	57,427
12.420	IDENTIFYING NOVEL CANCER PREDISPOSITION SYNDROME: AN INTEGRATIVE EPIDEMIOLOGIC AND GENOMIC APPROACH	7000001301	—	27,138
93.394	BECKMAN RESEARCH INSTITUTE -CITY OF HOPE: ALTERING INTAKE AND MANAGING SYMPTOMS IN RECTAL CANCER SURVIVORS: A MULTIMODAL DIET MODIFICATION INTERVENTION FOR BOWEL DYSFUNCTION	60723.2006384.669302	—	9,207
93.395	CMVPEPVAX TO PROTECT HCT RECIPIENTS FROM CYTOMEGALOVIRUS INFECTION	51443.2000555.669302	—	24
93.859	CYCLOPHOSPHAMIDE PHARMACOKINETICS AND PHARMACOMETABOLOMICS	60584.2005439.669302	—	30,297
93.396	PD-L1 INTERACTS WITH CD80 AND PD-1 TO REGULATE GVHD AND GVL ACTIVITY	60374.2004933.669301	—	7,473
93.855	BENAROYA RESEARCH INSTITUTE: IMMUNE TOLERANCE NETWORK	FY22ITN235	—	78,101
93.855	IMMUNE TOLERANCE NETWORK	ITN235	—	220,738
93.396	BETH ISRAEL DEACONESS MEDICAL CENTER: PROJECT 1: DETERMINING AND EXPLOITING MECHANISMS OF AR-MEDIATED SUPPRESSION OF CELL PROLIFERATION AND SURVIVAL	01063089	—	165,694
93.396	PROJECT 1: DETERMINING AND EXPLOITING MECHANISMS OF AR-MEDIATED SUPPRESSION OF CELL PROLIFERATION AND SURVIVAL	AWOA	—	226,422
93.839	BOSTON CHILDREN'S HOSPITAL: FA PPG PROJECT 3: PRECLINICAL STUDIES OF MARROW FAILURE AND CLONAL EVOLUTION IN FANCONI ANEMIA	GENFD0001899933	—	(1)
93.395	GENETIC TESTING TO GUIDE PEDIATRIC CANCER CARE AND FOLLOW UP: USING ANTHRACYCLINE-ASSOCIATED CARDIAC TOXICITY AS A MODEL FOR THE FUTURE	GENFD0002071730	—	94,725
93.837	BOSTON UNIVERSITY: MITOCHONDRIAL DNA, NUCLEAR DNA METHYLATION, AND CARDIOMETABOLIC DISEASE TRAITS	4500004053	—	40,960
93.393	BRIGHAM & WOMEN'S HOSPITAL: HELICOBACTER INFECTION AND LIVER CANCER RISK AMONG AFRICAN AMERICANS AND WHITES IN THE UNITED STATES	125785	—	30,869
93.121	LONG TERM ORAL HEALTH OUTCOMES IN THE CHRONIC GVHD CONSORTIUM	121660	—	177,933
93.394	BROAD INSTITUTE: ASSAY VALIDATION OF CELL-FREE DNA SHALLOW WHOLE GENOME SEQUENCING TO DETERMINE TUMOR FRACTION IN ADVANCED CANCERS	5000516-5500001458	—	552
93.394	ASSAY VALIDATION OF CELL-FREE DNA SHALLOW WHOLE GENOME SEQUENCING TO DETERMINE TUMOR FRACTION IN ADVANCED CANCERS	5000517-5500001458	—	3,808
93.847	BROWN UNIVERSITY: ASPROSIN, BODY WEIGHT, AND RISK OF TYPE 2 DIABETES IN U.S. MEN AND WOMEN	00001626	—	75,007
93.393	CASE WESTERN RESERVE UNIVERSITY: BIOMARKERS FOR REDUCING MORTALITY OF CANCERS OF THE COLON AND ESOPHAGUS	RES515198	—	149,945
93.397	GENETIC DETERMINANTS OF BARRETT'S ESOPHAGUS AND ESOPHAGEAL ADENOCARCINOMA	RES516224	—	21,685
93.397	GENETIC DETERMINANTS OF BARRETT'S ESOPHAGUS AND ESOPHAGEAL ADENOCARCINOMA	RES516235	—	22,993
93.855	RESISTANCE TO MTB INFECTION IN HIV INFECTED INDIVIDUALS IN UGANDAN AND S. AFRICA	RES510938	—	(424)
93.394	CEDARS-SINAI MEDICAL CENTER: MULTIPLYED PROTEIN BIOMARKER ASSAY FOR THE DETECTION OF BLADDER CANCER	0001594778	—	2,641
93.394	MULTIPLYED PROTEIN BIOMARKER-BASED ASSAY FOR THE DETECTION OF BLADDER CANCER	1932125	—	97,641
93.838	CINCINNATI CHILDRENS HOSPITAL MEDICAL CR: TRANSPIRE: A PROSPECTIVE COHORT STUDY OF LUNG INJURY AFTER HEMATOPOIETIC STEM CELL TRANSPLANT IN CHILDREN	315648	—	13,648
93.393	COLUMBIA UNIVERSITY MEDICAL CENTER: COMPARATIVE MODELING FOR THE PREVENTION AND CONTROL OF UTERINE CANCER	2(GG017711-01)	—	7,528
93.394	EARLY DETECTION OF OVARIAN CANCER THROUGH EPIGENETIC FACTORS IN THE WHI	1(GG008466)	—	24,361
93.855	IMMUNE RESPONSE AND TOLERANCE TO LIVER TRANSPLANTS IN NHP	1 GG016841-02	—	6,662
93.393	MULTICENTER TRIAL OF DECISION SUPPORT FOR BREAST CANCER CHEMOPREVENTION	2(GG015020-01)	—	18,773
93.855	REGULATORY T CELLS TO PROMOTE MIXED CHIMERISM FOR TOLERANCE TO ISLETS AND KIDNEYS FROM DECEASED AND LIVING DONORS	1(GG011631-28)	—	106,211
93.855	REGULATORY T CELLS TO PROMOTE MIXED CHIMERISM FOR TOLERANCE TO ISLETS AND KIDNEYS FROM DECEASED AND LIVING DONORS	1(GG011631-22)	—	73,381
93.866	CORNELL UNIVERSITY: A COMMUNICATION-BASED INTERVENTION FOR EARLY STAGE DEMENTIA PATIENT-CAREGIVER DYADS TO INCREASE ENGAGEMENT IN ADVANCE CARE			
	PLANNING AND REDUCE CAREGIVER BURDEN	211724-1	—	43,818
93.837	ADAPTABLE TISSUE-SPECIFIC ENDOTHELIAL CELLS FOR ORGAN REGENERATION	212180	—	14,771
93.837	ADAPTABLE TISSUE-SPECIFIC ENDOTHELIAL CELLS FOR ORGAN REGENERATION	221978	—	5,249
93.855	ENDOTHELIAL CELL TRANSPLANTATION FOR MULTI-ORGAN REPAIR TO COUNTER RADIATION INJURY	202313-1	—	(8,579)
93.855	ENDOTHELIAL CELL TRANSPLANTATION FOR MULTI-ORGAN REPAIR TO COUNTER RADIATION INJURY	212181	—	32,729
93.855	ENDOTHELIAL CELL TRANSPLANTATION FOR MULTI-ORGAN REPAIR TO COUNTER RADIATION INJURY	221979-1	—	4,199

