

To: Mr. Bill Gimson, Executive Director  
Cancer Prevention and Research Institute of Texas (CPRIT)  
211 E. 7th Street, Suite 300  
Austin, TX 78701

cc. Nobel Laureate Dr. Alfred Gilman Ph.D., Scientific Director of CPRIT  
Nobel Laureate Dr. Phillip A. Sharp, Ph.D., Head CPRIT Scientific  
Review Council  
Honorable Senator Jane Nelson, Chair of Texas Health and Human Services  
Committee  
Dr. Rebecca Garcia, Ph.D., CPRIT Chief Prevention Officer  
Nobel Laureate Dr. Johann Deisenhofer, PhD. Experimental Physics, Prof.  
Biochemistry at Southwestern Medical Center, Dallas  
Nobel Laureate Dr. Tsung-Dao Lee Professor of Physics Columbia Univ.  
Mr. Stephen Fluckiger Partner Dallas Jones Day (CPRIT event Sponsor)  
Dr. John Seffrin, CEO for American Cancer Society  
Dr. Leonard Lichtenfeld, MD, MACP, Deputy Chief Medical Officer for the  
National office of the American Cancer Society (ACS)  
Dr. James Willson, Ph.D. Vice Pres. Dallas Board ACS, Director of the  
Cancer Center at UT Southwestern Medical Center  
Dr. Larry Mundt, Dir. Strategic Philanthropy for American Cancer Society  
Dr. Donella Wilson, Coordinator of Research at American Cancer Society  
Dr. Dwight Randle, Ph.D, Komen Foundation Director of Grants  
Dr. Fritz Henn Ph.D. Associate Laboratory Director for Life Sciences  
at Brookhaven National laboratory  
Dr. Ralph James Ph.D. Associate Laboratory Director for  
Nonproliferation and National Security Department  
at Brookhaven National laboratory

Dear Mr. Gimson,

Thank you for your letter dated September 23, 2009. I am glad that you appreciated the point in my letter dated September 19, 2009 that you referred to as "an excellent point about evaluating projects for the potential to substantially reduce cancer deaths and to save lives at a lower cost per life saved compared to current costs. This is consistent with the legislative directive that CPRIT prioritize funding for programs that could lead to immediate or long-term...". I also note your comment: "I encourage you to take the opportunity to review the proposed rules and send recommendations that you have for change. Your comments will become part of the record and will be considered by the Oversight Committee when it adopts final rules."

I will do my best to satisfy your request and because you appreciated my first point to evaluate projects giving more importance to the ones that have higher potential to save more lives at a lower cost, I will continue to provide comments that should improve achieving those results. However, I could only dedicate a few hours to edit these comments before the dead-line of September 28, 2009, because I just returned last night from presenting the seminar-debate about my innovations to the experts in the field of physics, medicine, biology and medical imaging at Brookhaven National Laboratory (New York) and I am leaving for Europe tomorrow morning for another "summit" on my 3D-CBS innovative technology for early cancer detection that will be

discussed among scientists (with open participation via web broadcasted from the conference room of the Scientific Director of the hospital) at a University-Hospital. I just received last night from BNL Associate Director Ralph James a note of appreciation for my seminar-discussion, with good considerations because they value my innovation.

Following are my comments on the rules mentioned in your letter that you sent as an attachment (referred to in this document as "**Grant Rules**" in blue). However, there are also comments on the RFA R-10-I1 (referred to in this document as "**RFA Rules**" in red). This is because, as specified in lines 15-17 of "**Grant Rules**", the conjunction of the two sets of rules "**establish the parameters that all successful grant applicants must follow.**" Despite my limited time available, I hope to make a useful contribution as you requested for achieving the maximum reduction of premature cancer deaths at a lower cost per each life saved compared to current costs.

In blue font with line numbers to the left is the original Request for Public Comments on CPRIT's Proposed Rules Regarding Grants (referred as "**Grant Rules**").

In red font with line numbers to the left is the original Request For Application RFA R-10-I1 by CPRIT (referred to as "**RFA Rules**").

The corrections in black "new courier font" in between \*\*\*> insertion <\*\*\* are aimed to solve the calamity of premature cancer death. This is achieved by writing it: in the mission statement, in the goals, in the objective, in the Executive Summary, in the Request for Applications, and in the task to a reviewer who should identify what will best reduce cancer death.

Everywhere taxpayer money needs to be justified and spent in that effort and not used to create a market that does not solve the problem as has occurred over the past half century.

I hope that you will read this carefully and see how the paradigm of the goal of this RFA has been changed to benefit directly, immediately, cancer patients and the taxpayer.

If everyone will focus on making efforts toward solutions that substantially reduce cancer death, the goal will be reached; if money is just spent to gain knowledge by doing research, the cancer calamity will never be solved and more money will be justified to be spent without solving the problem.

## Section 1. Grant Rules

1 Request for Public Comments

2 CPRIT's Proposed Rules Regarding Grants for Cancer Prevention  
3 and Research

4

5 At its August 14th meeting, the Oversight Committee of the Cancer Prevention and  
6 Research Institute of Texas (CPRIT) approved a proposed set of rules to govern the  
7 process for awarding CPRIT grants. The attached set of proposed rules, "Grants for  
8 Cancer Prevention and Research," will be published in the August 28th edition of the  
9 Texas Register. The proposed rules cover all aspects of the CPRIT grant process,  
10 including topics such as the content of the Institute's request for applications, the peer  
11 review process, and awarding grants by contracts.

12

13 These proposed rules clarify the agency's statutory mandates and provide  
14 additional guidance regarding issues that may not be specifically addressed by the  
15 statute. In conjunction with the information provided in the formal request for  
16 applications, the final rules will establish the parameters that all successful grant  
17 applicants must follow.

18

19 CPRIT's goal is to create a grant process that identifies and awards the most  
20 innovative and creative projects representing the best science and prevention programs.  
21 At the same time, CPRIT is mindful that the Institute serves as the steward for the  
22 investment that Texas will make in these programs.

23

24 The public is invited to review the proposed rules and submit comments to CPRIT  
25 regarding the procedures and standards that will be implemented by the Institute. The  
26 most helpful comments will provide specific guidance on the areas discussed, including  
27 best practices that have been used elsewhere. If the proposed rules present barriers to  
28 identifying and awarding groundbreaking science, please point out the provisions and  
29 recommend changes. To the extent possible, address comments to specific rule  
30 provisions.

31

32 CPRIT will review all written comments and, if necessary, make changes to the  
33 proposed rules based upon the information received. At the conclusion of the public  
34 comment period, the Oversight Committee will consider a final order to officially adopt  
35 the rules. The final order will contain a summary of all comments received on the  
36 proposed rules.

37

38 Written comments should be submitted to Kristen Pauling Doyle, CPRIT General  
39 Counsel, on or before 5:00 p.m. on September 28, 2009. The comments will become  
40 part of the formal rulemaking record and provide guidance in crafting a final set of  
41 rules on CPRIT's grant process. The comments may be faxed (512/475-2563), sent by  
42 email (kdoyle@cpriti.state.tx.us) or mailed to the Cancer Prevention and Research  
43 Institute of Texas, P.O. Box 12097, Austin, Texas, 78711.

44

45

46 25 TAC 703.1 - 703.15

47 GRANTS FOR CANCER RESEARCH AND PREVENTION

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49 703.1. Purpose and Application.

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51 (a) Grants awarded by the Institute shall:

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\*\*\*&gt;

- Identify and fund innovations and projects that demonstrate having higher potential with respect to others to substantially reduce premature cancer death and save lives at a lower cost per life saved compared to current costs <\*\*\*

53 (1) Create and expedite innovation in the area of cancer research and enhance the

54 potential for medical or scientific breakthrough in the prevention of cancer

55 and cures for cancer;

56

57 (2) Attract, create, or expand research capabilities of public or private

58 institutions of higher education and other public or private entities that will

59 promote a substantial increase \*\*\*&gt;in saving lives from premature death from cancer at a lower cost per life saved through &lt;\*\*\*

60 in cancer research and in the creation of high-quality new jobs in Texas; and

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62 (3) Develop and implement the Texas Cancer Plan.

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64 (b) This chapter applies to all grant proposals considered by the Institute for initial

65 funding on or after September 1, 2009.

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\*\*\*&gt; I. INTRODUCTION

Before addressing the Definitions of the words and terms used in the "Grant Rules" and in the "RFA rules", I am providing some background information about issues that, had they been resolved, would have opened the door to my innovation that could have saved many lives from premature cancer death through early detection. The background information facilitates understanding the need for a change in the rules.

During a short conversation at the end of the meeting of the Technology Business Council on August 26, 2009 at the Dallas Adolphus Hotel, Mr. Bill Gimson and CPRIT Board Member Cindy Brinker Simmons agreed that because CPRIT has the unique possibility to put together what was referred to repeatedly during Mr. Gimson's speech as a "great" team of "superb" peer reviewers, they should provide a service to taxpayers regarding which are the best projects that will substantially reduce cancer death at a lower cost per life saved with respect to current costs and provide scientific arguments comparing one

proposal with another with quantitative data on the amount of possible reduction in cancer deaths and how solid are applicant's claims.

There is no intent to put pressure on CPRIT to change their policy in assigning funds, if they do not intend to change their policy. However, it is extremely important to present to taxpayers and to cancer patients a consistent, honest picture of the true goal of CPRIT and not mislead them, or worse, damage the image of real breakthrough innovations that will benefit cancer patients by making them believe that because individual projects were not selected by the great CPRIT team of superb reviewers led by Nobel Laureates, they are not worthwhile.

**What makes a rejection by a review panel of value is not the titles of reviewers but their scientific arguments supporting their rejection claims and their pointing out other specific superior solutions.** For example, I had a Nobel Laureate with Ph.D. in Experimental Physics and in Biochemistry (the two specific fields of my innovation) who honestly told me that he was not competent to evaluate my innovation. An honest, professional scientist who rejects a project should always be able to provide scientific arguments supporting his rejection and point out specific superior solutions. Otherwise his incompetence is disclosed even if not admitted. Unfortunately, by not providing scientific arguments rejecting new ideas, innovations that could have saved many lives, many times are blocked for many years before providing benefits to mankind.

In Mr. Gimson's letter dated September 23, 2009 as well as during the conversation with Dr. Gilman at the Dallas event on August 26, 2009, it was claimed that it would be impossible to permit interaction between applicants and reviewers, to organize presentations, for the purpose of understanding the innovations which are of the most benefit to the patient, to study and consider the details. The main justification is that 500 or 1000 applications will be too many for 200 or more reviewers to deal with individually.

I would say that for problems less important to mankind a solution was found, and I am sure that a solution could be found also to allow thorough evaluation of all innovations that have the potential to solve a problem that affects over 40% of the world population, kills prematurely over 7 million people annually in the world, and costs the U.S. over \$220 billion/year.

For example, other problems of giving auditioning thousands of candidates for American Idol, or the selection of one athlete at the Olympics among millions of athletes in the world has been solved. Furthermore, there are very precise and objective criteria to judge a candidate who performs in ice-skating or gymnastic free dance (some points for two "pirouettes", more for three, more points for a good landing after a jump, etc.). Not much is left to the free opinion of a judge, as they must score according to well known criteria. Even in the case of former House Majority Leader Tom Delay, in the show "Dancing With the Stars," not much is left to personal opinion of a judge (who might want to give him a high score for his popularity) where he has a set of rules for assigning points.

In all these cases there are well known criteria to assign a score even if there is no strict reference point. It seems absurd that in the event of science where there is instead a reference point which is **"the result of the experiment,"** (which can be verified any time if funding to obtain experimental results is provided) it seems that the overall structure of the CPRIT "Grant Rules" and "RFA Rules" do not refer to scientific unquestionable result measurements (such as the one I suggested in the Section "measuring results" at lines 247-248 of the "RFA Rules" (in red)). A lot of room seems left to the free interpretation by the reviewer while instead the reviewer should just make sure that laws of nature are followed.

What is claimed to be impossible, such as the interaction between reviewers and applicants can be solved in one of two ways. Either organize a selection process similar to the Olympics, to ice-skating, to a competition for science projects in high school where everyone has the opportunity for an audition, or, just take the applicants who estimate (and support their estimate with solid scientific arguments) a reduction of premature cancer death above 10% and investigate in depth those few. It is not unfair to the others, because the goal is clear - innovations and projects that demonstrate having higher potential with respect to others to substantially reduce premature cancer death and save lives at a lower cost per life saved compared to current costs - and, the others did not have an idea or innovation to qualify for it, so they disqualified themselves for that procedure. It would not be expected that all 500 can claim over 10% reduction in premature cancer death. If that were to happen, we should all consider ourselves not very intelligent because we had for many years hundreds of cancer solutions and we did not implement them. Realistically, only a few could make that claim and those could be given higher scrutiny.

