United States Department of Agriculture

SCBGP PROJECT PROFILE TEMPLATE

AWARD YEARS 2022 FORWARD

The State Plan should include a series of project profiles that detail the necessary information to fulfill the goals and objectives of each project. The acceptable font size for the narrative is 11 or 12 pitch with all margins at 1 inch. The following information must be included in each project profile.

ORGANIZATION DETAIL

Organization Name: XYZ State University

Project Contact Name: Jane Doe

Mailing Address: 123 Main Street, Anywhere, DC 20202

Phone: (111) 222-3333

Email: jane.doe@xyzstate.edu

PROJECT TITLE

Developing RNA Vaccines to Manage Pepino Mosaic Virus

DURATION OF PROJECT

Start Date: 9/30/2023 **End Date:** 9/29/2026

PROJECT PARTNER AND SUMMARY

Include a project summary of 250 words or less suitable for dissemination to the public. A Project Summary provides a very brief (one sentence, if possible) description of your project. A Project Summary includes:

1. *The name of the applicant organization that if awarded a grant will establish an agreement or contractual relationship with the State Department of Agriculture to lead and execute the project,*
2. *The project's purpose, deliverables, and expected outcomes and*
3. *A description of the general tasks/activities to be completed during the project period to fulfill this goal.*

FOR EXAMPLE:
The ABC University will mitigate the spread of citrus greening (Huanglongbing) by developing scientifically-based practical measures to implement in a quarantine area and disseminating results to stakeholders through grower meetings and field days.

The XYZ State University (the University) will explore the mechanisms of the induced resistance of Pepino mosaic virus in tomatoes and to develop novel immunization approaches to induce the resistance.

PROJECT PURPOSE

PROVIDE THE SPECIFIC ISSUE, PROBLEM OR NEED THAT THE PROJECT WILL ADDRESS

Fresh tomato production in the U.S. is valued at $1.4 billion annually. Tomato production, particularly greenhouse tomato production, has expanded rapidly within the State between 2004 and 2008. However, the emergence of PepMV as a pathogen poses a serious challenge to the tomato industry. Infection by the virus affects the quality of fruit and reduces its size, which results in up to 38 percent of the tomato fruit becoming downgraded.

PROVIDE A LISTING OF THE OBJECTIVES THAT THIS PROJECT HOPES TO ACHIEVE

Include as many objectives as needed.

Objective 1:	Determine if the naturally induced resistance in tomatoes is mediated by RNA-based immunity
Objective 2:	Develop two alternate vaccines that can effectively induce the resistance
Objective 3:	Protect tomato plants from PepMV
Objective 4:	Eliminate the risk of late PepMV outbreaks
Objective 5:	
Objective 6:	
Objective 7:	
Objective 8:	
Objective 9:	
Objective 10:	

PROJECT BENEFICIARIES

Estimate the number of project beneficiaries: 520

Does this project directly benefit underserved farmers as defined in the RFA? **Yes** ☐ **No** ☒

Does this project directly benefit beginning farmers as defined in the RFA? **Yes** ☐ **No** ☒

STATEMENT OF ENHANCING SPECIALTY CROPS

By checking the box to the right, I confirm that this project enhances the competitiveness of specialty crops in accordance with and defined by the Farm Bill. Further information regarding the definition of a specialty crop can be found at www.ams.usda.gov/services/grants/scbgp. ☒

CONTINUATION PROJECT INFORMATION

Does this project continue the efforts of a previously funded SCBGP project? **Yes** ☐ **No** ☒

If you have selected "yes", please address the following:

DESCRIBE HOW THIS PROJECT WILL DIFFER FROM AND BUILD ON THE PREVIOUS EFFORTS

N/A.

PROVIDE A SUMMARY (3 TO 5 SENTENCES) OF THE OUTCOMES OF THE PREVIOUS EFFORTS

N/A.

PROVIDE LESSONS LEARNED ON POTENTIAL PROJECT IMPROVEMENTS

What was previously learned from implementing this project, including potential improvements?