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93.855	REACH: RESEARCH ENTERPRISE TO ADVANCE A CURE FOR HIV	211594	\$ —	195,244
93.855	REACH: RESEARCH ENTERPRISE TO ADVANCE A CURE FOR HIV	222658	—	57,723
93.855	SCREENING FOR RESISTANT ENTERIC BACTERIA TO PERSONALIZE INFECTION PREVENTION STRATEGIES IN NEUTROPENIC PATIENTS	213450	—	115,407
	COUNCIL STATE TERRITORIAL EPIDEMIOLOGIST:			
93.421	MATHEMATICAL MODELING OF THE IMPACT OF INTEGRATED PREVENTION STRATEGIES AGAINST COVID-19 IN WASHINGTON AND OREGON	7719	—	109,480
93.421	MATHEMATICAL MODELING OF THE IMPACT OF INTEGRATED PREVENTION STRATEGIES AGAINST COVID-19	PO7459	66,024	293,448
	DANA-FARBER CANCER INSTITUTE:			
93.172	BIOCONDUCTOR: AN OPEN-SOURCE, OPEN-DEVELOPMENT COMPUTING RESOURCE FOR GENOMICS	1318217	—	196,414
93.172	BIOCONDUCTOR: AN OPEN-SOURCE, OPEN-DEVELOPMENT COMPUTING RESOURCE FOR GENOMICS	1318218	—	111,248
93.394	BIOMARKER SCREENING ALGORITHMS FOR IMPROVED EARLY DETECTION OF HEPATOCELLULAR CARCINOMA	1308603	—	15,480
93.394	BIOMARKER SCREENING ALGORITHMS FOR THE IMPROVED EARLY DETECTION OF HEPATOCELLULAR CARCINOMA	1308604	—	4,499
	DEUTSCHES KREBSFORSCHUNGSZENTRUM:			
12.420	PREDICT: THE PROSPECTIVE EARLY DETECTION CONSORTIUM FOR OVARIAN CANCER	C020-ID4316-SUB.1	—	6,780
	DUKE UNIVERSITY:			
93.397	DUKE CANCER HEALTH DISPARITIES P20 SPORE	A033900	—	67,990
93.855	FUNCTION PROFILE TO HIV VACCINE ELICITED ANTIBODIES IN INFANTS	A031186	—	3,221
93.855	NEUTRALIZING AND NON-NEUTRALIZING ANTIBODY EFFECTOR FUNCTIONS IN HIV INFECTED CHILDREN	A031494	—	256,269
93.855	NEUTRALIZING AND NON-NEUTRALIZING EFFECTOR FUNCTION IN HIV INFECTED CHILDREN	A031493	—	40,189
	ECOG-ACRIN CANCER RESEARCH GROUP:			
93.395	PURCHASE SERVICE AGREEMENT BETWEEN ECOG-ACRIN AND FRED HUTCHINSON	ECOG-ACRIN MASTER PS	—	8,871
	EMORY UNIVERSITY:			
93.855	COVID 19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – MODERNA BOOST SUB-STUDY ASSAY 20-0003	A535101	—	116,043
93.855	COVID 19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – MODERNA VARIANT OVERSIGHT	A557882	—	68,877
93.855	COVID-19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – MIX & MATCH ASSAYS	A614153	—	706,054
93.855	COVID-19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – MOMI-VAX STUDY	A611924	—	101,052
93.855	COVID19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) COVAIL	A613388	—	20,881
93.855	COVID-19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) S3 GRITSTONE, VARIANT AND PEDIATRIC VACCINE			
	TRIALS DMID PROTOCOL #21-0002-LOURIC VACCINE TRAILS	A639553	—	108,799
93.855	COVID-19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) S3 GRITSTONE, VARIANT AND PEDIATRIC VACCINE			
	TRIALS DMID PROTOCOL #21-0002	A549802	—	39,407
93.855	COVID-19 – IMMUNOLOGICAL MEMORY TO COVID-19	A514517	—	780,913
93.855	COVID-19 – LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – MIX AND MATCH OVERSIGHT	A614770	—	115,019
93.855	DESIGN AND ANALYSIS OF VACCINE TRIALS FOR EMERGING INFECTIOUS DISEASE THREATS	A538222	—	69,877
93.855	DYNAMICS AND EVOLUTION OF IMMUNE RESPONSES TO INFLUENZA VIRUSES	A371745	—	(9,116)
93.855	DYNAMICS AND EVOLUTION OF IMMUNE RESPONSES TO INFLUENZA VIRUSES	A480515	—	105,025
93.855	DYNAMICS AND EVOLUTION OF IMMUNE RESPONSES TO INFLUENZA VIRUSES	A653114	—	11,374
93.855	IDCRC NON-COVID PROTOCOLS	A639490	—	146,877
93.855	INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM LEADERSHIP GROUP: MIX AND MATCH – COVID-19	A614768	—	2,023,663
93.855	LEADERSHIP GROUP FOR AN INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG)	A413841	—	58,364
93.855	LEADERSHIP GROUP FOR AN INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) -IDCRC ECP 2020-0001	A550565	—	97,752
93.855	LEADERSHIP GROUP FOR AN INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – CORE	A414257	—	39,582
93.855	LEADERSHIP GROUP FOR AN INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – CORE	A605961	—	162,434
93.855	LEADERSHIP GROUP FOR THE IDCRCLG – LG PROTOCOL ECP 0001: MENING MALI OVERSIGHT – COVID-19	A550594	—	8,786
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG)	A603407	—	92,675
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG)	A639509	—	368,227
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – COVID 19 – SUPPLEMENT	A494835	—	32,329
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – GRITSTONE ASSAY	A549923	—	160,472
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – GRITSTONE OVERSIGHT	A549810	—	91,433
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) – PROTOCOL TBD 1	A414212	—	(2,351)
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) COVID 19 SUPPLEMENT	A390444	—	150,990
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) COVID 19 SUPPLEMENT	AWOA	—	(107,553)
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) MOMI-VAX	A611876	—	1,392,226
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) RESTRICTED SUPPLEMENT	A660510	—	31,160
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) S3 GRITSTONE, VARIANT AND PEDIATRIC VACCINE			
	TRIALS – COVID-19	A639529	—	158,562
93.855	LEADERSHIP GROUP FOR THE INFECTIOUS DISEASES CLINICAL RESEARCH CONSORTIUM (IDCRCLG) S3 GRITSTONE, VARIANT AND PEDIATRIC VACCINE			
	TRIALSDMID PROTOCOL #20-0034	A621244	—	20,990
93.855	PROTOCOL ECP 2020-0066 (MIX & MATCH)	A414197	—	(274,707)
93.855	QUANTIFYING THE EPIDEMIOLOGICAL IMPACT OF TARGETED INDOOR RESIDUAL SPRAYING ON AEDES-BORNE DISEASES	A461065	—	30,571
93.855	QUANTIFYING THE EPIDEMIOLOGICAL IMPACT OF TARGETED INDOOR RESIDUAL SPRAYING ON AEDES-BORNE DISEASES	A661118	—	3,375
93.855	ROLE OF TYPE-1 IFN IN REGULATING COVID-19 INDUCED INFLAMMATION AND PATHOGENESIS	A450053	—	17,434
	EPICYEPHER:			
93.172	DEVELOPMENT OF EFFICIENT QUANTITATIVE CHROMATIN PROFILING IN KIT AND HIGH-THROUGHPUT FORMATS	NA	—	12,399
93.172	DEVELOPMENT OF EFFICIENT QUANTITATIVE CHROMATIN PROFILING IN KIT AND HIGH-THROUGHPUT FORMATS	R44HG010640-FHCRC	—	102,054
93.121	DEVELOPMENT OF NOVEL SPIKE-IN CONTROLS FOR QUANTITATIVE CHROMATIN ASSOCIATED PROTEIN PROFILING	NA	—	252,179
93.121	DEVELOPMENT OF NOVEL SPIKE-IN CONTROLS FOR QUANTITATIVE CHROMATIN-ASSOCIATED PROTEIN PROFILING	NA	—	23,239

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93.855	DEVELOPMENT OF ULTRA-EFFICIENT ANTIBODIES FOR SINGLE CELL MAPPING APPLICATIONS	NA	\$ —	60,947
93.859	SINGLE-CELL CHROMATIN MAPPING ASSAYS	GM140536-FHCC	—	11,890
93.859	SINGLE-CELL CHROMATIN MAPPING ASSAYS	NA	—	54,020
	GEORGETOWN UNIVERSITY:			
93.353	A RANDOMIZED TRIAL OF A MOBILE HEALTH AND SOCIAL MEDIA PHYSICAL ACTIVITY INTERVENTION AMONG ADOLESCENT AND YOUNG ADULT CHILDHOOD CANCER SURVIVORS	424984_GR424785-FHCRC	—	72,295
	HEALTH RESEARCH, INC. ROSWELL PARK DIVIS:			
93.213	FLAXSEED EFFECTS ON GUT MICROBIAL METABOLISM AND CIRCULATING INFLAMMATION-RELATED METABOLIC PROFILES IN AFRICAN AMERICAN AND NON-HISPANIC WHITE WOMEN	315-01	—	183,330
93.847	GENETIC SUSCEPTIBILITY TO BARRETT'S ESOPHAGUS: FROM GWAS TO BIOLOGY	468-01	—	10,523
	HENRY M. JACKSON FOUNDATION:			
12.U01	T CELL ICS FOR SARS-COV-2 VACCINE TRIALS – COVID 19	5720	—	21,042
	ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI:			
93.855	ASSESSING SPLIT-POOL BARCODING-BASED SEQUENCING ANALYSIS (SPLIT-SEG) OF CELLULAR PROTEIN AND TCR SEQUENCE FOR HIGH-THROUGHPUT SINGLE-CELL PROFILING OF VACCINE-SPECIFIC T CELL RESPONSES	0255-C160-4609	—	(26,981)
93.394	SYSTEMS BIOLOGY BASED PROTEOGENOMIC TRANSLATOR FOR CANCER MARKER DISCOVERY TOWARDS PRECISION MEDICINE	0255-2236-4609	—	2,935
	ICF ESAC, LLC:			
93.U02	ESAC DATA COORDINATING CENTER FOR CLINICAL PROTEOMIC TECHNOLOGIES FOR CANCER PROGRAM	LBR-PDC2-05	—	12,773
93.U03	ESAC DATA COORDINATING CENTER FOR CLINICAL PROTEOMIC TECHNOLOGIES FOR CANCER PROGRAM	NCI-CPTAC3-02-OY4	—	8,103
	INSTITUTE FOR SYSTEMS BIOLOGY:			
93.394	LIQUID BIOPSY-BASED TOOLKITS FOR NEOANTIGEN AND COGNATE TCR DISCOVERY FOR CANCER IMMUNOTHERAPY	2021.0015	—	2,045
93.394	NANO AND BIOMOLECULAR ENGINEERED TECHNOLOGIES FOR NEOANTIGEN-SPECIFIC T CELL CAPTURE AND CHARACTERIZATION	2021.0007	—	29,640
	INTERNATIONAL AGENCY FOR RESEARCH ON CAN:			
93.393	INTEGRATIVE ANALYSIS OF LUNG CANCER ETIOLOGY AND RISK – BIOMARKERS OF LUNG CANCER RISK (LC3-II)	CRA/GEP/2020/1	—	61,293
	JOHNS HOPKINS UNIVERSITY:			
93.855	THE JOHNS HOPKINS CENTER FOR AIDS RESEARCH (JHU CFAR)	2005041418	—	6,178
	KAISER FOUNDATION RESEARCH INSTITUTE:			
93.393	AN ELECTRONIC HEALTH RECORD-BASED TOOL TO IDENTIFY NEWLY DIAGNOSED BREAST CANCER PATIENTS AT RISK OF LOW SOCIAL SUPPORT	210853-FHCRC-03	—	28,015
93.393	BREAST WHITE ADIPOSE TISSUE INFLAMMATION AND BREAST CANCER OUTCOMES	RNG210667-FHCRC	—	107,242
93.393	CLINICAL CARE GAPS AND UNMET NEEDS IN ADOLESCENT AND YOUNG ADULT (AYA) CANCERS	RNG211062-FHCRC-01	—	19,168
93.855	KAISER WASHINGTON VACCINE AND TREATMENT EVALUATION UNIT	RNG210453-FH	—	13,042
93.855	KAISER WASHINGTON VACCINE AND TREATMENT EVALUATION UNIT	RNG210453-FHCRC	—	9,110
93.393	MULTILEVEL INTERVENTIONS TO INCREASE ADHERENCE TO LUNG CANCER SCREENING	RNG211471-FHCRC	—	20,379
93.393	PREDICTORS OF CVD AMONG BREAST CANCER SURVIVORS IN AN INTEGRATED HEALTH SYSTEM	RNG209338-FHCRC-01	—	132,275
93.213	USING AN IMPLEMENTATION SCIENCE FRAMEWORK TO ENHANCE PARTICIPATION IN MINDFULNESS	RNG209933-BUDG01-FHCRC-00	—	2,317
	KENT HOSPITAL:			
93.837	WHISH-2-PREVENT HEART FAILURE STUDY	5001381-TINKER	—	69,725
	LA JOLLA INSTITUTE FOR IMMUNOLOGY:			
93.855	FUNCTIONAL AND DYSFUNCTIONAL HUMAN CD4 T CELL AND B CELL RESPONSES TO BACTERIA AND VIRUSES	27440-02-107-382	—	1,442,770
93.855	FUNCTIONAL AND DYSFUNCTIONAL HUMAN CD4 T CELL AND B CELL RESPONSES TO BACTERIA AND VIRUSES	27440-03-107-382	—	385,115
	LEIDOS BIOMEDICAL RESEARCH, INC:			
93.U04	CENTRALIZED DIAGNOSTIC AND MONITORING TESTING FOR ACUTE MYELOID LEUKEMIA	20X088F, TASK ORDER F1	21,503	196,893
93.U05	GENEXUS ASSAY DEVELOPMENT FOR MDNET MYELOMATCH PRECISION MEDICINE INITIATIVE	20X088F, TASK ORDER F2	—	414,841
93.U06	MECHANISTIC STUDIES OF RCAS/TV-A DRIVEN BRAIN TUMORS	21X162-Q2	—	38,268
93.U07	MECHANISTIC STUDIES OF RCAS/TV-A DRIVEN BRAIN TUMORS	21X162-Q3	—	71,846
93.U08	MOUSE BRAIN CANCER MODELS FROM MOLECULAR ENGINEERING TO SUPPORT THE DIVISION OF CANCER TREATMENT AND DIAGNOSIS – TASK ORDER 1	21X162_TO-Q1	—	12,142
93.U09	PROTEO-GENOMIC DIAGNOSTIC ASSAYS TO ESTABLISH MORE ACCURATE PREDICTORS OF THERAPEUTIC RESPONSES FOR CANCER PATIENTS	17Q014	—	1,539,187
	MAGEE-WOMEN'S RESEARCH INSTITUTE & FOUND:			
93.855	DO NOT USE SDMC: MICROBICIDE TRIALS NETWORK MANAGEMENT AND SUPPORT (MTN)	9754	—	1,794,897
93.855	LABORATORY CENTER (LC): MICROBICIDE TRIALS NETWORK	9735	—	177,068
	MASSACHUSETTS GENERAL HOSPITAL:			
93.855	IMMUNE CORRELATES OF TUBERCULOSIS AND NON-TUBERCULOSIS INFECTIOUS MORBIDITY IN SOUTHERN AFRICAN HIV-EXPOSED, UNINFECTED INFANTS	234124	—	14,109
93.395	RANDOMIZED TRIAL INPATIENT PALLIATIVE CARE FOR PATIENTS WITH HEMATOLOGIC MALIGNANCIES UNDERGOING HEMATOPOIETIC STEM CELL TRANSPLANTATION	233094	—	155,019
93.394	TDNA IN UTERINE LAVAGE AND SERUM PROTEINS IN EARLY DETECTION OF OVARIAN CANCER	231339	—	25,098
93.837	TOPMED OMICS OF CARDIOVASCULAR DISEASE IN D1ABETES	236957	—	26,176
93.847	TOPMED OMICS OF TYPE 2 DIABETES AND QUANTITATIVE TRAITS	238171	—	24,572
	MAYO CLINIC:			
93.393	RELATING MOLECULAR SUBGROUPS OF ENDOMETRIOSIS-ASSOCIATED OVARIAN CANCERS TO SURVIVAL AND RISK	FRE-277978	—	16,708
93.393	RELATING MOLECULAR SUBGROUPS OF ENDOMETRIOSIS-ASSOCIATED OVARIAN CANCERS TO SURVIVAL AND RISK	FRE-277978-01	—	16,915
	McGILL UNIVERSITY:			
93.855	QUANTIFYING THE BREADTH AND DURATION OF IMMUNITY INDUCED BY MENINGOCOCCAL B VACCINES	PT 86060	—	37,517
	MEDICAL UNIVERSITY OF SOUTH CAROLINA:			
93.395	TRANSLATING NOVEL DRUG-TARGETABLE BIOMARKERS TO TREAT GRAFT VERSUS HOST DISEASE	A21-0049-S002	—	28,379
	MISSION BIO:			
93.396	MEASURABLE RESIDUAL DISEASE TESTING FOR ACUTE MYELOID LEUKEMIA WITH SINGLE-CELL GENOTYPING	7135NIH PHASE 1	—	260,442