If there really is a solution to cancer, would it be justified to ignore it because no decision maker in the field, nor institution that has \$3 billion allocated to solve that problem does not have the time to look into the solution?

With such a prestigious CPRIT Scientific Review Council, it is time that taxpayers and cancer patients receive a competent scientific answer about my innovations and claims that started 17 years ago at the Superconducting Super Collider for High Energy Physics applications and evolved toward medical imaging applications for early detection of cancer.

One would imagine that the power of CPRIT with a \$3 Billion budget, two Nobel Laureates, and a superb peer review team of over 200 scientists would have the prestige and credentials to gain the attention and service from the directors of the largest world laboratories such as Brookhaven, Fermilab, CERN, etc.

It is time to receive pertinent scientific answers from competent scientists. Instead, still today, after 17 years, I receive the answer from those who attempt to review my innovations, "I am incompetent in that field". It is difficult even for Directors of National Labs or Nobel Laureates to provide the names of a few competent scientists. Would CPRIT be able to provide the names of some competent scientists in the field who would agree

to discuss the issue, and, if they do not have scientific arguments to invalidate my claims, why continue to delay the benefits to the patient?

First and foremost, people who are expecting a pertinent scientific answer from competent scientists are the over 7,000 cancer patients, their friends, physicians, professionals, etc. who signed a petition to request a scientific review of my innovation to improve over 400 times the efficiency of current molecular imaging devices (PET).

Next, there is Texas State Senator Jane Nelson, Chair of Texas Health and Human Services Committee, who worked on the legislation for the CPRIT \$3 Billion project. I have known Senator Nelson for 11 years. She and her family visited my home town in Italy five times for a cultural exchange program in order to create through dialogue a better understanding and cooperation among people around the world. During the cultural exchange, in July 2000, I gave her my technical scientific book "*400+ times improved PET efficiency for lower-dose radiation, lower-cost cancer screening*" and she promised not favoritism, but that my innovation would go before competent people to be fully studied and to receive either scientifically supported reasons that would invalidate my claims or support them to achieve the goal of CPRIT that she indicated coinciding with mine of reducing cancer deaths. During the preparation of that legislation, I asked her how I could provide input into the wording and requirements of the Legislative Bill. Unfortunately at that time there were no requests for comments as is happening now for the "Rules Regarding CPRIT Grants". Her response was that I should wait until it was passed and then I would have an opportunity to give my input. However, by that time, the requirement for matching funds was already law and there was no opportunity for change. Now, if it cannot be changed, at least CPRIT should be honest with taxpayers, not misleading them by making them believe that CPRIT is funding the best out of all possible projects with the highest potential to reduce cancer death at the lowest cost. Since the current RFA does not even require applicants to estimate premature cancer death reduction in their proposal (Section 4), it does not foresee a procedure to measure results from experimental tests (Section 9.3.4) and requires matching funds, cutting off all innovations that do not have \$4 million from a sponsor. Where are the sponsors who have created a "great" team of "superb" peer reviewers to whom an inventor can submit a proposal in order to get the first \$4 million that will qualify for the additional \$4 million from CPRIT?

The next step was to engage with CPRIT. Senator Nelson arranged for me to speak to Mr. Bill Gimson. However, he had to take back his promise made during our May 21, 2009 meeting of arranging a meeting in June/July with CPRIT Scientific Director Dr. Alfred Gilman. Later on August 26, 2009, I spoke to Dr. Gilman at the Technology Business Council and he told me he feels incompetent in the specific field of my innovations for early cancer detection. When I asked him to let me know who is competent he could not provide a name. At the end of this Section is the detailed answer from Dr. Gilman that he provided.

Next there is Steve Fluckiger, from Jones Day, one of the supporters of CPRIT, also a supporter of the last event at the Adolphous. I have known Fluckiger for 14 years. He invited me to life science forums in Dallas

several times. He spent the entire day on July 1, 2003 at my lab to assist in the scientific review of my 3D-CBS innovative technology with experts in the field (oncologists, physicists, engineers, including one of the co-inventors of the pocket calculator). The video and final report are available at [http://www.youtube.com/watch?v=vMgQ1oMX8ao&feature=player\\_embedded](http://www.youtube.com/watch?v=vMgQ1oMX8ao&feature=player_embedded) and <http://www.crosettofoundation.com/uploads/101.pdf>. Fluckiger was impressed by the technology, and by the professional, in depth discussions among the experts. He also spent hours and hours over the past years helping edit documents clearly explaining the issue to decision makers in the field. But although the explanation was clear, most likely it was never read by the people who decide assignment of funding, or they simply read but did not care to ask questions about aspects not clear to them in order to understand the innovation.

The demonstration, the description of my innovation is so clear that it can be understood by non specialists in the field once I get the attention of the interlocutor for a few minutes and have the opportunity to answer questions. It has been verified also with high school students in an analogy available at (<http://www.youtube.com/watch?v=O45IE5jwQXQ>) and by university students as seen on video from the last two exhibitions of my project in Padua and at the University of Pavia. If I have the attention of the interlocutor and if questions are asked, it is almost certain that my innovation is understood. However, such direct communication can happen with students, but not with CPRIT reviewers because it is forbidden by the current CPRIT policies.

Over the years, I passed many scientific reviews, starting with the major one at FERMilab on December 14, 1993 requested by the Director of the SSC, also Director of FERMilab because of which I received all available funds during the SSC close-out (\$150,000, insufficient to develop the idea and the application), to the one in 2003, to the one in 2008, to several additional meetings.

It was suggested that I present to industries and that was done. There is no blame to me if my innovations that could have already saved many millions of lives, has not received funding. The President and Vice President of Siemens Nuclear Medicine came to my lab on November 6, 2002 for an entire day to discuss my innovations that would improve considerably the efficiency of their PET. At that meeting they denied it possible, stating and restating that they knew everything already (everything was recorded with the consensus of the participants). They had built already 31 prototypes and it was impossible to obtain substantial improvement in efficiency as I claimed. However, all that was said had to be recanted by them because experimental results done by them 5 years later proved their original conclusion wrong and my claims right. Now instead of making little steps in advances as Siemens did, if **ALL** my innovations would be built at once, it would be possible to reduce considerably the radiation to the patient and achieve early detection that is what saves lives.

It was also suggested that I present to cancer organizations. I did that at the headquarters of Susan Komen Foundation. Two of their top scientists who attended my presentation at Komen made great comments about my

innovation. They were enthusiastic and assured me they would get back with me after talking to management. Everything was recorded. However, a few hours later I was told that early cancer detection for the entire body was not their business. I also contacted Lance Armstrong Foundation, but never received a reply to our letters. One of my collaborators corresponded with J. Leonard Lichtenfeld, MD, MACP Deputy Chief Medical Officer for the national office of the American Cancer Society, and I talked to Larry Mundt, Director of Strategic Philanthropy of the American Cancer Society (ACS) at the CPRIT meeting in Dallas and later on September 8 on the phone. Although my activity would fulfill the mission of ACS, Mundt told me that they do not have any department working on or even interested to fund the development of any device for cancer screening. When I suggested that because early detection is a direction of research that can fulfill the ACS mission it would be important to consider creating such a department at ACS, Mundt advised me to contact ACS CEO John Seffrin, the Board of Directors and Donella Willson coordinator of research. My several attempts to contact them did not receive a reply (we also sent them a copy of 5,000 signatures of the petition requesting a public scientific review).

The list of people in a position of decision making who were contacted and who said they were incompetent and did not know anyone competent is very long, while the ones who could understand my innovation, were not in the position to be a decision maker and my innovations never received funding.

On August 23, 2008 I was invited to give a presentation at the "Seminar for Planetary Emergencies" in Erice, Italy at which were Nobel Laureates (Dr. Tsung-Dao Lee for one) and reputed top scientists such as Dr. Richard Garwin. My seminar triggered an interesting discussion to grant extra time for consideration. The discussion followed with emails for a few months with Richard Garwin, copied to several other scientists (including a former Scientific Director at CERN) filling many pages of documents. At first Garwin declared himself competent in the field, but as we moved on he began saying he was not competent stating at the end that in many cases cancer goes away by itself, and intervention may only cost unnecessary procedures and anxiety and referred me to an article of November 24, 2008 in *The New York Times* by Gina Kolata, by the title: "Study Suggests Some Cancers May Go Away" who stated the same ([http://www.nytimes.com/2008/11/25/health/25breast.html?\\_r=1&pagewanted=2](http://www.nytimes.com/2008/11/25/health/25breast.html?_r=1&pagewanted=2)). This is a very poor conclusion for addressing a problem. If Garwin and Kolata's theory has some scientific or logical merit, then why is cancer costing the U.S. alone \$220 Billion/year if what should be done is just "wait because it will go away by itself"? Would they claim that all that money is spent in useless procedures? No matter what their theory, my valid point is that if we spend some money for cancer (in this case \$3 Billion) we should spend it in improving the efficiency of PET by over 400 times as my innovation makes possible at a lower cost compared to current costs. Preferring instrumentation hundreds of times less efficient requiring administering high radiation to the patient and providing poor information to the physician just does not make sense.

Because cancer patients have a lot of trust in Nobel Laureates, people ask me for their opinion. I asked Dr. Tsung-Dao Lee, professor of Physics at

Columbia University, who attended my seminar in Erice, and received my Erice article (<http://www.crosettofoundation.com/uploads/211.pdf>), but his secretary told me that he felt he was incompetent. Another friend of cancer patients who knew Nobel Laureate Johann Deisenhofer at Southwestern Medical Center insisted I talk to him because he has all the expertise in the field of my project since he is an experimental physicist and a biochemist. On July 31 I met Dr. Deisenhofer in his office. I began discussing with him the innovation for capturing and identifying more efficiently specific particles from radiation and the effect of efficiently detecting the very first cancer cell mutations. However, he admitted not knowing what a trigger in High Energy Physics is and being incompetent in this specific field. At my question if he knew someone competent at that time, he could not think of any. I hope he will still provide some names.

Throughout, Senator Nelson kept me informed about the initiative of CPRIT. I participated in the support campaign in November 2007. She kept me informed of its creation because she knew of my efforts for ten years in this field, and was able to get me before the CPRIT panel on February 20, 2009 to whom I gave a short speech and some documentation (a letter with attachments, see copy at <http://www.crosettofoundation.com/uploads/290.pdf> and <http://www.crosettofoundation.com/uploads/309.pdf>), but I never received a reply.

I inquired several times to no avail. Finally it was possible to have a meeting with the newly appointed CPRIT CEO Bill Gimson on May 21, 2009 and I went to the meeting in Austin with my collaborator Ms. Margaret Bentley (see letters to Gimson and Gilman dated May 21, 2009 at <http://www.crosettofoundation.com/uploads/313.pdf> and <http://www.crosettofoundation.com/uploads/314.pdf>). During the over one hour conversation, Mr. Gimson found the innovative project interesting, worthy of consideration and he promised to arrange a meeting with the newly appointed Scientific Director Alfred Gilman. However, in subsequent phone conversations (when I called from Italy on June 14 and from my office in DeSoto with a representative of cancer patients Judith Prister on July 16) Gimson recanted his promise to organize a meeting with Gilman. He also promised to answer Prister's letter and all past letters but to date no answers have been received (see letter from cancer representative Judith Prister at <http://www.crosettofoundation.com/uploads/308.pdf>).

Finally I had the opportunity to participate at the Technology Business Council at the Adolphus Hotel on August 26, 2009. I asked the questions at the end of this Section and got a partial answer from Gimson and Gilman that I report below. Some of these issues have been addressed in Mr. Gimson letter dated September 23, 2009 and I am now looking forward to address the issue of the criteria that are preventing a breakthrough technology to qualify a priori for consideration for a CPRIT grant.

I trust that Mr. Gimson will answer point-to-point all issues that are an obstacle to receive from CPRIT reviewers scientific arguments to invalidate my claims that with my innovative technology we can achieve a substantial reduction in premature cancer death at a lower cost for each life saved. In the event no scientific arguments can be provided by CPRIT reviewers, we all

expect funding would be made available. The literature of my 3D-CBS innovation is publicly available on the web. I make myself available to spend extra time to address it face-to-face with any reviewer or specialist.

The first obstacle that needs to be removed is the block to progress and opening the door to free open discussion in science. Science and innovations targeted to solve a problem causing the premature death of over 7 million people in the world every year is not an issue that should be discussed behind closed doors. It is instead urgent to address my claims openly in a scientific forum for the free exchange of ideas where all experts have the opportunity to counter them.

Because no one could invalidate them and during these past ten years, third parties (e.g. Siemens) recanted what they stated in 2002 and what I claimed is shown possible and feasible, instead of implementing them in small steps, the discussion will facilitate understanding, approval and funding the implementation of ALL of them at once. This will allow a giant leap in saving lives from premature cancer death through early detection. To this goal I would like to inform you about the event in the next twelve days.