N/A.

How are the lessons learned and improvements being incorporated into the project to make the ongoing project more effective and successful at meeting goals and outcomes?

N/A.

DESCRIBE THE LIKELIHOOD OF THE PROJECT BECOMING SELF-SUSTAINING AND NOT INDEFINITELY DEPENDENT ON GRANT FUNDS

N/A.

OTHER SUPPORT FROM FEDERAL OR STATE GRANT PROGRAMS

The SCBGP will not fund duplicative projects. Did you submit this project to a Federal or State grant program other than the SCBGP for funding and/or is a Federal or State grant program other than the SCBGP funding the project currently?

Yes ☒ **No** ☐

IF YOUR PROJECT IS RECEIVING OR WILL POTENTIALLY RECEIVE FUNDS FROM ANOTHER FEDERAL OR STATE GRANT PROGRAM

Identify the Federal or State grant program(s).

USDA Special Projects Grant Program

Describe how the SCBGP project differs from or supplements the other grant program(s) efforts.

The University presently has received matching funds from the USDA Special Projects Grant Program to provide one-half salary for the Senior Research Specialist. This individual will coordinate most of the laboratory operations and perform a majority of the laboratory and greenhouse experiments. This project will not be a duplicative effort, but rather enhance the program by providing additional dollars to elevate the part-time position to full time status.

EXTERNAL PROJECT SUPPORT

Describe the specialty crop stakeholders who support this project and why (other than the applicant and organizations involved in the project).

The Tomato Association and its 500 members support this project. The members have recently identified PepMV as the greatest threat to their crops and specifically approached the researchers to request their assistance in finding solutions to it.

EXPECTED MEASURABLE OUTCOMES

SELECT THE APPROPRIATE OUTCOME(S) AND INDICATOR(S)/SUB-INDICATOR(S)

You must choose at least one of the seven outcomes listed in the SCBGP Performance Measures, which were approved by the Office of Management and Budget (OMB) to evaluate the performance of the SCBGP on a national level.

OUTCOME MEASURE(S)

Select the outcome measure(s) that are applicable for this project from the listing below.

- [ ] **Outcome 1:** Increasing Consumption and Consumer Purchasing of Specialty Crops
- [x] **Outcome 2**: Increasing Access to Specialty Crops and Expanding Specialty Crop Production and Distribution
- [ ] **Outcome 3**: Increase Food Safety Knowledge and Processes
- [ ] **Outcome 4**: Improve Pest and Disease Control Processes
- [ ] **Outcome 5**: Develop New Seed Varieties and Specialty Crops
- [x] **Outcome 6**: Expand Specialty Crop Research and Development
- [ ] **Outcome 7**: Improve Environmental Sustainability of Specialty Crops

OUTCOME INDICATOR(S)

Provide at least one indicator listed in the SCBGP Performance Measures and the related quantifiable result. If you have multiple outcomes and/or indicators, repeat this for each outcome/indicator.

FOR EXAMPLE:

Outcome	Indicator	Indicator Description	Value
1	1.1a	Total number of consumers who gained knowledge about specialty crops, Adults	132

Outcome	Indicator	Indicator Description	Value
2	2.7d	Increased specialty crop grower participation	1.00
6	6.4a	Number of views/reads of published research/data	1,250.00

Outcome	Indicator	Indicator Description	Value

MISCELLANEOUS OUTCOME MEASURE

In the unlikely event that the outcomes and indicators above the selected outcomes are not relevant to your project, you must develop a project-specific outcome(s) and indicator(s) which will be subject to approval by AMS.

N/A.

DATA COLLECTION TO REPORT ON OUTCOMES AND INDICATORS

Explain how you will collect the required data to report on the outcome and indicator in the space below.