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93.855	MONTANA STATE UNIVERSITY: CYTOTOXIC IMMUNOCONJUGATES TO DEplete PERSISTENT HIV RESERVOIRS	G173-18-W7010	\$ —	207,448
93.310	PROTECTING OUR COMMUNITY: A PRAGMATIC RANDOMIZED TRIAL OF HOME-BASED COVID TESTING WITH AMERICAN INDIAN AND LATINO COMMUNITIES	G273-21-W8902	—	168,817
93.395	NORTHWESTERN UNIVERSITY: A RETROSPECTIVE MONTE CARLO DOSIMETRY FOR LATE EFFECTS IN WILMS TUMOR PATIENTS	60047359 FHCRC	—	415,837
93.395	NRG ONCOLOGY: NRG ONCOLOGY FIXED PRICE SUBAWARD AGREEMENT	NA	—	14,056
93.855	OREGON HEALTH & SCIENCE UNIVERSITY: DEVELOPMENT OF AN MRNA-BASED THERAPEUTIC HIV/AIDS VACCINE	1016695_FHCRC	—	17,365
93.855	DEVELOPMENT OF IMMUNOGENICITY AND EFFICACY OPTIMIZED CMV VECTORS FOR AN HIV/AIDS VACCINE	1009173_FHCRC	—	24,953
93.395	EFFECT OF IMMUNE-ENHANCING NUTRITION ON RADICAL CYSTECTOMY OUTCOMES	1010653_FHCRC	—	23,197
93.399	SWOG NCORP RESEARCH BASE	1014562_FHCRC_LYMAN	—	28,452
93.399	SWOG NCORP RESEARCH BASE	1014562_FHCRC_NEUHOUSER	—	31,592
93.399	SWOG NCORP RESEARCH BASE	1014562_SWOG_FREDHUTCH	—	35,312
93.399	SWOG NCORP RESEARCH BASE – CDDR COMMITTEE	1014562_FHCRC-RAMSEY	—	3,570
93.399	SWOG NCORP RESEARCH BASE – EXECUTIVE COMMITTEE	1014562_FHCRC_LYMAN	—	3,618
93.399	SWOG NCORP RESEARCH BASE (CCDR)	1014562_FHCRC_UNGER	196,804	759,983
93.399	SWOG NCORP RESEARCH BASE (CTP)	1014562_FHCRC_TANGEN	1,348,485	2,281,197
93.399	SWOG NCORP RESEARCH BASE – CDDR COMMITTEE	1014562_FHCRC_RAMSEY	—	34,936
93.399	SWOG NCORP RESEARCH BASE: PROTOCOL DEVELOPMENT	1014562_FHCRC_RAMSEY_A4	—	81,716
93.395	SWOG NETWORK GROUP OPERATIONS CENTER OF THE NCTN	1013080_FHCRC_LYMAN	—	26,965
93.395	SWOG NETWORK GROUP OPERATIONS CENTER OF THE NCTN: BIQSFP STUDY S1929	1013080-014_FHCRC	—	18,604
93.395	SWOG OHSU PURCHASE SERVICE AGREEMENT	SWOG MASTER PSA	—	1,203
93.393	PEACEFULLY, INC.: A COMPREHENSIVE WEB BASED PROGRAM TO HELP ADVANCED CANCER PATIENTS PLAN FOR END OF LIFE	NA	—	23,501
93.393	PENNSYLVANIA STATE UNIVERSITY: HPV ECHO: INCREASING THE ADOPTION OF EVIDENCE-BASED COMMUNICATION STRATEGIES FOR HPV VACCINATION IN RURAL PRIMARY CARE PRACTICES	FHCRC253279	—	29,962
93.395	PUBLIC HEALTH INSTITUTE: BIQSFP AAML 1831 FLT3/ITD_INTEGRAL	AR03767	—	60,045
93.395	COG NCTN NGOC COMMITTEE LEADERSHIP, AML COMMITTEE VICE CHAIR	AR03231	—	12,534
93.395	COG NCTN NGOC SCIENTIFIC COUNCIL	AR03202	—	8,809
93.395	COG NCTN NETWORK GROUP OPERATIONS CENTER	AR03282	—	34,615
93.395	COG NCTN NETWORK GROUP OPERATIONS CENTER	AR10904	—	3,068
93.395	COG SCIENTIFIC COUNCIL	AR03201	—	14,005
93.394	RESEARCH INST @ NATIONWIDE CHILDRENS HOS: SWOG BIOSPECIMEN BANK	700225-0322-00	—	51,348
93.172	RUTGERS, THE STATE UNIVERSITY: PAGE III: POPULATION ARCHITECTURE USING GENOMICS AND EPIDEMIOLOGY	1201_PO1277733	—	339,492
93.350	SEATTLE CHILDREN'S HOSPITAL: ACCELERATE CELLULAR IMMUNOTHERAPY DEVELOPMENT FOR TREATMENT OF LIFE-THREATENING CHILDHOOD DISORDERS	12497SUB	—	10,672
93.350	ACCELERATE CELLULAR IMMUNOTHERAPY DEVELOPMENT FOR TREATMENT OF LIFE-THREATENING CHILDHOOD DISORDERS	12666SUB	—	86,645
93.U10	CASCADE IMPAC-TB	12230SUB	—	15,396
93.855	COLLECTIVE RESPONSES TO MALARIA VACCINATION	AWOA	—	23,507
93.855	DEVELOPMENT OF THE HIPC DATABASE AND RESEARCH PORTAL	12335SUB	—	11,965
93.855	DEVELOPMENT OF THE HIPC DATABASE AND RESEARCH PORTAL	12690SUB	—	720,692
93.395	ENGINEERING KNOTTED PEPTIDE THERAPEUTICS FOR PEDIATRIC BRAIN TUMOR PATIENTS	12795SUB	—	28,020
93.847	FIT 5 KIDS SCREEN TIME REDUCTION CURRICULUM FOR LATINO PRESCHOOLERS: A RCT	11792SUB	—	89,078
93.395	HIV INTEGRATION MODULATES IMMUNE REGULATION IN CANCER	11538SUB	—	69,754
93.U11	IMMUNE MECHANISMS OF PROTECTION AGAINST MYCOBACTERIUM TUBERCULOSIS CENTER (IMPAC-TB)	12388SUB	—	88,668
93.U12	IMMUNE MECHANISMS OF PROTECTION AGAINST MYCOBACTERIUM TUBERCULOSIS CENTER (IMPAC-TB)	12701SUB	—	149,504
93.855	IMMUNE RESPONSE TO MALARIA AND HIV INFECTION AND IMMUNIZATION – PROJECT 2	12340SUB	—	7,995
93.855	IMMUNE RESPONSE TO MALARIA AND HIV INFECTION AND IMMUNIZATION – PROJECT 2 – YEAR 5	12687SUB	—	525,539
93.855	IMMUNE RESPONSES TO MALARIA AND HIV INFECTION AND IMMUNIZATION – CLINICAL CORE	12688SUB	—	163,140
93.855	IMMUNE RESPONSES TO MALARIA AND HIV INFECTION AND IMMUNIZATION: DATA MANAGEMENT AND ANALYSIS CORE	12333SUB	—	(10,046)
93.855	IMMUNE RESPONSES TO MALARIA AND HIV INFECTION AND IMMUNIZATION: DATA MANAGEMENT AND ANALYSIS CORE	12689SUB	—	422,666
93.855	IMPACT OF CUMULATIVE EXPOSURE TO RESPIRATORY VIRUSES AFTER ALLOGENEIC HEMATOPOIETIC CELL TRANSPLANTATION	12080SUB	—	9,977
93.865	INFLUENCE OF HIV INFECTION ON VAGINAL VIROME AND RISK OF PRETERM BIRTH IN PREGNANT SOUTH AFRICAN WOMEN	12747SUB	—	23,319
93.837	INTRAOSSEOUS DELIVERY OF LENTIVIRAL VECTORS FOR HEMOPHILIA A GENE THERAPY	11458SUB	—	3,914
93.847	INVESTIGATING MECHANISMS OF VACCINE RESPONSE DEFICIENCY IN CYSTIC FIBROSIS	12529SUB	—	(10,913)
93.847	INVESTIGATING MECHANISMS OF VACCINE RESPONSE DEFICIENCY IN CYSTIC FIBROSIS	12686SUB	—	85,949
93.865	MECHANISMS CONTROLLING THE PERSISTENCE OF INFECTIOUS HIV RESERVOIRS IN CHILDREN	11667SUB	—	100,706
93.395	TESTICULAR EFFECTS OF MODERN CHEMOTHERAPY REGIMENS IN OSTEOSARCOMA SURVIVORS	11513SUB	—	16,559
93.395	TESTICULAR EFFECTS OF MODERN CHEMOTHERAPY REGIMENS IN OSTEOSARCOMA SURVIVORS	12815SUB	—	244,266
93.395	THE PROMOTING RESILIENCE IN STRESS MANAGEMENT (PRISM) INTERVENTION: A MULTI-SITE RANDOMIZED CONTROLLED TRIAL FOR ADOLESCENTS AND YOUNG ADULTS WITH ADVANCED CANCER	11991SUB	—	12,366