II. In the next days there are two events occurring of which you should be aware.

1. A meeting with experts in the field at Brookhaven National Laboratory in the Medical Department (and with the participation of physicists because my innovation relates to particle detection). The issue is that BNL Associate Director Ralph James who knew about my innovations since 2003 when I presented to the IEEE-NSS-MIC conference in Portland, OR in 2003, has looked for a BNL reviewer for the first (<http://www.crosettofoundation.com/uploads/291.pdf>) of my innovations in this field (there are several innovations in addition to be addressed). After about 20 days he found a scientist who provided comments that clearly show him to be incompetent to do the review, as he himself admitted in his statement. Ralph then solicited organizing a presentation by me at the BNL Medical Department. The seminar-debate took place on September 24, 2009, the 3D-CBS innovation was appreciated, no one could invalidate my claims with scientific arguments, on the contrary are believe that funding should be provided. (The entire seminar-debate was recorded with the consensus of the participants and my explanation could benefit other skeptical reviewers so that the benefits to the patients hopefully would not be blocked for much longer).
2. The second event at the University of Pavia, Italy before scientists and the President of Medical Physics of Italy who published a 21 page article with the President of Nuclear Medicine. The issue to be discussed is the content of that article ([http://www.aimn.it/pubblicazioni/notiziario\\_online/notiziario\\_052\\_096.pdf](http://www.aimn.it/pubblicazioni/notiziario_online/notiziario_052_096.pdf), translation of such document will be made available at [www.crosettofoundation.org/uploads/288.pdf](http://www.crosettofoundation.org/uploads/288.pdf)) that has not understood the paradigm change of the 3D-CBS innovative technology and the direction in cancer research that they present that needs to be changed in order

to obtain some results in reduction of premature cancer death. The first idea that stands out from the authors of this article is that efficiency of current PET should not be increased very much as I proposed because in their opinion it would create too many false positives and false negatives. Therefore, before discussing the detail of my innovations, we need to discuss the direction of research to open the door to progress.

Because CPRIT has the mandate from the Legislature using taxpayer dollars to improve health care in alleviating suffering and reducing cancer death, it would be very important if some of your experts would participate in these two events that are influential in decision making in Italy and in the U.S.

What allows advancement in the field is addressing thoroughly the issues. To this end I provide next the answers I have received and the ones missing.

### III. INCOMPLETE ANSWERS AND PENDING QUESTIONS SUBMITTED IN THE PAST TO CPRIT

Following I summarize my previous questions and cancer patients' questions to CPRIT and the incomplete answers we have received at that meeting (**I am very grateful for the additional answers to clarify some of the issues that were provided by Mr. Gimson in his letter dated September 23, 2009.** We all trust that continuing this dialogue will help to achieve our common goal to have the maximum impact in reducing premature cancer death):

Questions asked at the Technical Business Council on August 26, 2009 at the Adolphus Hotel, a copy of which has been hand delivered to Mr. Bill Gimson and Dr. Alfred Gilman (see [www.crosettofoundation.org/uploads/312.pdf](http://www.crosettofoundation.org/uploads/312.pdf))

1. Is the mission of the Cancer Prevention and Research institute of Texas
  - a) to provide grants to promote open science to foster progress and business for the benefit of mankind through a public scientific evaluation of solutions that will save more lives from premature cancer death at a lower cost per life saved, similar to the US Patent system that affords protection for an idea in exchange for the public disclosure of the idea, or,
  - b) to provide grants to promote business based on secret solutions such as the formula for coca-cola or an algorithm for leveraging "Hedge Funds"?
2. Many cancer patients and friends want to see a true competition among ALL solutions that save more lives from premature cancer death at a lower cost per life saved.
  - a) If reviewers cannot invalidate with scientific arguments the superiority of a solution for those goals, but the applicant does not qualify by other criteria such as having matching funds, will the superior solution be ignored and a solution with less merit be preferred?
  - b) In that case, will the reviewers state that they could not find scientific arguments to invalidate an applicant's claims so that people who have the cause of substantially reducing cancer death at heart and are willing to fund such a project are not led to believe

that the project not selected would provide lower benefits with respect to others?

c) If CPRIT reviewers believe otherwise, will they provide the names of the ones who they believe to be superior in saving lives, and why?

Answer from Mr. Bill Gimson at the meeting before the audience:

"There are a lot of questions embedded in that statement.

- Number 1. We will invest in preventive research to take the best science and pick the best provisional activity that we can
- Number 2. There is a match requirement in the law, so that is a requirement that is legislation demanding. Now I pass the word to Dr. Gilman if he wants to add something."

Dr. Gilman's statement was:

"I just say that our review committees don't look like typical NIH review committees. Our reviewers are very knowledgeable, very talent people. Our review investigators are encouraged to fund innovative exciting important work. Importance and significance of the work is the first criteria, not the preliminary data."

I was told by cancer patients that these answers provided in public at the meeting do not fully address the question, so we expect further in depth explanations.

During the intermission, I asked Dr. Gilman if there will be a feedback from the reviewers supporting their statements with scientific argument and the answer was:

"No, they will just fill out a questionnaire with a predefined template asking to indicate strengths and weaknesses, but are not going to spend a five page entry for a review."

To the other question if there will be the possibility for the applicant to interact with the reviewer, the answer was:

"No, it is impossible. We cannot do this".

The reason for such a question is because, as it occurred just in the last review by a scientist appointed by the Associate Director of Brookhaven National Laboratory, by knowing the reviewer's judgment, I could point out that my system was not FIFO-like (not even close to it) and with those words I understood that the reviewer didn't have the slightest idea of what I was talking about. Thus he was incompetent (as he also admitted). Interaction with reviewers has in the past allowed them to understand my innovation for what it is and not for what they think it is.

Although some of the issues have been addressed in Mr. Gimson's letter dated September 23, 2009, I summarize all letter here in order to facilitate their search:

February 20, 2009: [www.crosettofoundation.com/uploads/290.pdf](http://www.crosettofoundation.com/uploads/290.pdf),

[www.crosettofoundation.com/uploads/309.pdf](http://www.crosettofoundation.com/uploads/309.pdf)

May 21, 2009: [www.crosettofoundation.com/uploads/313.pdf](http://www.crosettofoundation.com/uploads/313.pdf) ,  
[www.crosettofoundation.com/uploads/314.pdf](http://www.crosettofoundation.com/uploads/314.pdf)

July 15, 2009: [www.crosettofoundation.com/uploads/308.pdf](http://www.crosettofoundation.com/uploads/308.pdf)

August 26, 2009: [www.crosettofoundation.com/uploads/312.pdf](http://www.crosettofoundation.com/uploads/312.pdf)

<\*\*\*

67

68 703.2. Definitions.

69 The following words and terms, when used in this chapter, shall have the following  
70 meanings, unless the context clearly indicates otherwise.

71

72 (1) Applicant -- the public or private institution of higher education, academic health  
73 institution, university, government organization, non-governmental organization,  
74 other public entity, private company, or individual that submits an application to  
75 the Institute for a grant funded by the Cancer Prevention and Research Fund.  
76 Unless otherwise indicated, this term includes the principal investigator.

77

78 (2) Authorized expenses - items including honoraria, salaries and benefits,  
79 consumable supplies, other operating expenses, contracted research and  
80 development, capital equipment, construction or renovation of state or private  
81 facilities, travel, and conference fees and expenses, except as otherwise provided  
82 by this chapter.

83

84 (3) Cancer Prevention and Research Fund -- the dedicated account in the general  
85 revenue fund consisting of patent, royalty, and license fees and other income  
86 received under a contract with a grant recipient, legislative appropriations, gifts,  
87 grants, and other donations, and earned interest.

88

89 (4) Cancer prevention and control program -- a program designed to mitigate the  
90 incidence of all types of cancer in humans \*\*\*>Primary prevention is referred to for  
example: "lifestyle, diet, physical activity, etc. and Secondary prevention is  
referred to "early detection through screening of asymptomatic people<\*\*\* .

91

92 (5) Cancer research -- research into the causes and cures for all types of cancer in  
93 humans, including translational research, to develop therapies, protocols, medical  
94 pharmaceuticals, or procedures for the cure or substantial mitigation of all types  
95 of cancer in humans, \*\*\*>the study of the signals that can be extracted from  
the mutation of normal cells into cancerous cells in order to identify  
the ones that provide the best and most reliable information for early  
cancer detection<\*\*\*.

96

97 (6) Chief Prevention Officer -- the individual employed by the Institute to oversee  
98 the scientific and program review and evaluation of the grant applications for

99 cancer prevention activities.

100

101 (7) Chief Scientific Officer -- the individual employed by the Institute to oversee the  
102 scientific review and evaluation of the grant applications for cancer research  
103 activities.

104

105 (8) Encumbered funds -- funds that are designated by a recipient for a specific  
106 purpose.

107

108 (9) Indirect costs -- the expenses of doing business that are not readily identified  
109 with a particular grant, contract, project, function, or activity, but are necessary  
110 for the general operation of the organization or the performance of the  
111 organization's activities.

112

113 (10) Prevention Review Council -- the group of individuals designated as chairs of the  
114 prevention program committees created to review cancer prevention program  
115 applications.

116

117 (11) Recipient -- the public or private institution of higher education, academic health  
118 institution, university, government organization, non-governmental organization,  
119 other public entity, private company, or individual that is awarded a grant funded  
120 by the Cancer Prevention and Research Fund.

121

122 (12) Scientific research and prevention program committee -- one or more groups of  
123 experts in the field of cancer research and prevention appointed by the Executive  
124 Director and approved by the Oversight Committee for the purpose of reviewing  
125 grant applications and \*\*\*>providing<\*\*\* ~~making recommendations~~ to the Executive Director  
126 \*\*\*>scientific arguments in support or in rejection of applicant's  
claimed estimated figures in the 5 points (in particular for point 2)  
described in the Significance of the Application in lines 222-226 and in  
lines 66-70 of the "RFA Rules" which are also reported here.

For all types of applications, applicants should explain how their research benefits cancer patients by answering the following questions in relation to their proposed solution:

1. What is your estimated percentage of lives saved annually from premature death (younger than 75 years of age)?
2. What are the scientific arguments supporting your claimed estimate at point 1?
3. What is the cost per life saved compared to current costs?
4. How much does your project cost?
5. When will we see the first results you estimated?

It is the responsibility of the reviewer not to reject innovations that can benefit mankind if:

1. The potential impact in reducing premature cancer death at a lower cost per each life saved claimed by the applicant is higher than other proposals.
2. The reviewer or decision maker cannot provide scientific arguments to invalidate applicant's claims
3. The reviewer or decision maker declares himself/herself incompetent in the specific field
4. The applicant demonstrates that the reviewer's judgment was not scientifically correct or that he/she was incompetent in the field<\*\*\*

~~regarding the award of cancer research and prevention grants.~~ For purposes of 127 this chapter, the Scientific Review Council and the Prevention Review Council are 128 scientific research and prevention program committees. This term shares the 129 same meaning as "peer review group" and "scientific review group" as defined in 130 702.3(18) of this title (relating to Definitions).

131

132 (13) Scientific Review Council -- the group of individuals designated as chairs of the 133 scientific research and prevention program committees created to review cancer 134 research applications.

135

136

137 703.3. Grant Applications.

138

139 (a) The Institute will accept grant applications for cancer research and prevention 140 programs to be funded by the Cancer Prevention and Research Fund in response to 141 standard format requests for applications that will be publicly issued by the 142 Institute at least annually \*\*\*>Because it was specified in lines 15-17 of "Grant 143 Rules" that the conjunction of "Grant Rules" and "RFA Rules", "establish the 144 parameters that all successful grant applicants must follow," comments are provided to both 145 (See Section in red: "RFA Rules". The requests for applications will be announced and 146 available through a web-based electronic system managed by the Institute.

144

145 (b) The Institute reserves the right to modify the format and content requirements 146 for the requests for applications at any time \*\*\*>in order to improve the return to 147 taxpayers, maximum number of lives saved from premature cancer death at a 148 lower cost per life saved compared to current costs.<\*\*\* Notice of the 149 modification will be

147 announced through a web-based electronic system.

148

149 (c) Cancer research grant applications may address, but are not limited to, the 150 following areas:

151

152 (1) Short-term, high-impact programs;

153

\*\*\*>

**PROGRAM 1 - Short-term return (< 10 years) open review (\$1.5 Billion budget):**

Because taxpayer money is used for the development of projects to the benefit of taxpayers, higher priority should be given to applicants who agree to disclose their solution openly to the public (the public is their employer) and to submit their solution to a public review where all solutions are compared. Only the best proposals that stand out due to solid answers to the questions at line 66-70 to which reviewers cannot invalidate or provide objections supported by scientific argument will be funded. The applicant should disclose his/her solution in scientific articles, documents or on the web. Because this program will create competition openly for the best "solution" to reduce cancer death at a lower cost per life saved, \$1.5 Billion of the total \$3 Billion CPRIT ten year budget will be reserved for this program. (CPRIT may decide a different share among the four programs). The review criteria for this program should privilege the proposal with the best solution that can provide the highest reduction of cancer death in the shortest time (anyway it must be shorter than 10 years and the shortest gets a higher score) at the lower cost per life saved. The initial development cost is proportional to the number of lives saved. The higher the potential number of lives saved the higher initial development cost that can be justified.