To monitor the success of the project, we will meet together regularly as a research team to discuss our progress towards the development of a vaccine and its distribution. Once the vaccine has been developed or is under way, we will work together to develop presentations to be shared and published with the growers at Agricultural Center Field Day and the annual American Phytopathology Meeting. The success of the project will be measured by the attendance of the presentations and the clicks/reads of the published research. At least 30 percent of the attendees/viewers at the presentations will indicate an interest in using the vaccine.

BUDGET NARRATIVE

All expenses described in this Budget Narrative must be associated with expenses that will be covered by the SCBGP. If any matching funds will be used and a description of their use is required by the State department of agriculture, the expenses to be covered with matching funds must be described separately. Applicants should review the Request for Applications section 4.0 Funding Considerations prior to developing their budget narrative.

BUDGET SUMMARY

Expense Category	Funds Requested
Personnel	$ 27,000.00
Fringe Benefits	$ 9,585.00
Travel	$ 1,608.00
Equipment	$ 5,000.00
Supplies	$ 14,830.00
Contractual	$ 0.00
Other	$ 5,500.00
Direct Costs Sub-Total	$ 63,523.00
Indirect Costs	$ 0.00
Total Budget	$ 63,523.00

PERSONNEL

List the organization's employees whose time and effort can be specifically identified and easily and accurately traced to project activities that enhance the competitiveness of specialty crops. See the Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Salaries and Wages, and Presenting Direct and Indirect Costs Consistently under section 4.7.1 for further guidance. Fill personnel information in space below as needed.

#	Personnel Name/Title	Level of Effort (# of hours OR % FTE)	Funds Requested
1	Senior Research Specialist	10% FTE	$ 21,000.00
2	Undergraduate Students	500 hours	$ 6,000.00
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Personnel Subtotal: $ 27,000.00

PERSONNEL JUSTIFICATION

For each individual listed in the above table, describe the activities to be completed by name/title including approximately when activities will occur. Add more personnel by copying and pasting the existing listing or deleting personnel that aren't necessary.

Example: Personnel 1: Description and justification
Personnel 2: Description and justification

Personnel 1: Determine if RNA is involved in the natural resistance (09/2023 - 01/2024);
Construct an infectious cDNA clone for PepMV (01/2024 - 06/2024);
Construct an RNA immunization vector (06/2024 - 08/2024);
Develop an attenuated PepMV strain (08/2024 - 05/2025);
Test the efficacy of the immunization vector (03/2025 - 12/2025)

Personnel 2: Determine if RNAi is involved in the natural resistance (09/2023 - 01/2024);
Construct an infectious cDNA clone for PepMV (01/2024 - 06/2024);
Construct an RNA immunization vector (06/2024 - 08/2024);
Develop an attenuated PepMV strain (08/2024 - 05/2025);
Test the efficacy of the immunization vector (03/2025 - 12/2025)

FRINGE BENEFITS

Provide the fringe benefit rates for each of the project's salaried employees described in the Personnel section that will be paid with SCBGP funds.

#	Fringe Benefits Name/Title	Fringe Benefit Rate	Funds Requested
1	Senior Research Specialist	44.74%	$ 9,387.00
2	Undergraduate Students	3.3%	$ 198.00
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Fringe Subtotal: $ 9,585.00

TRAVEL

Explain the purpose for each Trip Request. Please note that travel costs are limited to those allowed by formal organizational policy; in the case of air travel, project participants must use the lowest reasonable commercial airfares. For recipient organizations that have no formal travel policy and for-profit recipients, allowable travel costs may not exceed those established by the Federal Travel Regulation, issued by GSA, including the maximum per diem and subsistence rates prescribed in those regulations. This information is available at http://www.gsa.gov. See the Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Travel, and Foreign Travel for further guidance.