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93.395	THE PROMOTING RESILIENCE IN STRESS MANAGEMENT (PRISM) INTERVENTION: A MULTI-SITE RANDOMIZED CONTROLLED TRIAL FOR ADOLESCENTS AND YOUNG ADULTS RECEIVING HEMATOPOIETIC CELL TRANSPLANTATION	11908SUB	\$ —	22,132
93.839	ULTRASOUND-MEDIATED GENE DELIVERY TO ACHIEVE THERAPEUTIC CORRECTION OF HEMOPHILIA A	12266SUB	—	19,874
93.855	VIRAL AND IMMUNE KINETICS IN RHINOVIRUS INFECTION FOLLOWING HEMATOPOIETIC CELL TRANSPLANTATION	12504SUB	—	301,566
	SEATTLE INST FOR BIOMEDICAL & CLIN RES:			
93.393	IMPROVING PATIENT-IMPORTANT OUTCOMES WITH TESTOSTERONE REPLACEMENT IN HYPOGONADAL MEN WITH A PRIOR HISTORY OF CANCER	GJ116-FHCR-3	—	6,532
93.393	IMPROVING THE REACH AND EFFECTIVENESS OF SMOKING CESSATION SERVICES TARGETED TO VETERANS LIVING WITH HIV	CK11-FHCR-2	—	1,995
93.393	IMPROVING THE REACH AND EFFECTIVENESS OF SMOKING CESSATION SERVICES TARGETED TO VETERANS LIVING WITH HIV	CK11-FHCR-3	—	10,659
	SLOAN-KETTERING INSTITUTE FOR CANCER RES:			
93.396	INTERROGATING THE MINOR SPLICEOSOME TO UNDERSTAND AND TREAT LEUKEMIA	BD527367	—	478
93.396	INTERROGATING THE MINOR SPLICEOSOME TO UNDERSTAND AND TREAT LEUKEMIA	BD527367A	—	297,117
93.839	MACHINE LEARNING WITH IMMUNOGENETICS FOR THE PREDICTION OF HEMATOPOIETIC CELL TRANSPLANT OUTCOMES	BD528153	—	56,543
93.839	MACHINE LEARNING WITH IMMUNOGENETICS FOR THE PREDICTION OF HEMATOPOIETIC CELL TRANSPLANT OUTCOMES	C21949467	—	26,602
93.353	SUPPLEMENT – THE MSKCC-UW/FRED HUTCH PROSTATE CANCER DRUG RESISTANCE AND SENSITIVITY CENTER	BD527719	—	34,283
93.353	THE MSKCC-UW/FRED HUTCH PROSTATE CANCER DRUG RESISTANCE AND SENSITIVITY CENTER	BD522513C	—	22,828
93.353	THE MSKCC-UW/FRED HUTCH PROSTATE CANCER DRUG RESISTANCE AND SENSITIVITY CENTER	C21868065	—	88,253
	ST JUDE CHILDRENS RESEARCH HOSPITAL:			
93.395	CHILDHOOD CANCER SURVIVAL STUDY	11287270-7969283	—	484,978
93.395	CHILDHOOD CANCER SURVIVOR STUDY	111287270-7969215	—	3,668
93.395	CHILDHOOD CANCER SURVIVOR STUDY	11128728A-8084348	—	557,802
93.395	CHILDHOOD CANCER SURVIVOR STUDY	11128728E-8084348	—	1,125
93.U13	COVID-19: NIAID CENTERS OF EXCELLENCE FOR INFLUENZA RESEARCH AND SURVEILLANCE	112336024-8007561	—	161,395
93.855	DECODING THE INTERACTIONS BETWEEN T CELL RECEPTORS AND PEPTIDE-MHC	112404040-8011887	—	162,210
93.855	DECODING THE INTERACTIONS BETWEEN T CELL RECEPTORS AND PEPTIDE-MHC	AWOA	—	15,000
93.394	EHEALTH INTERVENTION FOR LATE EFFECTS OF CHILDHOOD CANCER	112539020-7986884	—	13,882
93.394	EHEALTH INTERVENTION FOR LATE EFFECTS OF CHILDHOOD CANCER	11253903B	—	6,974
	STANFORD UNIVERSITY:			
93.837	THE WHI STRONG AND HEALTHY SILENT ATRIAL FIBRILLATION RECORDING STUDY (WHISH STAR)	61526612-125216	—	170,475
93.837	TRANS-OMICS ELUCIDATION OF GENETIC ARCHITECTURE UNDERLYING CARDIOVASCULAR & OTHER COMPLEX DISEASES	62070755-131760	—	210,456
	SWEDISH MEDICAL CENTER:			
93.399	THE PACIFIC CANCER RESEARCH CONSORTIUM (PCRC) NCORP, A COMMUNITY SITE	907015 C.08	—	25,491
93.399	THE PACIFIC CANCER RESEARCH CONSORTIUM (PCRC), AN NCORP COMMUNITY SITE	907015 C.07	—	2,586
	THE CHILDREN'S HOSPITAL OF PHILADELPHIA:			
93.395	COG NCTN INTEGRATED TRANSLATIONAL SCIENCE CENTER FOR HEMATOPOIETIC MALIGNANCIES IN CHILDREN	20264680	—	13,757
93.395	COG NCTN NETWORK GROUP OPERATIONS CENTER	AR03282	—	(14,703)
93.395	COG NCTN PILOT FOR INTEGRATED TRANSLATIONAL SCIENCE CENTER FOR HEMATOPOIETIC MALIGNANCIES SUPPORT (UGICA233249)	PO 20291740	—	8,480
93.395	COG SCIENTIFIC COUNCIL	AWOA	—	(2,499)
93.395	HEM-ITSC DATA ANALYSIS, VISUALIZATION AND TARGET DISCOVERY PLATFORM	PO20292364	—	66,514
	THE EMMES COMPANY, LLC:			
93.395	AIDS MALIGNANCY CONSORTIUM (AMC)	NA	—	16,934
	THE GEORGE WASHINGTON UNIVERSITY:			
93.395	AIDS AND CANCER SPECIMEN RESOURCE: IDENTIFYING PREDICTORS OF KAPOSI SARCOMA IMMUNE RECONSTITUTION INFLAMMATORY SYNDROME	21-M41	—	300
	THE J. DAVID GLADSTONE INSTITUTES:			
12.U14	ANIMAL TESTING OF TIPS: A SINGLE ADMINISTRATION ESCAPE-RESISTANT HIV ANTIVIRAL THERAPY	SC-00029	—	113,624
	THE SCRIPPS RESEARCH INSTITUTE:			
93.855	CONSORTIUM FOR HIV/AIDS VACCINE DEVELOPMENT	54-54279	—	626
93.855	CONSORTIUM FOR HIV/AIDS VACCINE DEVELOPMENT	5-54285	—	33,367
93.855	CONSORTIUM FOR HIV/AIDS VACCINE DEVELOPMENT	5-54557	—	801,814
93.855	CONSORTIUM FOR HIV/AIDS VACCINE DEVELOPMENT	5-54563	—	285,115
93.855	CONSORTIUM FOR HIV/AIDS VACCINE DEVELOPMENT: DATA MANAGEMENT SRSU	5-54552	—	36,333
	THE UNIVERSITY OF TEXAS:			
93.394	(0007046) CIRCULATING BIOMARKERS AND IMAGING FOR EARLY DETECTION OF PANCREATIC CANCER	3001914918	—	3,374
93.394	A CLINICAL VALIDATION CENTER FOR EARLY DETECTION OF PANCREATIC CANCER	3001341904	—	92,622
93.394	A CLINICAL VALIDATION CENTER FOR EARLY DETECTION OF PANCREATIC CANCER	3001529467	—	7,213
93.847	CONSORTIUM FOR THE STUDY OF CHRONIC PANCREATIC, DIABETES AND PANCREATIC CANCER COORDINATING AND DATA MANAGEMENT CENTER (CSCPDP-CDMC)	3001641895	—	792,475
93.847	CONSORTIUM FOR THE STUDY OF CHRONIC PANCREATIC, DIABETES AND PANCREATIC CANCER: COORDINATING AND DATA MANAGEMENT CENTER (CSCPDP-CDMC)	3001641895	—	(133)
93.393	DEVELOPMENT OF RISK AND EARLY DETECTION BIOMARKER FOR SMALL CELL LUNG CANCER	3001631104	—	13,376
93.393	DEVELOPMENT OF RISK AND EARLY DETECTION BIOMARKER FOR SMALL CELL LUNG CANCER	3001871804	—	61,442
93.394	INTEGRATED CIRCULATING BIOMARKERS AND IMAGING MODALITIES FOR EARLY DETECTION OF PANCREATIC DUCTAL ADENOCARCINOMA	U01CA214263	—	(3,448)
	THE WISTAR INSTITUTE:			
93.855	BEAT-HIV: DELANEY COLLABORATORY TO CURE HIV-1 INFECTION BY COMBINATION IMMUNOTHERAPY	25900-72-324	—	104,188
93.855	BEAT-HIV: DELANEY COLLABORATORY TO CURE HIV-1 INFECTION BY COMBINATION IMMUNOTHERAPY	25901-72-324	—	94,361
	TUFTS UNIVERSITY:			
93.855	STRUCTURE, ANTIGENICITY, AND FUNCTION OF HCMV FUSOGEN GB	103889-00001	—	125,159
	TULANE UNIVERSITY:			
93.855	ROLE OF RHCVM IN SHAPING THE SIV PROVIRAL LANDSCAPE	TUL-HSC-559982-21/22	—	750