**PROGRAM 2 - Long-term return (> 10 years) open review (\$500 million budget):**

In order not to penalize long-term return open reviewed proposals, \$500 million out of \$3 Billion for the ten year CPRIT budget will be put aside for this program.

As exists in other fields of fundamental research that is funded with taxpayer money (for example in High Energy Physics at FERMIlab or at CERN, Geneva, where the return on investment to society is typically 35 years) a fund of about \$500 million is put aside (out of the \$3 Billion CPRIT ten year program) for fundamental research in this field. However, the applicant still has to demonstrate how his/her effort in advancing knowledge in the field is related to saving lives from premature cancer death even if his/her estimate for a return is decades from now.

Higher priority should be given to applicants who agree to disclose their solution openly to the public through scientific articles, publications or the web (the public is their employer) and to submit their solution to a public review where all different solutions are compared.

**PROGRAM 3 - Short-term return (< 10 years) secretive (\$250 million budget):**

In order not to penalize short-term return secretive reviewed proposals, \$250 million out of \$3 Billion for the ten years CPRIT budget will be put aside for this program.

The applicant who wants to keep his/her solution secretive, clearly has intentions different (business as first priority even if it is not stated) from that of serving the cause of ending premature cancer death calamity. Thus it should be given lower priority. They can keep their solution secretive, limited to closed doors of the review panel.

The review of these proposals will be conducted behind closed doors. The reviewers will sign a non-disclosure agreement with the applicant as is stated in the original CPRIT program.

For these proposals there is more responsibility by the reviewer to check the area of the project that needs to support the figures in lines 66-70 that are not disclosed to the public. For this reason more stringent rules for achieving milestones of the estimates set by the applicant will be applied.

The applicant should break down the achievements in lines 66-70 into smaller steps or milestones and show compliance with at least 80% of what he/she declared in the projection. If the applicant defaults in delivering a milestone for a time longer than six months and the results achieved are 20% lower than what was originally declared, the funding will be stopped and diverted to other more successful programs.

However, the applicants should still provide good reasons in support of the figures estimated in lines 66-70 in terms that the reader could understand are the points (although kept secret by the applicant) that need to be verified in order to achieve estimated results.

**PROGRAM 4 - Long-term return (> 10 years) secretive (\$250 million budget):** In order not to penalize long-term return secretive reviewed proposals for basic research, \$250 million out of \$3 Billion for the ten year CPRIT budget will be put aside for this program.

The review of these proposals will be conducted behind closed doors. The reviewers will sign a non-disclosure agreement with the applicant as stated in the original CPRIT program.

For these proposals there is more responsibility by the reviewer to check the area of the project that supports the figures in lines 66-70 that are not disclosed to the public. For this reason more stringent rules for achieving milestones of the estimates set by the applicant will be applied.

The applicant should break down the project into milestones. For each milestone he/she should declare the work that will be accomplished and the expected results that indicate that the estimates made in line 66-70 could be achieved decades from now. If less than 50% of the predicted results are achieved and one cannot learn from the results how to change direction toward getting better results, than when 18 months of delay from the milestone are reached, the funds should be suspended.<\*\*\*

154 (2) Individual investigator awards;

155

156 (3) Multiple investigator awards, including collaborative projects, centers, core  
157 facilities, shared instrumentation, and infrastructure;

158

159 (4) Recruitment to the state of new, emerging, and established investigators;

160

161 (5) Training; and

162

163 (6) Implementation of the Texas Cancer Plan.

164

165 (d) Cancer prevention grant applications may address, but are not limited to, the  
166 following areas:

167

168 (1) Innovation awards;

169

170 (2) Education, outreach and training;

171

172 (3) Evidence based prevention programs and services;

173

174 (4) Collaborative projects;

175

176 (5) Infrastructure/capacity building grants; and

177

178 (6) Implementation of the Texas Cancer Plan.

179

180 (e) An applicant must disclose all contractors, including subcontractors that the

181 applicant intends to use to carry out the work of the awarded grant. The

182 applicant has a continuing duty to supplement this information as it becomes

183 known to the applicant.

184

185 (f) An applicant has a duty to ensure that the design, conduct, and reporting of the

186 research or prevention program will not be biased by conflicting financial interest

187 of the applicant or any individuals associated with the grant. This duty is

188 fulfilled by providing an appropriate written, enforced conflict of interest policy

189 that governs the applicant institution and by complying with any other provisions

190 that may be set forth in the request for applications.

191

192 (g) The applicant shall not initiate contact with scientific research and prevention

193 programs committee members regarding the status or substance of the grant

194 application. \*\*\*>However, official communications and interactions between  
applicant and reviewers in order to allow reviewers to fully understand  
the potential impact of the innovation are encouraged. These must occur  
in public meetings, public presentations by the applicant, or, if orally,  
in the presence of a staff person of the CPRIT Review Office. All oral  
communications (including those occurring at public meetings) should be  
recorded. A copy of any written communication between applicants and  
reviewers should be sent to the CPRIT Scientific Review Office. A record  
of all communications (recorded or in text form) should be kept in an  
electronic file at the CPRIT Scientific Review Office for consultations  
at a later date if required. <\*\*\*

195

196 (h) Failure to \*\*\*>provide the recording or sending a written copy to CPRIT  
Scientific Review Office of the exchanged messages with a reviewer for  
the purpose of making sure the reviewer fully understands the

innovation's benefits to the patient<\*\*\* ~~comply with the requirements set forth in  
the request for applications~~

197 may serve as grounds for disqualification from further consideration of the grant

198 application by the Institute.

199

200

201 703.4. Grants Management.

202 The Institute may engage third-party grants management services to assist in some  
203 or all aspects of the grant application process, as determined by an agreement with the  
204 Institute.

205

206 703.5. Scientific Research and Prevention Programs Committee Members.

207

208 (a) The Executive Director, with approval of a simple majority of the Oversight  
209 Committee, will appoint experts in the field of cancer research and prevention to  
210 serve as members of a scientific research and prevention program committee for  
211 terms designated by the Executive Director.

212

213 (b) An individual appointed to serve as a member of a scientific research and  
214 prevention program committee may be a resident of another state.

215

216 (c) Scientific research and prevention programs committee members are responsible  
217 for reviewing the scientific research and prevention program grant applications  
218 assigned to the individual member's committee.

219

220 (d) Scientific research and prevention programs committee members may receive an  
221 honorarium.

222

223 (e) A member of a scientific research and prevention programs committees is  
224 prohibited from attempting to use the committee member's official position to  
225 influence a decision to approve or award a grant or contract to the committee  
226 member's employer.

227

228 (f) A member of a scientific research and prevention programs committee must  
229 comply with the requirements set forth in 702.11 (of this title relating to Recusal  
230 and Conflicts of Interest). The disclosure required by 702.11 of this title must be  
231 submitted in writing to the Executive Director.

232

233 (g) If a member of a scientific research and prevention programs committee has a  
234 conflict of interest as described 702.11 of this title, the member shall recuse  
235 himself or herself from the committee's deliberations and actions on the matter  
236 and shall not participate in the committee's decision on the matter.

237

238 (h) Nothing in this section prohibits the Scientific Review Council and the Prevention  
239 Review Council from adopting additional standards and reporting requirements  
240 relating to prohibited conflicts of interest that may be more rigorous than set  
241 forth in the Act or in this chapter. Members of scientific research and  
242 prevention programs committees must comply with additional standards upon  
243 adoption.

244

245

246 703.6. Grants Review Process.

247

248 (a) The Institute will endeavor to ensure that the most creative, most innovative  
249 projects representing the best science \*\*\*>for the maximum impact in the reduction  
of premature cancer death at a lower cost per life saved compared to  
current cost and to costs of other proposals<\*\*\* are funded. This will be  
accomplished

250 through a rigorous peer review process of grant applications \*\*\*>in which each reviewer  
should provide scientific arguments supporting his acceptance or  
rejection of the proposal that should comply with the standard criteria  
set in the five points of Section 4 of the "RFA Rules". All other  
parties<\*\*\* ~~supervised by the~~

251 Chief Scientific Officer and the Chief Prevention Officer in coordination with

252 the Scientific Review Council and the Prevention Review Council \*\*\*>should guarantee that  
those 5 points (in particular point number 2) are supported by solid  
scientific argument. In case of doubts or disagreements that cannot be  
resolved with logical reasoning, calculations, etc., **because the reviewer  
who is rejecting applicant's claims cannot support his rejection with  
solid scientific arguments**, the issue should be resolved by having the  
two parties in disagreement propose a small experiment at the expense of  
CPRIT. The result of the experiment will establish who was correct and in  
the event applicant's claims were proven to be correct, the reviewer who  
could not be convinced by logical reasoning should resign from his  
position. In the event the results will show applicant's claims were  
wrong, the proposal will be withdrawn from further consideration.<\*\*\*

253

254 (b) To the extent possible, priority for funding for cancer research and prevention

255 applications will be given to proposals that:

256

257 (1) Could lead to immediate or long-term medical and scientific breakthroughs in

258 \*\*\*>providing the maximum reduction of premature cancer death at the  
lowest cost per life saved compared to current cost and to costs from  
other proposals<\*\*\* ~~the area of cancer prevention or cures for cancer;~~

259

260 ~~(2) Strengthen and enhance fundamental science in cancer research;~~

261

262 ~~(3) Ensure a comprehensive coordinated approach to cancer research and~~

~~263 prevention;~~

~~264~~

~~265 (4) Are interdisciplinary or interinstitutional;~~

~~266~~

~~267 (5) Address federal or other major research sponsors' priorities in emerging~~

~~268 scientific or technology fields in the area of cancer prevention or cures for~~

~~269 cancer;~~

~~270~~

~~271 (6) Are matched with funds available by a private or nonprofit entity and~~

~~272 institution or institutions of higher education;~~

~~273~~

~~274 (7) Use Cancer Prevention and Research funds to obtain additional cancer~~

~~275 research and prevention funding from other sources;~~

276

277 (8) Are collaborative between any combination of private and nonprofit entities,  
278 public or private agencies or institutions in this state, and public or private  
279 institutions outside this state;

280

281 (9) Have a demonstrable economic development benefit to this state;

282

283 (10) Enhance research superiority at institutions of higher education in this state  
284 by creating new research superiority, attracting existing research superiority  
285 from institutions not located in this state and other research entities, or  
286 enhancing existing research superiority by attracting from outside this state  
287 additional researchers and resources; and

288

289 (11) Expedite innovation and commercialization, attract, create, or expand private  
290 sector entities that will drive a substantial increase in high-quality jobs, and  
291 increase higher education applied science or technology research capabilities.

292

293 (c) Based upon the results of the peer review process \*\*\*>which should be mainly based  
on their supporting arguments for the score received in Primary Review  
Criteria in line 152-176 of "RFA Rules" (red) and for the score received  
in Tertiary Review Criteria in line 194-195 of "RFA Rules" (red)<\*\*\* and  
in consideration of the

294 standards described in subsection (b) of this section, as applicable, an individual  
295 research and prevention program committee will agree upon a recommendation for  
296 grant proposal funding for grant applications reviewed by the committee.

297

298 (d) Grant funding recommendations made by individual research and prevention  
299 program committees will be evaluated by the Scientific Review Council or the

300 Prevention Review Council, as may be appropriate, \*\*\*>however, it will be based on  
their supporting arguments for the score received in Primary Review  
Criteria in line 152-176 of "RFA Rules" (red) and for the score received  
in Tertiary Review Criteria in line 194-195 of "RFA Rules" (red).

301

302 (e) Pursuant to a schedule developed by the Executive Director, the Scientific Review  
303 Council and the Prevention Review Council will submit a prioritized list of grant  
304 funding recommendations to the Executive Director. The list of grant funding

305 recommendations will include \*\*\*>the score received in Primary Review Criteria  
in line 152-176 of "RFA Rules" (red), the score received in Tertiary  
Review Criteria in line 194-195 of "RFA Rules" (red) and a synthesis of  
the supporting arguments that makes the specific proposal stronger in the  
potential impact of saving more lives from premature cancer death at a  
lower cost per life saved compared other proposals <\*\*\*. ~~a statement of how the  
grant applications~~

~~306 recommended for funding meet one or more standards of subsection (b) of this~~

~~307 section.~~

308

309 (f) The decision to recommend a grant application for funding is entirely within the  
310 \*\*\*>objective criteria calculated with a score, supported by solid  
scientific argument by the<\*\*\* ~~purview of scientific research and prevention programs~~  
committee to which the  
311 grant application has been assigned, and, if applicable, to the Scientific Review  
312 Council or the Prevention Review Council.