#	Trip Destination	Type of Expense (airfare, car rental, hotel, meals, mileage, etc.)	Unit of Measure (days, nights, miles)	# of Units	Cost per Unit	# of Travelers Claiming the Expense	Funds Requested
1	City X and City Y	Car rental	Days	7	$ 32.00	1	$ 224.00
2	City X and City Y	M&IE	Days	7	$ 25.00	1	$ 175.00
3	City X and City Y	Lodging	Nights	2	$ 60.00	1	$ 120.00
4	Nashville, TN	Airfare	Flight 1	1	$ 349.00	1	$ 349.00
5	Nashville, TN	M&IE	Days	5	$ 49.00	1	$ 245.00
6	Nashville, TN	Lodging	Nights	5	$ 99.00	1	$ 495.00
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Travel Subtotal: $ 1,608.00

TRAVEL JUSTIFICATION

For each trip listed in the above table, describe the purpose of this trip and how it will achieve the objectives and outcomes of the project. Be sure to include approximately when the trip will occur. Add more trips by copying and pasting the existing listing or delete trips that aren't necessary.

Example: Trip 1: (Approximate Date of Travel MM/YYYY), Justification
Trip 2: (Approximate Date of Travel MM/YYYY), Justification

Trip 1: 05/2024, field surveys in City Y (4-day trips); field surveys in City X (2 overnight trips); and the Annual Agricultural Center Field Day (1 day trip)

Trip 2: 01/2024, annual - American Phytopathological Society to present the research completed to date.

CONFORMING WITH YOUR TRAVEL POLICY

By checking the box to the right, I confirm that my organization's established travel policies will be adhered to when completing the above-mentioned trips in accordance with 2 CFR 200.474 or 48 CFR subpart 31.2 as applicable.

EQUIPMENT

Describe any special purpose equipment to be purchased or rented under the grant. ''Special purpose equipment'' is tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost that equals or exceeds $5,000 per unit and is used only for research, medical, scientific, or other technical activities. See the Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Equipment - Special Purpose for further guidance

Rental of "general purpose equipment'' must also be described in this section. Purchase of general purpose equipment is not allowable under this grant. See Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Equipment - General Purpose for definition, and Rental or Lease Costs of Buildings, Vehicles, Land and Equipment.

#	Equipment Item Description	Rental or Purchase	Acquire When?	Funds Requested
1	96-well thermocycler	Purchase	10/2023	$ 5,000.00
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Equipment Subtotal: $ 5,000.00

EQUIPMENT JUSTIFICATION

For each Equipment item listed in the above table describe how this equipment will be used to achieve the objectives and outcomes of the project. Add more equipment by copying and pasting the existing listing or delete equipment that isn't necessary.

Example: Equipment 1: Description and justification
Equipment 2: Description and justification

Equipment 1: The 96-well thermocycler will be purchased to accommodate the large numbers of PCR-related experiments outlined in the project.

SUPPLIES

List the materials, supplies, and fabricated parts costing less than $5,000 per unit and describe how they will support the purpose and goal of the proposal and enhance the competitiveness of specialty crops. See Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Supplies and Materials, Including Costs of Computing Devices for further information.

#	Supplies Item Description	Per-Unit Cost	# of Units/Pieces Purchased	Acquire Date?	Funds Requested
1	Greenhouse - pots	0.5	400	10/2023	$ 200.00
2	Greenhouse - 50 lb bags of soil	25	10	10/2023	$ 250.00
3	Greenhouse - Osmocote fertilizer	50	1	10/2023	$ 50.00
4	Columns for RNA and DNA isolati	1000	12	10/2023	$ 12,000.00
5	Gilson Pipetteman (each set consi	1165	2	10/2023	$ 2,330.00
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Supplies Subtotal: $ 14,830.00

SUPPLIES JUSTIFICATION

Describe the purpose of each supply listed in the table above purchased and how it is necessary for the completion of the project's objective(s) and outcome(s).

Example: Supply 1: Description and justification
Supply 2: Description and justification

Supplies 1-3: Greenhouse supplies required to grow the tomato plants to be included in the analysis.

Supply 4: The laboratory supplies are expendable supplies required on a monthly basis to run the proposed tests. Because they are not reusable, they have to be replenished on a monthly basis.

Supply 5: Gilson Pipetteman sets are necessary as components for the analysis of PepMV.