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93.393	TWINSTRAND BIOSCIENCES: DEVELOPMENT OF A UNIVERSAL ASSAY FOR MINIMAL RESIDUAL DISEASE IN ACUTE MYELOID LEUKEMIA USING DUPLEX SEQUENCING	R44CA233381-FH20180716	\$ —	20,242
93.855	UNIVERSITY OF ALABAMA: DEFINING THE BIOLOGICAL RELEVANCE OF HIV-1 ADAPTATION TO CD4 T CELL RESPONSES	000515868-001	—	25,024
93.393	UNIVERSITY OF ARIZONA: ROLE OF FSH IN POSTMENOPAUSAL OBESITY AND BREAST CANCER	649976	—	9,284
93.866	THYMIC AND PERIPHERAL ASPECTS OF T CELL AGING AND REJUVENATION	413308	—	264,498
93.855	UNIVERSITY OF CALIFORNIA LOS ANGELES: (ATTACK) 2: GENETIC ENGINEERING OF CELLULAR AND HUMORAL IMMUNITY TO CURE HIV: NHP CORE	1559 G XG089	—	369,698
93.855	LEADERSHIP AND OPERATIONS CENTER (LOC), AIDS CLINICAL TRIALS GROUP (ACTG)	1560 B YC375	—	118,751
93.397	UCLA SPORE IN PROSTATE CANCER	2301 G XE827	—	18,796
93.397	UCLA SPORE IN PROSTATE CANCER	2301G XE827	—	15,230
93.866	UNIVERSITY OF CALIFORNIA, SAN DIEGO: EPIGENETIC AGING BIOMARKERS OF MILD COGNITIVE IMPAIRMENT, ALZHEIMER'S DISEASE AND RELATED DEMENTIAS, AND BRAIN AGING	KR 704683	—	43,688
93.866	SEDENTARY BEHAVIOR INTERRUPTED: ACUTE, MEDIUM AND LONG-TERM EFFECTS ON BIOMARKERS OF HEALTHY AGING, PHYSICAL FUNCTION AND MORTALITY	98047373	—	47,073
93.397	UNIVERSITY OF CALIFORNIA, SAN FRANCISCO: CANCER CENTER SUPPORT GRANT	12595SC	—	112,971
93.855	DELANEY AIDS RESEARCH ENTERPRISE TO CURE HIV	AWOA	—	46,298
93.855	DELANEY AIDS RESEARCH ENTERPRISE TO CURE HIV	13171SC	—	242,250
93.859	HARC CENTER COLLABORATIVE OPPORTUNITY FUND	13084SC	—	100,318
93.859	HARC CENTER: HIV ACCESSORY AND REGULATORY COMPLEXES: PROJECT 7: CHARACTERIZATION OF SUPER RESTRICTION FACTORS AND PREDICTION OF HOST-HIV INTERFACES	10368SC	—	443,878
93.855	TARGETING HIV-SPECIFIC T CELL DIFFERENTIATION PROGRAMS TO ENHANCE POST-TREATMENT CONTROL OF HIV	13383SC	—	5,338
93.855	UNIVERSITY OF CAPE TOWN: ANTIGENIC AND VIROLOGICAL TRAITS OF HIV-1 BREAKTHROUGH INFECTIONS IN THE VRC01 ANTIBODY-MEDIATED PREVENTION PHASE 2B TRIAL IN SUB-SAHARAN AFRICA	UCT00033668	—	10,741
93.855	ANTIGENIC AND VIROLOGICAL TRAITS OF HIV-1 BREAKTHROUGH INFECTIONS IN THE VRC01 ANTIBODY-MEDIATED PREVENTION PHASE 2B TRIAL IN SUB-SAHARAN AFRICA	UCT30959	—	13,347
93.395	UNIVERSITY OF CINCINNATI: PILOT 3: ITSC FOR LEUKEMIA: NOVEL MOLECULAR STRATEGIES FOR NCTN INDIVIDUALIZED THERAPIES	AWOA	—	82,181
93.395	SLC: ITSC FOR LEUKEMIA: NOVEL MOLECULAR STRATEGIES FOR NCTN: "INDIVIDUALIZED" THERAPIES	AWOA	—	10,754
93.395	SLC: ITSC FOR LEUKEMIA: NOVEL MOLECULAR STRATEGIES FOR NCTN: "INDIVIDUALIZED" THERAPIES	AWOA	—	9,936
93.310	UNIVERSITY OF DELAWARE: METABOLIC CARBOHYDRATE CELL WALL PROBES FOR BACTERIAL STRUCTURE AND IMMUNE RECOGNITION STUDIES	54778	—	2,904
93.855	UNIVERSITY OF FLORIDA: DESIGN AND ANALYSIS OF VACCINE TRIALS FOR EMERGING INFECTIOUS DISEASE THREATS	UFDSP00012291	—	11,837
93.855	MATHEMATICAL AND STATISTICAL METHODS FOR THE CONTROL OF GLOBAL INFECTIOUS DISEASE THREATS	SUB00002465	—	146,548
93.393	UNIVERSITY OF HAWAII: EFFECTS OF INTERMITTENT ENERGY RESTRICTION ON INTRA-ABDOMINAL FAT AND THE GUT MICROBIOME: A RANDOMIZED TRIAL	AWOA	—	74,301
93.398	UNIVERSITY OF ILLINOIS: PROMOTING GENETIC COUNSELING AMONG AFRICAN AMERICAN WOMEN WITH HEREDITARY RISK FOR BREAST CANCER	18857	—	92,664
93.847	UNIVERSITY OF MARYLAND, BALTIMORE: NOVAVAX SNIFF SUBSTUDY (3004-01)	AWOA	—	132,658
93.847	UNIVERSITY OF MASSACHUSETTS MEDICAL SCH: IPAT: INTELLIGENT DIET QUALITY PATTERN ANALYSIS FOR HARMONIZED MA-NATIONAL TRIALS	FANG-34658-FHCRC	—	14,017
93.393	VIP: VISUAL-VALID DIETARY BEHAVIOR PATTERN RECOGNITION FOR LOCAL-NATIONAL TRIALS	30662-FHCR	—	573
93.393	UNIVERSITY OF MELBOURNE: COLON CANCER FAMILY REGISTRY COHORT	GL058179-FH-Y4	—	617,030
93.393	COLON CANCER FAMILY REGISTRY COHORT	GL058179-FH-Y5	—	92,456
93.279	UNIVERSITY OF MINNESOTA: ANTIBODY-BASED COUNTERMEASURES AGAINST FENTANYL AND ITS ANALOGUES	N008175304	—	32,685
93.865	OPTIMIZING IMMUNITY AND MATERNAL HOST DEFENSE AGAINST CONGENITAL CYTOMEGALOVIRUS INFECTION	N007639101	—	185,448
93.279	PHASE 1A/1B CLINICAL TRIALS OF MULTIVALENT OPIOID VACCINES COMPONENTS	N007837501	—	22,870
93.393	ROLE OF GENETIC AND EPIGENETIC ALTERATIONS IN CFTR IN COLORECTAL CANCER	N009056001	—	6,773
93.847	UNIVERSITY OF NEW SOUTH WALES, SYDNEY: ASPIRIN AND NSAID USE AND OVARIAN CANCER PROGNOSIS (AS678)	AWOA	—	4,999
93.855	UNIVERSITY OF NORTH CAROLINA CHAPEL HILL: CAUSAL INFERENCE IN INFETIOUS DISEASE PREVENTION STUDIES	5117932	—	71,514
93.855	COLLABORATORY OF AIDS RESEARCHERS FOR ERADICATION (CARE)	5122650	—	123,172
93.855	COLLABORATORY OF AIDS RESEARCHERS FOR ERADICATION (CARE)	AWOA	—	10,291
93.837	GENETIC STUDIES OF BLOOD CELL TRAITS IN MULTI-ETHNIC COHORTS	5105070	—	2,647
93.393	PHYSICAL ACTIVITY, SEDENTARY BEHAVIOR, AND CANCER INCIDENCE IN WOMEN	5115809	—	71,466
93.172	POLYGENIC RISK SCORES AND HEALTH DISPARITIES: THE ROLE OF BLOOD CELLS IMMUNE RESPONSE AND EVOLUTIONARY ADAPTATION	5121615	—	45,675
93.172	POLYGENIC RISK SCORES AND HEALTH DISPARITIES: THE ROLE OF BLOOD CELLS IMMUNE RESPONSE AND EVOLUTIONARY ADAPTATION	5124208	—	13,195
93.855	SYSTEMS IMMUNOGENETICS OF BIODEFENSE AND EMERGING PATHOGENS IN THE COLLABORATIVE CROSS	5118695	—	34,609
93.855	SYSTEMS IMMUNOGENETICS OF BIODEFENSE AND EMERGING PATHOGENS IN THE COLLABORATIVE CROSS	5122354	—	235,053
93.307	THE VAGINAL MICROBIOME AND RACIAL DISPARITY IN PRETERM DELIVERY	5106998	—	45,404
93.859	UNLOCKING COMPLEX CO-EXPRESSION NETWORK USING GRAPHICAL MODELS	5108277	—	15,995