313

314

315 703.7. Executive Director's Funding Recommendation.

316 The Executive Director shall submit to the Oversight Committee a prioritized list  
317 of applications to be awarded cancer research grants and cancer prevention program  
318 grants substantially based upon the lists submitted by the Scientific Review Council and  
319 Prevention Review Council \*\*\*>unless he can see that the goal of the highest  
reduction of cancer death at the lowest cost was not pursued. In the  
event the Executive Director, who is ultimately responsible to the  
taxpayer for the legislative directive that CPRIT should prioritize  
funding to that goal, is not satisfied, he may request additional  
supporting scientific material from the reviewers if a specific proposal  
is claimed by the applicant that will save more lives with respect to  
another proposal and the reviewer's rejection claims or claims to lower  
such estimates are not supported by convincing solid scientific  
arguments. Reviewer's rejection claims should be disclosed to the  
applicant so he could further explain aspects of his proposal that were  
not fully understood. <\*\*\*

320

321 703.8. Overriding the Executive Director's Funding Recommendation.

322

323 (a) The Oversight Committee shall consider the Executive Director's funding  
324 recommendations as a comprehensive slate.

325

326 (b) The Executive Director's slate of funding recommendations is approved by the  
327 Oversight Committee unless two-thirds of the members of the Oversight  
328 Committee vote to disregard the slate of recommendations \*\*\*>because they have  
compelling arguments that should be put forth in a document because they  
believe that a specific project will not reduce premature cancer death,  
nor will reduce health care cost<\*\*\*.

329

330 (c) ~~If~~ The Oversight Committee \*\*\*>must have solid arguments that CPRIT  
mission and mandate from the legislation is not implemented in order<\*\*\*  
~~votes~~ to disregard the slate of funding  
331 recommendations, the Executive Director \*\*\*>may forward to the Scientific Review  
Council and the Prevention Review Council the new request for further  
investigation and gathering of additional data by the Oversight Committee  
and <\*\*\*~~may~~ re-submit recommendations for

332 consideration by the Oversight Committee pursuant to a process and time table

333 established by the Oversight Committee.

334

335

336 703.9. Limitation on Review of Grant Process.

337

338 (a) The decision to recommend a grant application for funding is based upon the  
339 sufficiency of the grant application, the results of the initial peer review by the  
340 individual scientific research and prevention program committee and, if  
341 applicable, the results of the review conducted by the Scientific Review Council  
342 or the Prevention Review Council.

343

344 (b) Grounds for reconsideration of a grant application are limited to conflict of  
345 interest concerns regarding a member of the scientific research and prevention  
346 program committee that reviewed the application or a member of the Scientific  
347 Review Council or Prevention Review Council, if the grant application was  
348 considered by the Scientific Review Council or Prevention Review Council.

349

350 (c) The applicant shall file a request for a review of the grant process with the  
351 Executive Director no later than 30 days from the date of the notification to the  
352 applicant that the grant application was not recommended for funding.

353

354 (d) The request for review shall include all information related to the allegation of a  
355 conflict of interest.

356

357 (e) If the Executive Director finds that no conflict of interest affecting the review  
358 of the grant application, then the applicant will be notified that the request for  
359 review is rejected. For purposes of this section, if the reviewer fully complied  
360 with the requirements under 702.11 (of this title relating to Recusal and Conflicts  
361 of Interest) and 703.5 (f - h) of this Chapter (relating to Scientific Research and  
362 Prevention Programs Committee Members) if applicable, then no conflict of  
363 interest exists.

364

365 (f) If the Executive Director finds that a conflict of interest exists, the application  
366 shall be re-submitted to a different scientific research and prevention programs  
367 committee for review.

368

369

370 703.10. Awarding Grants by Contract.

371

372 (a) The Oversight Committee may not award more than \$300 million in grants from  
373 the Cancer Prevention and Research Fund in a fiscal year.

374

375 (b) The Oversight Committee shall negotiate on behalf of the state regarding the  
376 awarding of grant funds, and enter into a written contract with the grant  
377 recipient.

378

379 (c) The Oversight Committee may delegate contract negotiation duties to a team that  
380 includes at least the Executive Director, the General Counsel for the Institute,

- 381 and an Oversight Committee member designated by the Presiding Officer.  
382
- 383 (d) The contract between the Institute and the grant recipient shall include the  
384 following provisions:  
385
- 386 (1) If any portion of the grant has been approved by the Oversight Committee to  
387 be used to build a capital improvement, the contract must specify that:  
388
- 389 (A) The state retains a lien or other interest in the capital improvement in  
390 proportion to the percentage of the grant amount used to pay for the capital  
391 improvement.  
392
- 393 (B) The grant recipient agrees to repay to the state the grant money used to pay  
394 for the capital improvement, with interest, and share with the state a  
395 proportionate amount of any profit realized from the sale if the capital  
396 improvement is sold.  
397
- 398 (2) Terms relating to intellectual property rights consistent with the standards  
399 established by the Oversight Committee pursuant to 102.256, Health and  
400 Safety Code;  
401
- 402 (3) Terms related publication of material created with grant funds or related to  
403 the research that is the subject of grant funds, including to acknowledgement  
404 of Institute funding and copyright ownership, if applicable;  
405
- 406 (4) Repayment terms, including interest rates, to be enforced if the grant  
407 recipient has not used grant money for the purposes for which the grant was  
408 intended;  
409
- 410 (5) A statement that the Institute does not assume responsibility for the conduct  
411 of the research project or prevention program, and that the conduct of the  
412 project and activities of all investigators are under the scope and direction of  
413 the recipient;  
414
- 415 (6) A statement that cancer research project or prevention program is conducted  
416 with full consideration for the ethical and medical implications of the  
417 research and that the project will comply with all federal and state laws  
418 regarding the conduct of the research;  
419
- 420 (7) Standards established by the Oversight Committee pursuant to 102.258 and  
421 102.259, Health and Safety Code, to ensure that grant recipients purchase  
422 goods and services from suppliers in this state and from historically  
423 underutilized businesses as defined by Chapter 2161, Government Code, and  
424 any other state law;  
425
- 426 (8) An agreement by the grant recipient to submit to regular inspection reviews of

427 the grant project;

428

429 (9) An agreement by the grant recipient to present progress reports to the  
430 Executive Director on a schedule specified by the contract that includes  
431 information on a grant-by-grant basis quantifying the amount of additional  
432 research funding, if any, secured as a result of Cancer Prevention and  
433 Research funding;

434

435 (10) An agreement that a substantial percentage of any new or expanded  
436 preclinical testing, clinical trials, commercialization, or manufacturing of any  
437 real or intellectual product resulting from the award will be established and  
438 conducted in this state, to the extent possible; and

439

440 (11) An agreement that the recipient will abide by the Uniform Grant Management  
441 Standards adopted by the Governor's Office of Budget and Planning, if  
442 applicable.

443

444 (e) The grant recipient is under a continuing obligation to notify the Executive  
445 Director of any adverse conditions that materially impact milestones and  
446 objectives included in the contract.

447

448 (f) The Oversight Committee may not award grant funds after August 31, 2020.

449

450

451

452 703.11. Requirement to Demonstrate Available Funds.

453

454 (a) At the time of award, a cancer research grant recipient must certify that  
455 encumbered funds equal to one-half of the amount of the total grant are available  
456 and not yet expended for research that is the subject of the grant. Recipients  
457 receiving multiple grant awards may provide certification at the institutional level.

458

459 (b) For purposes of the certification required by subsection (a) of this section, a  
460 recipient may use the following categories to classify available funds that are  
461 dedicated to cancer research:

462

463 (1) Cancer biology and genetics, including oncogenesis and collection and  
464 characterization of tumors (genomics, proteomics, other "omics");

465

466 (2) Cancer immunology, including vaccines;

467

468 (3) Cancer imaging and diagnostics;

469

470 (4) Cancer epidemiology and outcomes research; and

471

472 (5) Cancer treatment, including drug discovery and development and clinical trials.

473

474 (c) Recipient available funds sufficient to fulfill the requirement of this section may  
475 include but are not necessarily limited to:

476

477 (1) Federal funds (including American Recovery and Reinvestment Act of 2009  
478 funds);

479

480 (2) State of Texas funds;

481

482 (3) Other States' funds;

483

484 (4) Non-governmental funds (including private funds, foundation grants, gifts and  
485 donations); and

486

487 (5) Unrecovered indirect costs not to exceed 10 percent of the grant award  
488 amount, subject to the following conditions:

489

490 (A) These costs are not otherwise charged against the grant as the five percent  
491 indirect funds amount allowed under 703.12(c) of this chapter (relating to  
492 Limitations on Use of Funds);

493

494 (B) Recipient must have a documented federal indirect cost rate or an indirect  
495 cost rate certified by an independent accounting firm; and

496

497 (C) The allowance for unrecovered indirect costs must be specifically approved  
498 by the Executive Director.

499

500 (d) The following items do not qualify as funds sufficient to fulfill the requirement  
501 of this subsection:

502

503 (1) In-kind costs;

504

505 (2) Volunteer services furnished to the grant recipient;

506

507 (3) Noncash contributions;

508

509 (4) Income earned not available at the time of award;

510

511 (5) Pre-existing real estate including building, facilities and land;

512

513 (6) Deferred giving such as a charitable remainder annuity trust, a charitable  
514 remainder unitrust, or a pooled income fund; or

515

516 (7) Other items as may be determined by the Oversight Committee.

517

518

519 703.12. Limitation on Use of Funds.

520

521 (a) A grant recipient may use the money only for cancer research and prevention  
522 programs consistent with the purpose of the Act, and in accordance with the  
523 contract between the grant recipient and the Institute.

524

525 (b) Money awarded from the Cancer Prevention and Research fund must be used for  
526 authorized expenses. Additional guidance regarding authorized expenses for a  
527 specific program may be provided by the terms of the contract between the grant  
528 recipient and the Institute.

529

530 (c) A recipient of funds for cancer research may not spend more than five percent of  
531 the money awarded for indirect costs.

532

533 (d) Not more than five percent of the money awarded from the Cancer Prevention and  
534 Research Fund may be used for facility purchase, construction, remodel, or  
535 renovation purposes during any year. Any funds awarded that are expended for  
536 facility purchase, construction, remodel, or renovation are subject to the  
537 following conditions:

538

539 (1) The funds must be specifically approved by the Oversight Committee during  
540 the grants review process in 703.6 of this Chapter (relating to Grants Review  
541 Process); and

542

543 (2) Money spent on facility purchase, construction, remodel, or renovation  
544 projects must benefit cancer prevention and research.

545

546 (e) Not more than 10 percent of the money awarded under from the Cancer Prevention  
547 and Research Fund may be used for cancer prevention and control programs during  
548 any year. For purposes of this subsection, the Institute is presumed to award the  
549 full amount of funds available from the Cancer Prevention and Research Fund.

550

551 (f) Grant funds may not be used for purposes other than those purposes for which the  
552 grant was awarded.

553

554

555

556 703.13. Audits.

557 The Institute shall have the right to request and receive from the recipient any  
558 and all documents and other information related to the grant at any time during or  
559 after the term of the grant. This right includes, but is not limited to, the right to  
560 review all financial books and records of the recipient related to the grant and to  
561 perform an audit or other accounting procedures of all expenses related directly or  
562 indirectly to the grant.

563

564 703.14. Termination of Grants.

565

566 (a) The Executive Director may terminate grants prior to the expiration of the  
567 contract between the Institute and the grant recipient on the grounds that the  
568 recipient has failed to meet contractual obligations.

569

570 (b) The Executive Director shall notify the grant recipient in writing of the intent to  
571 terminate funding at least 30 days before the intended termination date.

572

573 (c) The notice shall state the reasons for termination and the procedure for seeking  
574 reconsideration of the decision to terminate.

575

576

577 703.15. Multiyear Projects.

578

579 (a) The Oversight Committee may grant funds for a multiyear project subject to the  
580 requirement that all funds for the multiyear project are awarded in the state  
581 fiscal year that the project is approved by the Oversight Committee.

582

583 (b) Only those funds to be expended during the fiscal year will be distributed to the  
584 multiyear grant recipient.

585

586 (c) Funds approved by the Oversight Committee for multiyear projects not expended  
587 during the fiscal year shall be maintained in an escrow account until such time  
588 that the funds are distributed for subsequent years of the project.

589

590 (d) A recipient awarded a grant for a multiyear project may fulfill the certification  
591 requirements set forth in 703.11 of this Chapter (relating to Requirement to  
592 Demonstrate Available Funds) on a year-by-year basis at the time of the annual  
593 progress review or upon a schedule established by the contract between the  
594 Institute and the recipient.