CONTRACTUAL/CONSULTANT

Contractual/consultant costs are the expenses associated with purchasing goods and/or procuring services performed by an individual or organization other than the applicant in the form of a procurement relationship. If there is more than one contractor or consultant, each must be described separately. (Repeat this section for each contract/consultant.)

ITEMIZED CONTRACTOR(S)/CONSULTANT(S)

Provide a list of contractors/consultants, detailing out the name, hourly/flat rate, and overall cost of the services performed. Please note that any statutory limitations on indirect costs also apply to contractors and consultants.

#	Contractual Name/Organization	Hourly Rate/Flat Rate	Funds Requested
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Contractual/Consultant Subtotal: $ 0.00

CONTRACTUAL JUSTIFICATION

Provide for each of your real or anticipated contractors listed above a description of the project activities each will accomplish to meet the objectives and outcomes of the project. Each section should also include a justification for why contractual/consultant services are to be used to meet the anticipated outcomes and objectives. Include timelines for each activity. If contractor employee and consultant hourly rates of pay exceed the salary of a GS-15 step 10 Federal employee in your area, provide a justification for the expenses. This limit does not include fringe benefits, travel, indirect costs, or other expenses. See Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Contractual and Consultant Costs for acceptable justifications.

Example: Contractual 1: Description and justification
Contractual 2: Description and justification

CONFORMING WITH YOUR PROCUREMENT STANDARDS

By checking the box to the right, I confirm that my organization followed the same policies and procedures used for procurements from non-federal sources, which reflect applicable State and local laws and regulations and conform to the Federal laws and standards identified in 2 CFR Part 200.317 through.326, as applicable. If the contractor(s)/consultant(s) are not already selected, my organization will follow the same requirements.

OTHER

Include any expenses not covered in any of the previous budget categories. Be sure to break down costs into cost/unit. Expenses in this section include, but are not limited to, meetings and conferences, communications, rental expenses, advertisements, publication costs, and data collection.

If you budget meal costs for reasons other than meals associated with travel per diem, provide an adequate justification to support that these costs are not entertainment costs. See Request for Applications section 4.3 Allowable and Unallowable Costs and Activities, Meals for further guidance.

#	Other Item Description	Per-Unit Cost	Number of Units	Acquire Date?	Funds Requested
1	Publishing costs	1500	1	1/2026	$ 1,500.00
2	Rental of transgenic greenhouse	140	28.5	10/2023	$ 4,000.00
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Other Subtotal: $ 5,500.00

OTHER JUSTIFICATION

Describe the purpose of each item listed in the table above purchased and how it is necessary for the completion of the project's objective(s) and outcome(s).

Example: Other 1: Description and justification
Other 2: Description and justification

Other 1: Publishing costs partially defray costs of publishing the results of the project.

Other 2: Rental of transgenic greenhouse space to grow the tomatoes for testing (including the winter).

INDIRECT COSTS

The indirect cost rate must not exceed 8 percent of any project's budget. Indirect costs are any costs that are incurred for common or joint objectives that therefore, cannot be readily identified with an individual project, program, or organizational activity. They generally include facilities operation and maintenance costs, depreciation, and administrative expenses. See Request for Applications section 4.2.1 Limit on Administrative Costs and Presenting Direct and Indirect Costs Consistently for further guidance.

Indirect Cost Rate	Funds Requested

Indirect Subtotal: $ 0.00

PROGRAM INCOME

Program income is gross income—earned by a recipient or subrecipient under a grant—directly generated by the grant-supported activity or earned only because of the grant agreement during the grant period of performance. Program income includes, but is not limited to, income from fees for services performed; the sale of commodities or items fabricated under an award (this includes items sold at cost if the cost of producing the item was funded in whole or partially with grant funds); registration fees for conferences, etc.

Source/Nature of Program Income	Description of how you will reinvest the program income into the project to enhance the competitiveness of specialty crops	Estimated Income

Program Income Total: $ 0.00

Clear Form