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93.855	UNIVERSITY OF PENNSYLVANIA:			
93.855	ENGINEERING T CELLS TO PROVIDE DURABLE CONTROL OF HIV-1 REPLICATION	582399	\$ —	191,352
93.U17	ENGINEERING T CELLS TO PROVIDE DURABLE CONTROL OF HIV-1 REPLICATION	AWOA	—	341
93.U18	NIAID CENTERS OF EXCELLENCE FOR INFLUENZA RESEARCH AND REPOSE	53785	—	341,337
93.U19	NIAID CENTERS OF EXCELLENCE FOR INFLUENZA RESEARCH AND REPOSE	584518	—	90,882
93.393	NIAID CENTERS OF EXCELLENCE FOR INFLUENZA RESEARCH AND RESPONSE PENN-CEIRR OPTION 19 A (PRISM LINE 6)	57558	—	31,635
93.393	POST GENOME-WIDE ASSOCIATION STUDIES IN TESTICULAR GERM CELL TUMORS	580730	—	10,895
93.393	POST GENOME-WIDE ASSOCIATION STUDIES IN TESTICULAR GERM CELL TUMORS	583406	—	20,379
93.859	UNIVERSITY OF PITTSBURGH:			
93.859	MIDAS COORDINATION CENTER	AWD00000238 (134578-1)	—	(5,643)
93.855	MIDAS COORDINATION CENTER	AWD00000238 (136372-1)	—	90,643
93.393	PROSPECTIVE EPIDEMIOLOGIC STUDY OF NOVEL ETIOLOGIC AGENTS OF PELVIC INFLAMMATORY DISEASE	AWD00002682 (134944-1)	—	500,583
93.866	RANDOMIZED CLINICAL TRIAL OF LUNG CANCER CHEMOPREVENTION WITH SUFORAPHANE IN FORMER SMOKERS	CNVA0056097(129912-1)	—	14,468
93.866	SLEEP, FALLS AND FRACTURES IN MEN AND WOMEN: ROLE OF NOCTURNAL HYPOXIA	AWD00001899 (137160-2)	—	57,364
93.279	UNIVERSITY OF RHODE ISLAND:			
93.279	CAUSAL INFERENCE METHODS FOR HIV PREVENTION STUDIES AMONG NETWORKS OF PEOPLE WHO USE DRUGS	0006817/08152018	—	14,747
93.855	UNIVERSITY OF ROCHESTER:			
93.U20	MODELING MECHANISMS OF ADJUVANTED INFLUENZA VACCINE INDUCED IGG REPERTOIRE DIVERSITY AND HETEROSUBTYPIC IMMUNITY URF (AWD00001405)	417029-G/URFAOGR510616	—	195,664
93.393	NIAID CENTERS FOR EXCELLENCE IN INFLUENZA RESEARCH AND SURVEILLANCE/AWDC528132	417430G-GR510848	—	70,191
93.393	UNIVERSITY OF SOUTHERN CALIFORNIA:			
93.393	AN INTEGRATIVE MULTI-OMICS APPROACH TO CHARACTERIZE PROSTATE CANCER RISK IN DIVERSE POPULATIONS	SCON-00003044	—	9,019
93.393	DETERMINANTS OF THE RACIAL/ETHNIC DISPARITY IN MGUS RISK: AN EPIDEMIOLOGIC STUDY IN 4 COHORTS	2021-1592	—	23,622
93.393	LEVERAGING DIVERSITY IN CANCER EPIDEMIOLOGY COHORT	SCON-00003752	—	4,827
93.393	LEVERAGING DIVERSITY IN CANCER EPIDEMIOLOGY COHORTS AND NOVEL METHODS TO IMPROVE POLYGENIC RISK SCORES	SCON-00002170	—	51,477
93.839	NOVEL HEMATOPOIETIC STEM CELL ENGINEERING AND TRANSPLANTATION APPROACHES FOR HIV CURE	133295422	—	856,771
93.839	NOVEL HEMATOPOIETIC STEM CELL ENGINEERING AND TRANSPLANTATION APPROACHES FOR HIV CURE	AWOA	—	71,085
93.839	UNIVERSITY OF TEXAS HEALTH SCIENCE CENTE:			
93.866	ANALYSIS OF WHOLE GENOME SEQUENCE AND HEMOSTASIS PHENOTYPES	SA0000529	—	22,836
93.866	CIRCADIAN REST-ACTIVITY RHYTHMS, METABOLOMIC PROFILES, AND INCIDENCE OF ALZHEIMER'S DISEASE AND RELATED DEMENTIA IN OLDER MEN AND WOMEN	SA0000468	—	32,066
93.855	UNIVERSITY OF TEXAS HSC AT SAN ANTONIO:			
93.855	DEFINING CONSERVED EPITOPES ON POLYMORPHIC MALARIA ANTIGENS	169189/169185	—	21,801
93.393	UNIVERSITY OF UTAH:			
93.847	CHANGING CONTRACEPTIVE PATTERNS AND OVARIAN CANCER RISK	10057578-01-FRED	—	8,649
93.847	HEMATOLOGY CENTRAL COORDINATING CENTER (HCCC)	10055841-01	—	85,198
93.847	HEMATOLOGY CENTRAL COORDINATING CENTER (HCCC) FOR THE NIDDK HEMATOLOGY CENTERS PROGRAM	10055841-01	—	18,091
93.393	METABOLOMIC STRATEGIES FOR DISCOVERY AND VALIDATION OF BIOMARKERS OF COLORECTAL CANCER RECURRENCE	10043057-01	—	191,718
93.859	MULTIMERIC TRIM INHIBITION OF HIV CAPSIDS	10044932-16	—	12,444
93.393	TRANSDISCIPLINARY TEAM SCIENCE IN COLORECTAL CANCER PROGNOSIS: THE COLOCARE STUDY	10039363-04	—	107,422
93.393	TRANSDISCIPLINARY TEAM SCIENCE IN COLORECTAL CANCER PROGNOSIS: THE COLOCARE STUDY	10059766-04	—	118,267
93.394	UNIVERSITY OF WASHINGTON:			
93.394	A QUANTITATIVE PET/CT RESEARCH RESOURCE FOR CO-CLINICAL IMAGING OF LUNG CANCER THERAPIES	UWSC13174	—	30,430
93.847	A QUANTITATIVE PET/CT RESEARCH RESOURCE FOR CO-CLINICAL IMAGING OF LUNG CANCER THERAPIES	UWSC13793	—	21,356
93.396	A TWIN STUDY OF OBESITY PATHOGENESIS USING FMRI	UWSC10853	—	3,097
93.121	ACTIVATION OF THE DNA-PK-DEPENDENT ANTIVIRAL RESPONSE AS A NOVEL CANCER IMMUNOTHERAPY	AWOA	—	27,400
93.279	AN INTEGRATED FIBER-MICRONEEDLE DEVICE TO STUDY AND OPTIMIZE IMMUNE RESPONSES	UWSC12291	—	35,898
93.393	ANTIBODY-BASED COUNTERMEASURES AGAINST FENTANYL AND ITS ANALOGUES	AWOA	—	49,398
93.837	BACTERIAL CORRELATES OF COLORECTAL CANCER SUBTYPES AND SURVIVAL	UWSC10672	—	438,809
93.837	BIOMARKERS OF OXIDATIVE STRESS, INFLAMMATION, AND CARDIAC DAMAGE AS MARKERS OF LONG-TERM RADIATION-INDUCED CARDIOVASCULAR OUTCOMES IN BREAST CANCER	UWSC12097	—	16,652
93.837	BIOMARKERS OF OXIDATIVE STRESS, INFLAMMATION, AND CARDIAC DAMAGE AS MARKERS OF LONG-TERM RADIATION-INDUCED CARDIOVASCULAR OUTCOMES IN BREAST CANCER	UWSC13864	—	7,634
93.395	BIOMARKERS OF RESPONSE TO IMMUNO-CHEMOTHERAPY AND OLIGOMETASTATIC HYPOFRACTIONATED RADIOTHERAPY (BRIGHT) FOR LUNG CANCER: SYNERGY OF PET/CT IMAGING AND PERIPHERAL BLOOD ASSAYS	UWSC13453	—	11,337
93.395	BIOMARKERS OF RESPONSE TO IMMUNO-CHEMOTHERAPY AND OLIGOMETASTATIC HYPOFRACTIONATED RADIOTHERAPY (BRIGHT) FOR LUNG CANCER: SYNERGY OF PET/CT IMAGING AND PERIPHERAL BLOOD ASSAYS	UWSC13903	—	8,327
12.420	BOOSTING COMPLEMENT ACTIVITY SUPPRESSES DEVELOPMENT OF CASTRATION RESISTANCE	UWSC12701	—	82,864
93.398	CANCER PREVENTION TRAINING: EPIDEMIOLOGY, NUTRITION, GENETICS AND SURVIVORSHIP	UWSC12724	—	44,641
93.855	CENTER FOR AIDS RESEARCH (CFAR): CORE 1 – IMMUNOLOGY CORE – YR 34	UWSC10510	—	80,335
93.855	CENTER FOR AIDS RESEARCH (CFAR): CORE 1 – IMMUNOLOGY CORE – YR 34	UWSC13698	—	19,448
93.855	CENTER FOR AIDS RESEARCH (CFAR): CORE 1 – IMMUNOLOGY CORE – YR 35	UWSC13698	—	4,958
93.855	CFAR AIDS-ASSOCIATED INFECTIONS AND MALIGNANCIES CORE	UWSC10495	—	54,350
93.855	CFAR AIDS-ASSOCIATED INFECTIONS AND MALIGNANCIES CORE	UWSC13796	—	37,572
93.855	CFAR AIDS-ASSOCIATED INFECTIONS AND MALIGNANCIES CORE – YEAR 35	AWOA	—	12,191
93.394	COMBINED METHYLATION AND MUTATION TO PREDICT RESPONSE TO PARP INHIBITORS	UWSC11306	—	24,582
93.394	COMBINED METHYLATION AND MUTATION TO PREDICT RESPONSES TO PARP INHIBITORS	UWSC13950	—	5,824
93.855	CURATIVE THERAPIES FOR HIV SCIENTIFIC WORKING GROUP	UWSC10497	—	27,896