## Section 2. RFA R-10-I1 (RFA Rules)

### 1 CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS (CPRIT)

2

#### 3 REQUEST FOR APPLICATIONS

#### 4 RFA R-10-I1

5

#### 6 Individual Investigator

#### 7 Research Awards

8

#### 9 2009-2010

10

11

#### 12 1. ABOUT CPRIT

13

14 The State of Texas has established the Cancer Prevention and Research Institute of Texas

15 (CPRIT); CPRIT may issue \$3 billion in general obligation bonds over 10 years to fund grants for

16 cancer research and prevention.

17

18 CPRIT is charged by the Texas Legislature to:

19

\*\*\*>

- Identify and fund innovations and projects that demonstrate having higher potential with respect to others to substantially reduce premature cancer death and save lives at a lower cost per life saved compared to current costs <\*\*\*

20 • Create and expedite innovation in the area of cancer research, thereby enhancing the

21 potential for a medical or scientific breakthrough in the prevention of cancer and cures for

22 cancer;

23

24 • Attract, create, or expand research capabilities of public or private institutions of higher

25 education and other public or private entities that will promote a substantial increase

\*\*\*>in saving lives from premature death from cancer at a lower cost per life saved through <\*\*\*

26 cancer research and in the creation of high-quality new jobs in this State; and

27

28 • Continue to develop and implement the Texas Cancer Plan by promoting the development

29 and coordination of effective and efficient statewide public and private policies, programs,

30 and services related to \*\*\*>reducing premature<\*\*\* cancer \*\*\*>death<\*\*\* and by encouraging cooperative, comprehensive, and

31 complementary planning among the public, private, and volunteer sectors involved in

32 cancer prevention, detection, treatment, and research.

33

34

## 35 2. EXECUTIVE SUMMARY

36

37 CPRIT will foster cancer research in Texas by providing financial support for a wide variety of  
38 projects relevant to cancer research. This RFA solicits applications for innovative research  
39 projects addressing critically important questions that will significantly advance knowledge

\*\*\*>and find the best remedies<\*\*\* of

40 the causes, prevention, and/or treatment of cancer. CPRIT encourages applications that seek to  
41 apply or develop state-of-the-art technologies, tools, and/or resources for cancer research

\*\*\*>aimed to defeat this calamitous illness that is the number one  
enemy taking more lives prematurely compared to any war or any other  
disease<\*\*\*,

42 including those with potential commercialization opportunities. CPRIT expects outcomes of

43 supported activities to directly and indirectly benefit \*\*\*>the patient in alleviating  
suffering and in substantially reducing premature cancer death with the  
goal that if the job is done well and cancer is defeated, subsequent  
cancer research efforts will not be necessary. The policy will change  
to prevention and early detection because the late cure that has not  
worked for a half century will not be needed in most of the cases after  
having detected and cured cancer at an early stage.<\*\*\* ~~subsequent cancer  
research efforts, cancer~~

~~44 public health policy, or the continuum of cancer care—from f cancers detected at an early stage.~~

45 To fulfill this vision, applications may address any topic or issue related to cancer biology,  
46 causation, prevention, detection or screening, treatment, or cure.

47

48

## 49 3. MECHANISM OF SUPPORT

50

51 The goal of awards made in response to this RFA is to fund exceptionally innovative research  
52 projects with great potential impact \*\*\*>in reduction of premature cancer death at a  
lower cost per each life saved compared to current cost <\*\*\* that are  
directed by a single investigator. This award allows

53 experienced cancer researchers the opportunity to explore new methods and approaches for  
54 investigating a question of importance that has been inadequately addressed or for which there  
55 may be an absence of an established paradigm or technical framework. Applicants need not be  
56 trained specifically in cancer research. However, successful applicants should be working in a  
57 research environment capable of supporting potentially high-impact studies. Access to a clinical  
58 environment and interaction with translational cancer physician-scientists are highly desirable.

59

60

## 61 4. RESEARCH OBJECTIVES

62 Areas of interest include laboratory research, translational studies, and/or clinical investigations.

63 In that cancers arise from a large number of derangements of basic molecular and cellular  
64 functions and in turn cause many alterations in basic biological processes, almost any aspect of  
65 biology may be relevant to cancer research, more or less directly. The degree of relevance to  
66 cancer research will be an important criterion for evaluation of projects for funding by CPRIT.

\*\*\*>The most important criterion for evaluation of projects for funding  
by CPRIT is the one that satisfies the goal of having the highest

probability and potential to reduce premature cancer death at a lower cost per life saved with respect to other projects.<\*\*\*

~~67 For example, are alterations in the process in question primarily responsible for oncogenesis or  
68 secondary manifestations of malignant transformation? Will understanding the process or  
69 interfering with it offer selective and useful insight into prevention, diagnosis, or treatment of  
70 cancer?~~

\*\*\*>For all types of applications whether for short-term return "open", long-term return fundamental research "open", or the same but "secretive" (see Section 5), applicants should explain how their research benefits cancer patients by answering the following questions related to their proposed solution:

1. What is your estimated percentage increase of lives saved annually from premature death (younger than 75 years old)?
2. What are the scientific arguments supporting your claimed estimate in question 1?
3. What is the cost per life saved compared to current costs?
4. How much does your project cost?
5. When will we see the first results you estimated? Provide a projection of the results for the following twenty years.

(This estimated values should be verified with experimental results according to the test procedure described at line 247.)

In the event of strong disagreement between the applicant and the reviewer in regard to the estimated figures in the above answers, both will provide their scientific arguments to support the estimated claims (applicant) or to reject the estimated claims (reviewer). In the event the reviewer does not have strong supporting arguments to reject very large figures in reduction in cancer death and cost per life saved, reviewer and applicant should identify an experimental test at minimal cost that would solve the controversial issue, leaving thus the "JUDGEMENT" to the law of nature and result from an experiment and not to the opinion of a reviewer or an applicant/scientist with a different opinion.<\*\*\*

70 Successful applicants for funding from CPRIT will have addressed these questions  
71 satisfactorily.

72

73

#### 74 5. FUNDING INFORMATION

75 Applicants may request a maximum of \$1,000,000 in total costs per year for up to 4 years. Funds  
76 may be used for salary and fringe benefits, research supplies, equipment, clinical costs, and  
77 travel to scientific/technical meetings or collaborating institutions. Requests for funds to  
78 support construction and/or renovation will not be approved under this funding mechanism.

79

\*\*\*>

**PROGRAM 1 - Short-term return (< 10 years) open review (\$1.5 Billion budget):**

Because taxpayer money is used for the development of projects to the benefit of taxpayers, higher priority should be given to applicants who agree to disclose their solution openly to the public (the public is their employer) and to submit their solution to a public review where all solutions are compared. Only the best proposals that stand out due to solid answers to the questions at line 66-70 to which reviewers cannot invalidate or provide objections supported by scientific argument will be funded. The applicant should disclose his/her solution in scientific articles, documents or on the web. Because this program will create competition openly for the best "solution" to reduce cancer death at a lower cost per life saved, \$1.5 Billion of the total \$3 Billion CPRIT ten year budget will be reserved for this program. (CPRIT may decide a different share among the four programs). The review criteria for this program should privilege the proposal with the best solution that can provide the highest reduction of cancer death in the shortest time (anyway it must be shorter than 10 years and the shortest gets a higher score) at the lower cost per life saved. The initial development cost is proportional to the number of lives saved. The higher the potential number of lives saved the higher initial development cost that can be justified.

**PROGRAM 2 - Long-term return (> 10 years) open review (\$500 million budget):**

In order not to penalize long-term return open reviewed proposals, \$500 million out of \$3 Billion for the ten year CPRIT budget will be put aside for this program.

As exists in other fields of fundamental research that is funded with taxpayer money (for example in High Energy Physics at FERMIlab or at CERN, Geneva, where the return on investment to society is typically 35 years) a fund of about \$500 million is put aside (out of the \$3 Billion CPRIT ten year program) for fundamental research in this field. However, the applicant still has to demonstrate how his/her effort in advancing knowledge in the field is related to saving lives from premature cancer death even if his/her estimate for a return is decades from now.

Higher priority should be given to applicants who agree to disclose their solution openly to the public through scientific articles, publications or the web (the public is their employer) and to submit their solution to a public review where all different solutions are compared.

**PROGRAM 3 - Short-term return (< 10 years) secretive (\$250 million budget):**

In order not to penalize short-term return secretive reviewed proposals, \$250 million out of \$3 Billion for the ten years CPRIT budget will be put aside for this program.

The applicant who wants to keep his/her solution secretive, clearly has intentions different (business as first priority even if it is not stated) from that of serving the cause of ending premature cancer death calamity. Thus it should be given lower priority. They can keep their solution secretive, limited to closed doors of the review panel.

The review of these proposals will be conducted behind closed doors. The reviewers will sign a non-disclosure agreement with the applicant as is stated in the original CPRIT program.

For these proposals there is more responsibility by the reviewer to check the area of the project that needs to support the figures in lines 66-70 that are not disclosed to the public. For this reason more stringent rules for achieving milestones of the estimates set by the applicant will be applied.

The applicant should break down the achievements in lines 66-70 into smaller steps or milestones and show compliance with at least 80% of what he/she declared in the projection. If the applicant defaults in delivering a milestone for a time longer than six months and the results achieved are 20% lower than what was originally declared, the funding will be stopped and diverted to other more successful programs.

However, the applicants should still provide good reasons in support of the figures estimated in lines 66-70 in terms that the reader could understand are the points (although kept secret by the applicant) that need to be verified in order to achieve estimated results.

**PROGRAM 4 - Long-term return (> 10 years) secretive (\$250 million budget):** In order not to penalize long-term return secretive reviewed proposals for basic research, \$250 million out of \$3 Billion for the ten year CPRIT budget will be put aside for this program.

The review of these proposals will be conducted behind closed doors. The reviewers will sign a non-disclosure agreement with the applicant as stated in the original CPRIT program.

For these proposals there is more responsibility by the reviewer to check the area of the project that supports the figures in lines 66-70 that are not disclosed to the public. For this reason more stringent rules for achieving milestones of the estimates set by the applicant will be applied.

The applicant should break down his/her project into milestones. For each milestone he/she should declare the work that will be accomplished and the expected results that indicate that the estimates made in line 66-70 could be achieved decades from now. If less than 50% of the predicted results are achieved and one cannot learn from the results how to change direction toward getting better results, than when 18 months of delay from the milestone are reached, the funds should be suspended.<\*\*\*

80

#### 81 6. KEY DATES

82

83 RFA release

August 21, 2009

84 Online application opens

September 15, 2009, 7 a.m. CT

85 Application due

October 8, 2009, 3 p.m. CT

86 Application review

December 2009/January 2010

87 Award notification

January/February 2010

88 Anticipated start date

February/March 2010

89

90

#### 91 7. ELIGIBILITY

92

93 • The applicant must be a Texas-based entity, including a public or private institution of higher

94 education, academic health institution, university, government organization, nongovernmental

95 organization, other public or private company, or an individual residing in Texas.

96

97 • The investigator must \*\*\*> demonstrate being knowledgeable about the subject of the proposal, must have publications and documents written on the subject and/or have paternity of the idea. CPRIT will not fund stolen ideas if a person different from the applicant can claim rightfully the paternity of the stolen idea. The principal Investigator must know how to lead the project toward the results by understanding all phases that need to take place, what is important to achieve for each phase. The investigator must demonstrate ability to sustain an argument in the same field with the best experts in the world either in conferences, meetings, etc. The investigator <\*\*\*~~have a doctoral degree, including M.D., Ph.D., D.D.S., D.M.D., Dr.P.H.,~~

98 ~~D.O., D.V.M., or equivalent,~~ and must reside in Texas during the time the research that is the  
99 subject of the grant is conducted.

100

101 • Collaborations are permitted and encouraged, and collaborators may or may not reside in  
102 Texas. However, collaborators who do not reside in Texas are not eligible to receive CPRIT  
103 funds. Subcontracting and collaborating organizations may include public, not-for-profit,  
104 and for-profit entities. Such entities may be located outside of the State of Texas, but non-  
105 Texas-based organizations are not eligible to receive CPRIT funds.

106

107 • An investigator may submit only one application under this RFA during this funding cycle.

108

109 • CPRIT grants will be awarded by contract to successful applicants. Certain contractual  
110 requirements are mandated by Texas law or by administrative rules. Although the applicant  
111 need not demonstrate the ability to comply with these contractual requirements at the time  
112 the application is submitted, applicants should make themselves aware of these standards  
113 before submitting a grant application. Significant issues addressed by the CPRIT contract are  
114 listed in Sections 10 and 11. All statutory provisions and relevant administrative rules can be  
115 found at [www.cprit.state.tx.us](http://www.cprit.state.tx.us).