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Federal CFDA or Grant	Pass-through Funds – Department of Health and Human Services and Other Federal Agencies	Passed-through entity or award identifying number	Passed-through to subrecipients	Expenditures
93.855	CURATIVE THERAPIES FOR HIV SCIENTIFIC WORKING GROUP	UWSC13699	\$ —	12,467
93.855	CYTOMEGALOVIRUS (CMV) VACCINE IN ORTHOTOPIC LIVER TRANSPLANT CANDIDATES ("COLT")	UWSC13718	—	66,624
93.855	CYTOMEGALOVIRUS (CMV) VACCINE IN ORTHOTOPIC LIVER TRANSPLANT CANDIDATES (COLT)	AWOA	—	7,510
93.855	CYTOMEGALOVIRUS (CMV) VACCINE IN ORTHOTOPIC LIVER TRANSPLANT CANDIDATES (COLT)	UWSC13439	—	20,900
93.855	DETERMINING THE COMPONENT CAUSES OF SYSTEMIC IMMUNE ACTIVATION THAT MODERATE HIV ACQUISITION AND ESTABLISHMENT OF THE LATENT VIRAL RESERVOIR	UWSC9612	—	9,314
93.353	DEVELOPING A RIDE-SHARE INTERVENTION TO IMPROVE FOLLOW-UP OF ABNORMAL FECAL IMMUNOCHEMICAL TEST (FIT) RESULTS	UWSC12681	—	24,969
93.395	DIFFERENTIAL RESPONSE OF GLIOBLASTOMAS TO MICROTUBULE TARGETIG AGENTS	UWSC13783	—	526
93.395	DIFFERENTIAL RESPONSE OF GLIOBLASTOMAS TO MICROTUBULE TARGETING AGENTS	UWSC12363	—	(19,515)
93.396	DIGITAL PCR QUANTIFICATION OF BCR-ABL FOR CML DIAGNOSIS AND MONITORING IN A LMICS SETTING	UWSC13952	—	13,216
93.396	DIGITAL PCR QUANTIFICATION OF BCR-ABL FOR CML DIAGNOSIS AND MONITORING IN A LMICS SETTING	UWSC9861	—	48,934
93.361	EFFICACY AND MECHANISTIC TESTING OF A SELF-MANAGEMENT INTERVENTION FOR MANAGING CHRONIC PAIN WITH CANCER SURVIVORS	UWSC10875	—	2,798
93.172	EMERGE IV NORTHWEST: A PARTNERSHIP TO EVALAUTE THE USE OF GENOMIC INFORMATION IN THE HEALTH CARE OF DIVERSE PARTICIPANTS	AWOA	—	2,625
93.172	EMERGE IV NORTHWEST: A PARTNERSHIP TO EVALAUTE THE USE OF GENOMIC INFORMATION IN THE HEALTH CARE OF DIVERSE PARTICIPANTS	UWSC13026	—	141,695
93.172	EMERGE IV NORTHWEST: A PARTNERSHIP TO EVALUATE THE USE OF GENOMIC INFORMATION IN THE HEALTH CARE OF DIVERSE PARTICIPANTS	UWSC12137	—	(8,808)
93.350	ENGINEERING ADOPTIVE T CELL THERAPY TO OVERCOME FAS-MEDIATED CELL DEATH IN OVARIAN CANCER	AWOA	—	6,885
93.350	ENGINEERING ADOPTIVE T CELL THERAPY TO OVERCOME FAS-MEDIATED CELL DEATH IN OVARIAN CANCER	UWSC12634	—	27,203
93.865	ENHANCING PREP OUTCOMES AMONG KENYAN ADOLESCENT GIRLS AND YOUNG WOMEN WITH A NOVEL PHARMACY-BASED PREP DELIVERY PLATFORM	UWSC13446	—	2,397
93.865	ENHANCING PREP OUTCOMES AMONG KENYAN ADOLESCENT GIRLS AND YOUNG WOMEN WITH A NOVEL PHARMACY-BASED PREP DELIVERY PLATFORM	UWSC13859	—	2,397
93.855	EVALUATING THE RELATIONSHIP OF CD101 AND UBE2V1 TO GENITAL MUCOSAL INFLAMMATION	UWSC10291	—	145,501
93.173	GENETICS OF ZEBRAFISH HAIR CELL TOXICITY	UWSC11042	—	69,527
93.173	GENETICS OF ZEBRAFISH HAIR CELL TOXICITY	UWSC13757	—	9,970
93.067	GH16-1629 HIV SURVEILLANCE FOR EPIDEMIC CONTROL IN MALAWI UNDER THE PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF	UWSC13346	—	4,109
93.067	GH16-1629 HIV SURVEILLANCE FOR EPIDEMIC CONTROL IN MALAWI UNDER THE PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF	UWSC13708	—	4,519
93.394	HIGH-CONTENT FUNCTIONAL CANCER DRUG TESTING ON MICRO-CUBOIDAL TUMOR DISSECTIONS	UWSC12178	—	114,588
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA	UWSC11115	—	250,974
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA	UWSC11186	—	861,584
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA	UWSC13818	—	64,175
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA	UWSC13831	—	91,955
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA/CORE 3: BIOSTATISTICS AND BIOINFORMATICS	UWSC11116	—	286,621
93.395	IMMUNOBIOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA/CORE 3: BIOSTATISTICS AND BIOINFORMATICS	UWSC13830	—	56,492
93.395	IMMUNOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARCINOMA	UWSC11121	—	114,954
93.395	IMMUNOLOGY AND IMMUNE THERAPY FOR MERKEL CELL CARINCOMA	UWSC13829	—	51,011
93.865	IMPACT OF PERICONCEPTUAL VAGINAL MICROBIOTA ON WOMENS RISK OF PRETERM BIRTH	UWSC9487	—	135,585
93.397	IMPROVING IDENTIFICATION OF DETERMINANTS OF EVIDENCE-BASED PRACTICE IMPLEMENTATION	UWSC12561	—	32,681
93.865	INFANT IMMUNE MECHANISMS OF HIV RESERVOIR SIZE AND DECAY	UWSC10078	—	148,945
93.350	INSTITUTE FOR TRANSLATIONAL HEALTH SCIENCES (ITHS)	NA	—	26,748
93.350	INSTITUTE FOR TRANSLATIONAL HEALTH SCIENCES (ITHS)	UWSC13474	—	87,496
93.350	INSTITUTE OF TRANSLATIONAL HEALTH SCIENCES	UWSC11771	—	99,470
93.350	INSTITUTE OF TRANSLATIONAL HEALTH SCIENCES	UWSC9806	—	258,800
93.395	INTERROGATING THE RESPONSE OF THE TUMOR MICROENVIRONMENT TO COMBINATION IMMUNOTHERAPY USING A MICROFLUIDIC PLATFORM	UWSC13145	—	96,878
93.396	JOINT RECEPTOR AND PROTEIN EXPRESSION IMMUNOPHENOTYPING THROUGH SPLIT-POOL BARCODING	AWOA	—	44,805
93.396	JOINT RECEPTOR AND PROTEIN EXPRESSION IMMUNOPHENOTYPING THROUGH SPLIT-POOL BARCODING	UWSC12789	—	178,232
93.394	LARGE SCALE CLINICAL AND ECONOMIC IMPACT ANALYSIS OF POTENTIALLY MALIGNANT INCIDENTAL FINDINGS IN RADIOLOGY REPORTS	UWSC13588	—	527
12.420	LIGHT-SHEET MICROSCOPY: IDENTIFICATION AND MOLECULAR CHARACTERIZATION OF PROSTATE CARCINOMA WITH DE NOVO RESISTANT TO TOTAL ANDROGEN ABLATIVE THERAPY	UWSC12797	—	59,658
93.399	LIVER CANCER DISPARITIES IN ALASKA NATIVE AND AMERICAN INDIAN PEOPLE	UWSC13256	—	162,666
93.859	MACHINE LEARNING TOOLS FOR DISCOVERY & ANALYSIS OF ACTIVE METABOLIC PATHWAYS	UWSC9045	—	40,560
93.855	MALARIA EVOLUTION IN SOUTH ASIA	UWSC13673	—	10,396
93.855	MALARIA EVOLUTION IN SOUTH ASIA (NIAID IERNATIONAL CENTERS OF EXCELLENCE FOR MALARIA RESEARCH	UWSC9993	—	40,248
93.394	METHYLATION AND MUTATION ASSAY TO PERSONALIZE PARP INHIBITOR THERAPY	UWSC12115	—	16,273
93.394	METHYLATION AND MUTATION ASSAY TO PERSONALIZE PARP INHIBITOR THERAPY	UWSC13948	—	3,094
93.855	MODELING OF HUMAN HSV INFECTION: DEVELOPMENT OF 3D SKIN-ON-CHIP WITH VASCULAR PERFUSION	UWSC11742	—	97,372
93.855	MODELING OF HUMAN HSV INFECTION: DEVELOPMENT OF 3D SKIN-ON-CHIP WITH VASCULAR PERFUSION	UWSC13630	—	45,279
93.859	MODELING THE EVOLUTIONARY AND PUBLIC HEALTH IMPACTS OF HIV ADAPTATION IN RESPONSE TO VACCINATION	UWSC10195	—	6,075
93.855	MODULATION OF ANTIVIRAL RESPONSES AGAINST INFLUENZA INFECTION BY LONG NON-CODING RNAS	UWSC11428	—	1,301
93.859	NOVEL STATISTICAL INFERENCE FOR BIOMEDICAL BIG DATA	UWSC12308	—	24,215
93.859	NOVEL STATISTICAL INFERENCE FOR BIOMEDICAL BIG DATA	UWSC13647	—	8,537
93.847	NUTRITION OBESITY RESEARCH CENTER	UWSC12074	—	56,447
93.847	NUTRITION OBESITY RESEARCH CENTER	UWSC13849	—	23,066
93.397	OPTIMIZING IMPLEMENTATION IN CANCER CONTROL: OPTICC	UWSC12561	—	111,650
93.397	OPTIMIZING IMPLEMENTATION IN CANCER CONTROL: OPTICC	UWSC13826	—	44,696
93.398	POSTDOCTORAL FELLOW – NAMITA HATTANGADY – INTERDISCIPLINARY TRAINING IN CANCER RESEARCH	UWSC12623	—	29,358
93.839	POSTDOCTORAL FELLOW: ADAM HECK – HEMATOLOGY TRAINING	UWSC13738	—	2,489
93.398	POSTDOCTORAL FELLOW: BRAD KRAJINA	UWSC13363	—	21,500
93.398	POSTDOCTORAL FELLOW: BRAD KRAJINA	UWSC13916	—	16,125
93.398	POSTDOCTORAL FELLOW: CLAIRE THOMAS – CANCER PREVENTION TRAINING: EPIDEMIOLOGY, NUTRITION, GENETICS AND SURVIVORSHIP	AWOA	—	7,947

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93.U21	POSTDOCTORAL FELLOW: COLETTE DAVIS – CANCER PREVENTION TRAINING: EPIDEMIOLOGY, NUTRITION, GENETICS AND SURVIVORSHIP	AWOA	\$ —	10,350
93.989	POSTDOCTORAL FELLOW: ELIZABETH GULLEEN – NORTHERN/PACIFIC UNIVERSITIES GLOBAL HEALTH RESEARCH TRAINING CONSORTIUM	UWSC13041	—	55,766
93.855	POSTDOCTORAL FELLOW: KATHERINE RACHAEL PARKS	UWSC12847	—	1,492
93.398	POSTDOCTORAL FELLOW: KATHERINE WOJCIK – DEVELOPING DATA-DRIVEN CANCER RESEARCH	UWSC13235	—	7,902
93.855	POSTDOCTORAL FELLOW: KRISTI GEIGER STD AND AIDS RESEARCH TRAINING GRANT	UWSC13589	—	15,894
93.172	POSTDOCTORAL FELLOW: MATTHEW WOOTEN – INTERDISCIPLINARY TRAINING IN GENOME SCIENCES	UWSC13200	—	37,351
93.172	POSTDOCTORAL FELLOW: MATTHEW WOOTEN – INTERDISCIPLINARY TRAINING IN GENOME SCIENCES	UWSC13822	—	16,008
93.398	POSTDOCTORAL FELLOW: MICHELLE KIM-CANCER PREVENTION TRAINING: EPIDEMIOLOGY NUTRITION, GENETICS & SURVIVORSHIP	UWSC12589	—	36,358
93.398	POSTDOCTORAL FELLOW: NAMITA HATTANGADY – INTERDISCIPLINARY TRAINING IN CANCER RESEARCH	UWSC12623	—	24,849
93.398	POSTDOCTORAL FELLOW: NAMITA HATTANGADY – INTERDISCIPLINARY TRAINING IN CANCER RESEARCH	UWSC13882	—	18,637
93.855	POSTDOCTORAL FELLOW: SARAH VICK – DISEASE OF PUBLIC HEALTH IMPORTANCE TRAINING GRANT	UWSC13614	—	14,930
93.855	POSTDOCTORAL FELLOW: SARAH VICK – DISEASES OF PUBLIC HEALTH IMPORTANCE TRAINING GRANT	UWSC12846	—	52,776
93.859	PROTEIN-ENHANCED ENTERAL NUTRITION AND METABOLOMICS IN CRITICALLY TRAUMA AND SURGICAL PATIENTS	UWSC10725	—	19,118
93.847	REGULATION OF WHITE ADIPOSE TISSUE FUNCTION AND ENERGY BALANCE BY BREASTMILK ANTIBODIES	UWSC12946	—	50,226
93.242	SCALING UP THE SYSTEMS ANALYSIS AND IMPROVEMENT APPROACH FOR PREVENTION OF MOTHER-TO-CHILD HIV TRANSMISSION IN MOZAMBIQUE (SAIA-SCALE)	UWSC9736	—	10,155
93.855	SEXUALLY TRANSMITTED INFECTIONS (STI) COOPERATIVE RESEARCH CENTER (CRC) – SYPHILIS VACCINE TO PROTECT AGAINST LOCAL AD DISSEMINATED			
	T. PALIDUM INFECTION	UWSC11421	—	80,142
93.855	SEXUALLY TRANSMITTED INFECTIONS (STI) COOPERATIVE RESEARCH CENTER (CRC) – SYPHILIS VACCINE TO PROTECT AGAINST LOCAL AND DISSEMINATED			
	T. PALIDUM INFECTION	UWSC11421	—	364,733
93.853	SIGNALING PATHWAYS THAT MODULATE NEURONAL ACTIVITY	UWSC11761	—	179,873
93.853	SIGNALING PATHWAYS THAT MODULATE NEURONAL ACTIVITY	UWSC13828	—	49,422
93.113	SPATIOTEMPORAL REFINEMENT FOR ENVIRONMENTAL CIRCADIAN MISALIGNMENT	UWSC12901	—	6,950
93.855	STATISTICAL ISSUES IN AIDS RESEARCH	UWSC11040	—	79,044
93.855	STATISTICAL ISSUES IN AIDS RESEARCH	UWSC13695	—	24,823
93.859	STATISTICAL METHODS TO ENHANCE REPRODUCIBLE MICROBIOME DISCOVERY	UWSC11334	—	41,354
93.859	STATISTICAL METHODS TO ENHANCE REPRODUCIBLE MICROBIOME DISCOVERY	UWSC13696	—	25,943
93.855	STRUCTURAL AND DYNAMICS TRAITS UNDERLYING PHENOTYPIC VARIATION IN HIV-1 ENV	UWSC11397	—	24,740
93.839	STRUCTURAL AND NUCLEOTIDE VARIATION AS GENOMIC RISKS FOR VENOUS THROMBOSIS: TOPMED AND INVENT COLLABORATION	UWSC12246	—	55,267
93.866	THE DOGS AGING PROJECT: GENETIC AND ENVIRONMENTAL DETERMINANTS OF HEALTHY AGING IN COMPANION DOGS	UWSC10989	—	229,615
93.866	THE DOGS AGING PROJECT: GENETIC AND ENVIRONMENTAL DETERMINANTS OF HEALTHY AGING IN COMPANION DOGS	UWSC13736	—	23,757
93.394	THE EFFECTS OF MODERATE-TO-VIGOROUS EXERCISE ON BIOMARKERS OF ANGIOGENESIS, INVASION, AND CHRONIC STRESS IN OVARIAN CANCER SURVIVORS	UWSC10665	—	19,983
93.865	THE IMPACT OF VAGINAL MICROBIOTA ON CERVICAL DENDRITIC CELLS: AN OBSERVATION STUDY OF WOMEN FROM SUB-SAHARAN AFRICA AT HIGH RISK FOR HIV ACQUISITION	UWSC13663	—	1,450
93.855	THE ROLE OF SEMEN IN INDUCTION OF PATERNAL-SPECIFIC TOLERANCE DURING PREGNANCY	UWSC12694	—	30,534
93.855	THE ROLE OF SEMEN IN INDUCTION OF PATERNAL-SPECIFIC TOLERANCE DURING PREGNANCY	UWSC13671	—	4,369
12.420	THERAPEUTIC TARGETING OF NEUROENDOCRINE PROSTATE CANCER	UWSC12651	—	47,729
93.350	TRANSLATING AABS FOR SCLC EARLY DETECTION AND TREATMENT	UWSC13470	—	52,478
93.855	UNIVERSITY OF WASHINGTON ARBOVIRAL RESEARCH NETWORK (UWARN)	UWSC12068	—	10,297
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC10504	—	114,169
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC11415	—	7,061
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC12906	—	14,595
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC12998	—	41,961
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC13019	—	118,755
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC13697	—	29,752
93.855	UNIVERSITY OF WASHINGTON/FRED HUTCH CENTER FOR AIDS RESEARCH	UWSC13701	—	75,495
93.855	UNIVERSITY OF WASHINGTON/FREDD HUTCH CENTER FOR AIDS RESEARCH	UWSC12576	—	2,950
93.855	UNIVERSITY OF WASHINGTON/RED HUTCH CENTER FOR AIDS RESEARCH	UWSC13697	—	4,851
93.310	USING COVID-19 TESTING AND RISK COMMUNICATION STRATEGIES TO ACCELERATE STUDENTS RETURN TO SCHOOL	UWSC12885	—	195,186
93.310	USING COVID-19 TESTING AND RISK COMMUNICATION STRATEGIES TO ACCELERATE STUDENTS RETURN TO SCHOOL	UWSC13827	—	38,722
93.847	UW NUTRITION OBESITY RESEARCH CENTER	UWSC12076	—	58,425
93.847	UW NUTRITION OBESITY RESEARCH CENTER	UWSC13850	—	30,949
93.U22	VIRAL GENOME SEQUENCING AND OPEN-SOURCE SOFTWARE DEVELOPMENT TO SUPPORT GENETIC EPIDEMIOLOGY IN WASHINGTON STATE	UWSC12956	—	60,410
93.846	WELLSTONE MUSCULAR DYSTROPHY SPECIALIZED RESEARCH CENTER (SEATTLE)	AWOA	—	52,507
93.846	WELLSTONE MUSCULAR DYSTROPHY SPECIALIZED RESEARCH CENTER (SEATTLE)	UWSC10831	—	181,109
	UNIVERSITY OF WISCONSIN:			
12.420	COMPREHENSIVE LIQUID BIOMARKER FOR PREDICTING EARLY RESISTANCE TO ANDROGEN RECEPTOR SIGNALING INHIBITORS IN METASTATIC PROSTATE CANCER	000001467	—	27,830
93.855	MECHANISMS OF INFLUENZA TRANSMISSION BOTTLENECKS: IMPACT ON VIRAL EVOLUTION	726K003	—	4,831
	VAN ANDEL RESEARCH INSTITUTE:			
93.394	DETECTION AND PROGNOSIS OF EARLY-STAGE PANCREATIC CANCER BY INTERDEPENDENT PLASMA MARKERS	V544-CR1-1	—	16,525
	VANDERBILT UNIVERSITY MEDICAL CENTER:			
93.837	GENOME-WIDE ASSOCIATION STUDY OF CORONARY ARTERY DISEASES IN INDIVIDUALS OF AFRICAN ANCESTRY	VUMC99059	—	15,078
93.855	HIGH VS STANDARD DOSE FLU VACCINE IN ADULT STEM CELL TRANSPLANT RECIPIENTS	VUMC62664	—	(4,225)
	VIRGINIA COMMONWEALTH UNIVERSITY:			
93.855	DR. JEKYLL OR MR HYDE? THE DUALITY OF STREPTOCOCCUS SANGUINIS AS FRIEND AND FOE	FP00010217_SA001	—	21,169
	WAKE FOREST UNIVERSITY HEALTH SCIENCES:			
93.U23	WHI STUDY OF CLONAL HEMATOPOIESIS OF INDETERMINATE POTENTIAL AND THE RISK OF COGNITIVE DECLINE AND IMPAIRMENT IN OLDER WOMEN (WONDER)	WFUHS OS16-01903-330260-2	—	61,122

FRED HUTCHINSON CANCER CENTER
Schedule of Expenditures of Federal Awards
Year ended June 30, 2022

Federal CFDA or Grant	Pass-through Funds – Department of Health and Human Services and Other Federal Agencies	Passed-through entity or award identifying number	Passed-through to subrecipients	Expenditures
93.837	WASHINGTON STATE UNIVERSITY: CELL CYCLE PROTEINS AS KEY REGULATORS OF CARDIAC CHEMOSENSITIVITY	136924 SPC002649	\$ —	17,757
93.393	WASHINGTON UNIVERSITY IN SAINT LOUIS: OBESITY, SEDENTARY BEHAVIORS, AND DIET QUALITY FOR PREVENTION AND EARLY DETECTION OF EARLY-ONSET COLORECTAL NEOPLASIA	WU-22-0036	—	24,875
93.395	YALE UNIVERSITY: SUPPLEMENTS TO UM1 AWARDS FOR NCI'S EXPERIMENTAL THERAPEUTICS CLINICAL TRIALS NETWORK (ETCTN) TO SUPPORT BIOMARKER ASSAY AND PRECLINICAL EVIDENCE GENERATION FOR ETCTN STUDIES	CON-80003472(GR114157)	—	7,696
93.398	TRANSDISCIPLINARY RESEARCH IN ENERGETICS AND CANCER (TREC) TRAINING GRANT	CON-80003392(GR114619)	—	88,537
93.397	VICTORY EARLY CLINICAL TRIALS CONSORTIUM – ADMINISTRATIVE SUPPLEMENT	GR111711 (CON-80002827)	—	111,507
17.277	YWCA SEATTLE KING SNOHOMISH: NATIONAL DISLOCATED WORKER GRANT PROGRAM	NA	—	8,640
	Grant total - Pass-through Research and Development Funds		1,658,190	47,838,442
12	DEPARTMENT OF DEFENSE		—	
17	DEPARTMENT OF LABOR		—	386,665
47	NATIONAL SCIENCE FOUNDATION		—	8,640
93	DEPARTMENT OF HEALTH AND HUMAN SERVICES / NATIONAL INSTITUTES OF HEALTH		1,658,190	47,443,137
	Grant Total – Direct and Passthrough Research and Development Funds		\$ 199,622,373	568,691,540

See accompanying notes to schedule of expenditures of federal awards.

**FRED HUTCHINSON CANCER CENTER
UNIFORM GUIDANCE FOR FEDERAL AWARDS**

Notes to Schedule of Expenditures of Federal Awards

Year ended June 30, 2022

(1) Basis of Presentation

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of Fred Hutchinson Cancer Center (Fred Hutch) under programs of the federal government for the year ended June 30, 2022. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200 (2 CFR 200), *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of Fred Hutch, it is not intended to and does not present the complete consolidated statement of financial position, statement of activities, cash flows, or functional expenses of Fred Hutch.

(2) Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures or passed through to subrecipients in prior years. Fred Hutch has elected not to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

**FRED HUTCHINSON CANCER CENTER
UNIFORM GUIDANCE FOR FEDERAL AWARDS**

Schedule of Findings and Questioned Costs

Year ended June 30, 2022

(1) Summary of Auditors' Results

Financial Statements

Type of auditors' report issued: **Unmodified**

Internal control deficiencies over financial reporting disclosed by the audit of the consolidated financial statements:

- Material weaknesses: **No**
- Significant deficiencies: **None Reported**

Noncompliance material to the consolidated financial statements: **No**

Federal Awards

Internal control deficiencies over major programs disclosed by the audit:

- Material weaknesses: **No**
- Significant deficiencies: **No**

Type of report issued on compliance for major programs: **Unmodified**

Audit findings that are required to be reported in accordance with 2 CFR 200.516(a): **None**

Major program:

- Research and Development Cluster – various CFDA numbers
 - a. Dollar threshold used to distinguish between Type A and Type B programs: **\$3,000,000**
 - b. Auditee qualified as a low-risk auditee: **Yes**

(2) Findings Relating to the Financial Statements Reported in Accordance with Government Auditing Standards

None

(3) Findings and Questioned Costs Relating to Federal Awards

None