116

117

## 118 8. APPLICATION REVIEW

119

### \*\*\*>8.0 ROLE OF REVIEWERS

The role of the great team of superb peer reviewers is to be expert in the field to understand the proposal, to see the potential benefits to the patient and in particular to provide scientific arguments supporting the rejection of insignificant or flawed proposals that will never be able to get close to the applicant's estimated figures in lives saved and cost reduction for each life saved compared to current and other costs.

The value of a good reviewer to CPRIT is saving money that would be needed to conduct an experiment to prove the applicant was wrong because the reviewer is able to demonstrate with supporting scientific arguments or calculations, reasoning, etc. that the applicant's claims are invalid.

However, if a reviewer rejects a project with no supporting scientific arguments, it would be to the detriment of the interest of the cancer patient and to the taxpayer and therefore he should resign from his position. <\*\*\*

It is the responsibility of the reviewer not to reject innovations that can benefit mankind if:

5. The potential impact in reducing premature cancer death at a lower cost per each life saved claimed by the applicant is higher than other proposals.
6. The reviewer or decision maker cannot provide scientific arguments to invalidate applicant's claims
7. The reviewer or decision maker declares himself/herself incompetent in the specific field
8. The applicant demonstrates that the reviewer's judgment was not scientifically correct or that he/she was incompetent in the field

#### 120 8.1. Outline

121

122 To ensure the timely review of only the most innovative and cutting-edge research with the  
123 greatest potential for \*\*\*>reduction in premature cancer death<\*\*\* ~~advancement of cancer~~  
~~research~~, all eligible applications will be initially

124 evaluated for scientific merit and impact based on the introductory material presented in the  
125 application (see Sections 9.3.2 and 9.3.3). Applications that do not \*\*\*>contribute to the  
reduction in premature cancer death, reducing the cost for each life  
saved compared to current costs<\*\*\* ~~sufficiently capture the~~

126 ~~reviewers' interest~~ at this stage will not be considered for further review. The applicant will be  
127 notified of such a decision when it is made \*\*\*>and the scientific supporting reason  
that the application did not qualify because of the low impact (or no  
impact) in reducing cancer death and reducing costs for each life saved  
will be provided to the applicant. Quantitative scores will be provided  
to the applicant for each item in line 66-70 (see Section 8.3) and a  
combined score for those items showing that it did not reach the  
threshold compared to other proposals (see Section 8.5)<\*\*\*.

128

129 Applications that meet the requirements of the initial evaluation will be reviewed using a \*\*\*>three-  
<\*\*\*~~two~~

130 stage process: (1) Peer review \*\*\*>(scored)<\*\*\*, ~~and~~ (2) Programmatic review \*\*\*>(unscored)  
and (3) Overall assessment (scored) <\*\*\*. In the first stage, applications will

131 be evaluated by an independent scientific merit review panel using the criteria listed below \*\*\*>(see  
Section 8.3)<\*\*\*. In

132 the second stage, applications judged to be most meritorious by review panels will be evaluated  
\*\*\*>using the second criteria (see Section 8.4) which is unscored and  
cannot jeopardize the assignment of funds, but has the goal to check  
that resources will assure feasibility of the proposed research. In the  
event of concerns by the reviewers, those will be passed on to the  
applicant giving him/her the possibility to find remedies so that the  
scientific merit of the proposed research will not be lost and taxpayer

resources will not be wasted because of poor planning. In the third stage, applications judged to be most meritorious because they have passed the overall scored criteria that reflects the overall assessment will be<\*\*\*

133 ~~and~~ recommended for funding by the CPRIT Scientific Review Council based on comparisons

134 with applications from all of the merit review panels ~~and programmatic priorities~~. Each stage of

135 application review is conducted \*\*\*>in an open review for the first two programs (short-term and long-term return, open review programs. See Section 5), and <\*\*\* completely confidentially, and all panel members are required

136 to sign nondisclosure statements regarding the contents of the applications \*\*\*>for the last two programs (short-term and long term return, secretive application. See Section 5)<\*\*\* . All panel members

137 will be non-Texas residents and operate under strict conflict of interest prohibitions. \*\*\*>Official communications and interactions between applicant and reviewers in order to allow reviewers to fully understand the potential impact of the innovation are encouraged. However, it must occur in public meetings, public presentations by the applicant, or if orally in presence of a staff person of the CPRIT Review Office. All oral communications (including those occurring at public meetings) should be recorded. A copy of any written communication between applicants and reviewers should be sent to the CPRIT Scientific Review Office. A record of all communications (recorded or in text form) should be kept in an electronic file at the CPRIT Scientific Review Office for consultations at a later date if required. <\*\*\* Under no

138 circumstances should institutional personnel and/or individual applicants initiate contact \*\*\*>(without recording it or sending a written copy of the exchanged messages to CPRIT Scientific Review Office)<\*\*\* with

139 any member involved in the peer review process (with the exception of members of the CPRIT  
140 Scientific Review Office) regarding the status or substance of the application. Violations of this

141 prohibition \*\*\*>(such as undisclosed oral, not recorded, or written communications between reviewers and applicants that were not put on file) <\*\*\* will result in the administrative withdrawal of the application.

142

## 143 8.2. Review Criteria

144

145 Peer review of applications will be based on primary scored criteria, ~~and~~ secondary unscored

146 criteria \*\*\*>and tertiary scored criteria<\*\*\*, listed below. Review panels will evaluate and score each primary criterion and

147 subsequently assign a global score that reflects an overall assessment of the application \*\*\*>according to the tertiary criterion<\*\*\*. The

148 overall assessment will \*\*\*>reflect the score of the primary criteria compared with applications from all of the merit review panels according to the score of the tertiary criterion. The overall score should be objective and fair to the merits of all applications and refer to quantitative estimates and solid scientific rationale and not subjective to an opinion or impression of the reviewers that do not refer to supporting scientific arguments. <\*\*\* ~~not be an average of the scores of individual criteria but will reflect~~

149 ~~the reviewers' overall impression of the application.~~

150

151

152 8.3. Primary Criteria

153

154 Primary criteria will evaluate **\*\*\*>with a score<\*\*\*** the scientific merit of the proposed work contained in the

155 application. Concerns with any of these criteria potentially indicate a major flaw in the

156 significance and/or design of the proposed study. **\*\*\*>Reviewer's** concerns must be spelled out and supported with scientific arguments (rationale, calculations, etc.), etc. They should clearly state why the proposed idea or project is flawed, not feasible or cannot reach the reduction in cancer death achievable by the application with the lowest score **<\*\*\***

157

158 Relevance: The degree of relevance to cancer research will be an important criterion for

159 evaluation of projects for CPRIT support. See Section 4, above.

**\*\*\*>Score** criteria will assign points for each of the following answers in relation to the applicant's proposed solution:

1. What is your estimated percentage increase of lives saved annually from premature death (younger than 75 years old)?
2. What are the scientific arguments supporting your claimed estimate at question 1?
3. What is the cost per life saved compared to current costs?
4. How much does your project cost?
5. When will we see the first results you estimated? Provide a projection of the results for the following twenty years.**<\*\*\***

160

161 Responsiveness to RFA: Is the application clearly responsive to the RFA? What is the innovative

162 potential of the project? Does the applicant propose new paradigms or challenge existing ones?

163 Does the project develop state-of-the-art technologies, methods, tools, or resources for

**\*\*\*>reducing** premature cancer death, reducing costs for each life saved**<\*\*\*-cancer**

164 ~~research~~ or address important under-or unexplored areas? If the research project is successful,

165 will it lead to truly substantial **\*\*\*>reduction** in premature cancer death**<\*\*\* advances** ~~in the field~~ rather than add modest increments of

166 insight? Projects that modestly extend current lines of research will not be considered for this

167 award.

168

169 Research Plan: Is the proposed work presented as a self-contained research project? Does the

170 proposed research have a clearly defined hypothesis or goal **\*\*\*>of** reducing cancer death**<\*\*\*** that is supported by sufficient

171 preliminary data and/or scientific rationale? Are the methods appropriate, and are potential

172 experimental obstacles and unexpected results discussed?

173

174 Applicant Investigator: Does the applicant demonstrate the required creativity, expertise,

175 experience, and accomplishments to make a significant contribution to cancer research

\*\*\*>targeted to the reduction of premature deaths from that  
illness<\*\*\*?

176

177 8.4. Secondary Criteria

178

179 Secondary criteria \*\*\*>are unscored, it cannot jeopardize the assignment of  
funds but it has the goal to check that resources will assure  
feasibility of the proposed research.<\*\*\* ~~contribute to the global score assigned to  
the application. Concerns with~~

180 these criteria potentially question the feasibility of the proposed research \*\*\*>not because of  
a technical feasibility that was checked and approved in the primary  
criteria of the scientific merits but because reviewers have concerns  
about the available resources. Those concerns will be passed on to the  
applicant, together with the reviewers' recommendations of the actions  
that should be taken in order to have the right resources in place and  
reduce the feasibility risk. It is offered to the applicant to find  
remedies for the lack in resources<\*\*\*.

181

182 Research Environment: \*\*\*>Does the plan of the research development cover all  
needed aspects of a team of expertise in the specific fields and  
needed<\*\*\*—~~Does the research team have the needed expertise, facilities, and~~

183 resources to accomplish all aspects of the proposed research? \*\*\*>Can the Principal  
Investigator demonstrate being knowledgeable about the subject of the  
proposal? Does he/she have publications and documents written on the  
subject and/or have paternity of the idea. The principal investigator  
must know how to lead the project toward the results by understanding  
all phases that need to take place, what is important to achieve for  
each phase. The investigator must demonstrate being able to sustain an  
argument and/or discussion in the same field with the best experts in  
the world in conferences, meetings, etc.<\*\*\* ~~Are the levels of effort of the key~~

~~184 personnel appropriate? Is there evidence of institutional support of the research team and the~~

~~185 project?~~

186

187 Vertebrate Animals and/or Human Subjects: If vertebrate animals and/or human subjects are  
188 included in the proposed research, have the appropriate guidelines relating to participation risk,  
189 inclusion, and protection been addressed?

190

191 Budget: Is the budget appropriate for the proposed work?

192

193 Duration: Is the stated duration appropriate for the proposed work?

194

\*\*\*>8.5 Tertiary Criteria

Tertiary criteria will evaluate, with a score, the overall assessment of the proposal. It will reflect the score of the primary criteria compared with applications from all of the merit review panels. The overall score refers to the quantitative estimates of the primary criteria (see Section 8.3), modified based on the comparison with the rationale uniformly used through the verification of all estimates made by the applicant. If the estimates reported by the applicant are modified by the reviewer because it was believed to be unrealistic or because it has used a scale different from other applicants, reviewers will support such modification with a rationale and/or evident calculation or data.

This score is what will recommend funding the project because there are supporting evidence that the proposed innovative idea/project has scientific merit that none of the reviewers could invalidate with scientific arguments.

As was mentioned in the introduction, whatever policy CPRIT adopts, what is important is to be honest and not mislead taxpayers.

Following is a clear, honest, consistent description of each:

1. Policy No. 1 with the goal of achieving the maximum reduction of premature cancer death at the minimum cost that if pursued will reach exactly that (which is program 1 and 2 with reserved \$2 billion in ten years. See Section 4)
2. Policy No. 2 has the goal of creating a large business around cancer research and therapy in addition to the existing one currently costing the U.S. \$220 Billion/year that if pursued will reach exactly that. This will continue to keep the reduction in cancer death very low (because it is not even mentioned one time in the entire original RFA with line numbers) as it has been only 5% over 50 years (while heart disease for the same period has been reduced 64%), as reported on April 24, 2009 by *The New York Times* (<http://query.nytimes.com/gst/fullpage.html?res=9A00EFDD143CF937A15757C0A96F9C8B63&sec=&spon=&pagewanted=all>). Also, Policy No. 2 will exclude projects with very high potential of reducing cancer death because of some criteria<sup>1</sup> that are not consistent with that goal (Policy No. 2 is the original CPRIT RFA reported in this document with line numbers)
3. Policy No. 3, in order not to penalize or exclude either projects with high potential to reduce cancer death to the benefit of mankind (Program 1 and 2 in Section 4) nor the secretive projects which are more concerned with creating an additional business in cancer research (program 3 and 4 in Section 4) provides four programs. However, the great difference with

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<sup>1</sup> Current CPRIT policy requires matching funds (that in some cases cannot be met by the applicant because he/she does not have \$4 million to match CPRIT funding), or has other criteria that will preclude the applicant from receiving funding although his idea/innovation may have scientific merit and potential to substantially reduce premature cancer death much higher compared to other solutions.

respect to the original RFA is that in this case the taxpayer can see spelled out in a clear, honest and consistent words in many sections of this new RFA the goal of targeting the \$3 Billion to the reduction of cancer death for all four programs, so that also the ones who aim at creating a business (Program 3 and 4) will at the same time, if the rules of this RFA are followed, benefit the reduction of cancer death.

If Policy No. 3 is not adopted, it would be fair to the taxpayer and to applicants of projects with high merits and potential to reduce premature cancer death if CPRIT ceases making the world believe (as said at meetings, in speeches, documents, etc.) that they have the "greatest" team of "superb" peer reviewers to identify ALL the best projects in the world that have a potential to solve the cancer problem. On the contrary it should be made clear that CPRIT's goal is not identifying the projects with greatest potential of achieving the maximum reduction in cancer death at the minimum cost. Its goal is merely to identify a few projects they wish to fund while not considering others which might be more effective.

Instead, if policy No. 3 is adopted in all parts showing the real intention of CPRIT to commit to taxpayers to solve the problem of achieving reduction in cancer death by setting the review criteria to pursue that, but it cannot avoid the rule of requesting matching funds from the applicants because it is mandated by a State law, it will still constitute a service to the community if the "great" team of "superb" peer reviewers will provide all scientific arguments that invalidate applicants' claims. However, if they cannot find any, exactly because of the stature of the review panels lead by two Nobel Laureates and many respected professionals in the field of cancer research, they should say so: "they could not invalidate with scientific arguments applicant claims." Therefore the proposals of those applicants who have a much higher scientific merit and potential for reducing premature cancer death at a lower cost per life saved will not be precluded from the possibility to find people who are looking for the most effective solution to fund and will be glad to pay for the development, because it appears that they have been reviewed and dismissed as not having valid claims.

The limitation in identifying good projects if the criteria of matching funds is kept is the following:

1. CPRIT organizes a review panel lead by two Nobel Laureates and many experts
2. However, the projects are in fact pre-selected by industries or the ones who are putting up the 50% matching funds
3. Who are the reviewers of these companies? Are they researchers, Nobel Laureates or businessmen? What is their goal - profit or achieving the maximum reduction in cancer deaths?
4. Practically the CPRIT Scientific Review team is there just to give credibility to a pre-selection made by industry or the ones who put up the matching funds
5. In other words, the ones who put up the matching funds have a 50% discount on their projects using taxpayer money <\*\*\*

195

## 196 9. SUBMISSION GUIDELINES

197

### 198 9.1. Online Registration

199

200 Applications will be accepted beginning at 7 a.m. Central Time on September 15, 2009, and must  
201 be submitted via the CPRIT Application Receipt System ([www.CPRITGrants.org](http://www.CPRITGrants.org)). Only  
202 applications submitted at this portal will be considered eligible for evaluation. All applicants  
203 must register a user name to start and submit an application.

204

### 205 9.2. Application Submission Deadline

206

207 All applications must be submitted by 3 p.m. Central Time on October 8, 2009.

208

### 209 9.3. Application Components

210

211 Applicants are advised to follow all instructions to ensure accurate and complete submission of  
212 an online application.

213

#### 214 9.3.1. Contact Information

215 Enter all required applicant and Application Signing Official (ASO) information along with the  
216 application title.

217

#### 218 9.3.2. Abstract (150 words)

219 Clearly explain the question or problem to be addressed and the approach to its answer or  
220 solution.

221

#### 222 9.3.3. Significance (150 words)

223 Clearly address how the proposed project, if successful, will have a major impact \*\*\*>in reducing  
cancer death<\*\*\*~~on the field of~~

224 ~~cancer research~~ or on the care of patients with cancer. Summarize how the proposed research

225 creates new paradigms or challenges existing ones.

\*\*\*>For all types of applications, applicants should explain how their research benefits cancer patients by answering the following questions in relation to their proposed solution:

1. What is your estimated percentage of lives saved annually from premature death (younger than 75 years old)?
2. What are the scientific arguments supporting your claimed estimate at point 1?
3. What is the cost per life saved compared to current costs?
4. How much does your project cost?
5. When will we see the first results you estimated?

In order to conserve words among the 150 words available, it is sufficient to write a few characters, for example: 1. 30%; 2. See section ; 3. \$250,000 vs \$10,000,000; 4. \$8,000,000; 5. 2 years

Note: It is the applicant's responsibility to support with scientific arguments the claimed numbers of the four answers and the rationale at question No. 2. It is the reviewer's responsibility to provide strong scientific arguments in the event he wants to invalidate applicant's claims and reject the proposal at this point<\*\*\*

226

~~227 Note: It is the applicant's responsibility to capture CPRIT's attention with the Abstract and  
228 Significance Statement alone. At this stage of initial evaluation, applications that are judged to  
229 offer only modest contributions to the field of cancer research will be excluded from further  
230 peer review.~~

231

232

233 9.3.4. Research Plan (10 pages)

234 Background: Present the rationale behind the proposed project, emphasizing the pressing  
235 problem **\*\*\*>**of reducing cancer death**<\*\*\*** ~~in cancer research that will be addressed.~~

236

237 Hypothesis and Specific Aims: Concisely state the hypothesis and/or specific aims **\*\*\*>**that  
should be targeted to the reduction of cancer death**<\*\*\*** **to be tested**  
238 or addressed by the research described in the application.

239

240 Research Strategy: Describe the experimental design, including methods, anticipated results,  
241 potential problems or pitfalls, and alternative approaches. Preliminary data that support the  
242 proposed hypothesis are encouraged but not required.

243

244 Human Studies: If human subjects or human biological samples will be used, provide a plan for  
245 Institutional Review Board approval or exemption and for recruitment of subjects or acquisition  
246 of samples that will meet the time constraints of this mechanism.

247

**\*\*\*>**Measuring Results: In order to provide feedback to taxpayer on the success and return in percentage of life saved and cost saved for the \$3 Billion investment, the applicants should describe how they will conduct experimental tests to demonstrate the achievement of the figures estimated in Section 4. Following is an example of the kind of experimental tests expected. However, depending on the type of project research conducted, each applicant can think of a specific measurement test applicable to his project that will provide experimental results to be compared with the estimated results of Section 4.

Template for obtaining experimental results that would show the validity of the original proposal:

All projects should first estimate and then experimentally verify the impact of the proposed solution on a representative sample of 10,000 people age 50-75, selected from a population in a location with a constant cancer death rate of 50 deaths per year recorded over the previous 20 years.

The applicant should describe how he will apply his solution targeted to reduce cancer death to a sample population as described before complying with all safety procedures and FDA approvals and how he will obtain experimental results. If the group under study still records 50 deaths from cancer in one year, this means that the solution proposed was not efficacious. If the number is reduced, the test will be extended to a larger number and funding will continue. On the contrary, funding will stop if there are just expenses and no results in lives saved.<\*\*\*

248 **Timeline:** Provide an outline of anticipated major milestones tracked in the proposed project.

249

250 **9.3.5. Supplemental Documents**

251 **References:** Provide a concise and relevant list of references cited for the application.

252

253 **Budget and Justification:** Provide a brief outline and justification of the budget for the entire

254 proposed period of support, including salaries and benefits, supplies, equipment, patient care

255 costs, animal care costs, other expenses, and indirect costs. Equipment having a useful life of

256 more than 1 year and an acquisition cost of \$5,000 or more per unit must be specifically

257 approved by CPRIT. Applicants should be aware that Texas law limits the amount of indirect

258 costs that may be funded by CPRIT grants. Guidance regarding indirect cost recovery can be

259 found in the administrative rules proposed by CPRIT. The proposed rules and the statute can be

260 found at [www.cprit.state.tx.us](http://www.cprit.state.tx.us). Applications requesting over \$4,000,000 (maximum of

261 \$1,000,000 total costs each year) will be administratively withdrawn from consideration. The

262 annual salary (also referred to as direct salary or institutional base salary) that an individual may

263 receive under a CPRIT award for FY 2010 is ~~\$200,000~~ \*\*\*>\$150,000<\*\*\*; CPRIT FY 2010 is from

September 1, 2009

264 through August 31, 2010. Salary does not include fringe benefits and/or facilities and

265 administrative (F&A) costs, also referred to as indirect costs. An individual's institutional base

266 salary is the annual compensation that the applicant organization pays for an individual's

267 appointment, whether that individual's time is spent on research, teaching, patient care, or

268 other activities. Base salary excludes any income that an individual may be permitted to earn

269 outside of the duties to the applicant organization.

270

271 **Biographical Sketches:** Applicants should provide a biographical sketch that describes their

272 education and training, professional experience, awards and honors, and publications relevant

273 to cancer research. Up to two additional biographical sketches for key personnel may be

274 provided. Each biographical sketch must not exceed 2 pages.

275 **Current and Pending Support:** Describe the funding source, duration, and title of all current and

276 pending support for all personnel who have included a biographical sketch with the application.

277 For each award, provide the title, a two-line summary of the goal of the project, and, if relevant,

278 a statement of overlap with the current application.

279

~~280 Applications that are missing one or more of these components, exceed the specified page,~~

~~281 word, or budget limits, or do not meet the eligibility requirements listed above will be  
282 administratively rejected without review.~~

283

284

#### 285 10.AWARD ADMINISTRATION

286

287 Texas law requires that CPRIT research awards must be made by contract between the applicant  
288 and CPRIT. Texas law specifies several components that must be addressed by the award  
289 contract, including needed compliance and assurance documentation, budgetary review, and  
290 terms relating to intellectual property rights. These contract provisions are specified in CPRIT's  
291 proposed administrative rules, which are available at [www.cprit.state.tx.us](http://www.cprit.state.tx.us). The proposed rule  
292 related to CPRIT contract provisions, as well as other proposed rules regarding the CPRIT grant  
293 process, are expected to become final by November 10, 2009. The public, including applicants,  
294 are invited to provide written comments to CPRIT on the proposed rules by September 28, 2009.  
295 Although CPRIT does not anticipate substantive changes to the final rules, to the extent that the  
296 final rules adopted by CPRIT materially change application requirements provided herein,  
297 applicants will be notified of any changes and provided an opportunity to revise the application  
298 to fully comply with the final rules.

299

300 All CPRIT awards will be made to institutions, not to individuals. Applicants who change their  
301 institutional affiliation during the time period of the award must submit a written request to  
302 CPRIT to transfer the award to the new institution.

303

304 CPRIT requires award recipients to submit an annual progress report. These reports summarize  
305 the progress made toward research goals and address plans for the upcoming year. In addition,  
306 fiscal reporting, human studies reporting, and vertebrate animal use reporting will be required  
307 as appropriate. Continuation of funding is contingent upon receipt of these reports. Forms and  
308 instructions will be made available at [www.cprit.state.tx.us](http://www.cprit.state.tx.us).

309

310

#### 311 11. REQUIREMENT TO DEMONSTRATE AVAILABLE FUNDS

312

313 Texas law requires the cancer research grant recipient to demonstrate that it has an amount of  
314 funds equal to one-half of the grant dedicated to the research that is the subject of the grant

\*\*\*>(Hopefully this rule applies only to PROGRAM 3 and PROGRAM 4 in Section 5 because it makes meaningless all money spent to create a CPRIT Scientific Review Council. Instead the Scientific Review Council should have been created at each Company or Entity providing the matching funds. That Company should make a fair review based on scientific merits among all their applicants. The winner would then have the chance to double their grant with CPRIT. However, it is unlikely that a Company is creating a review panel based on scientific merits to the benefit of the taxpayer, most likely it would be to the benefit of the "corporate profit")<\*\*\*.

315 CPRIT has proposed an administrative rule regarding how a grant recipient may fulfill this  
316 requirement. The proposed rule is available at [www.cprit.state.tx.us](http://www.cprit.state.tx.us). The public, including

317 potential applicants, are invited to provide written comments to CPRIT on the proposed rules by  
318 September 28, 2009. The rule is expected to be final by November 10, 2009.

319

## 320 12. CONTACT INFORMATION

321

### 322 12.1. HelpDesk

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324 HelpDesk support is available for questions regarding user registration and online submission of  
325 applications. Queries submitted via e-mail will be answered within 1 business day. HelpDesk  
326 staff are not in a position to answer questions regarding scientific aspects of applications.

327

328 Dates of Operation: September 15, 2009 to October 8, 2009

329 Hours of Operation: Monday through Friday, 8 a.m. to 5 p.m. Central Time

330 Tel: 866-941-7146

331 E-mail: [ResearchHelp@CPRITGrants.org](mailto:ResearchHelp@CPRITGrants.org)

332

### 333 12.2. Scientific and Programmatic Questions

334

335 Questions regarding the CPRIT program, including questions regarding this or other funding  
336 opportunities, should be directed to the CPRIT Scientific Review Office:

337

338 Tel: 512-305-8491

339 E-mail: [ResearchHelp@CPRITGrants.org](mailto:ResearchHelp@CPRITGrants.org)

340 Web: [www.cprit.state.tx.us](http://www.cprit.state.tx.us)