

JAMES S. MCDONNELL FOUNDATION - GRANT FINANCIAL REPORT FORM

Due annually within 90 days of grant anniversary date

Report Date: 12/4/2007 *(example: 11/1/09 - 10/31/10)*
 Report Period: 11/1/06 - 10/31/07 *(use annual anniversary date from award agreement or email reminder)*
 JSMF Grant #: 560026006 *(usually a 9 digit number)*
 Awardee Internal Reference #: _____
 Grant Title: Learning about value in a complex world
 Principal Investigator(s): Portia L. Johnson, Ph.D.
 Grantee Institutional Name: Chatman University
 & Address: Office of Research & Project Accounting
5825 M.R. Williams Avenue
St. Louis, MO 63112
 Grant Reporting Frequency: Annual *(options: annual, biennial, mid-term, or final)*
 Award Program: Understanding Human Cognition *(options: Understanding Human Cognition, Studying Complex Systems, Researching Brain Cancer, Cognitive Rehabilitation, or other)*
 Award Type: Collaborative Award *(options: Research Award, Collaborative Award, Scholar Award, Special Initiative, Planning Grant)*

REPORT OF RECEIPTS AND EXPENDITURES

REVENUE

APPROVED AMOUNT OF AWARD: \$ **1,800,000.00**
 TOTAL AMOUNT RECEIVED FROM JSMF TO DATE: \$ **1,183,480.41**
 TOTAL REVENUE: \$ **1,183,480.41** (+/- net of stock proceeds/sales fees)

EXPENDITURES	(Use Amounts From Approved Budget)			
Approved Budget Line Item Categories	Planned	Actual	Difference	% Variance (-) Over
PERSONNEL:				
Statistician	\$ 88,379.00	\$ 32,869.03	\$ 55,509.97	62.8%
TOTAL PERSONNEL	\$ 88,379.00	\$ 32,869.03	\$ 55,509.97	
DIRECT COSTS				
Equipment	\$ 45,000.00	\$ 46,680.00	(\$1,680.00)	-3.7%
Supplies	\$ 18,000.00	\$ 31,009.60	(\$13,009.60)	-72.3%
Travel	\$ 30,000.00	\$ 10,435.96	\$19,564.04	65.2%
Subcontract (XXX University)	\$ 64,100.00	\$ 47,969.15	\$16,130.85	25.2%
Subcontract (YYY University)	\$ 107,116.00	\$ 58,296.53	\$48,819.47	45.6%
Subcontract (ZZZ University)	\$ 224,346.00	\$ 35,854.74	\$188,491.26	84.0%
TOTAL	\$ 576,941.00	\$ 263,115.01	\$313,825.99	

ENCUMBRANCES (invoiced or billed but not paid) BALANCE \$ 920,385.40
 WE REPORT A 'CARRY-OVER' FUND BALANCE IN THE AMOUNT OF: \$ 920,385.40

Note: A revised budget is needed if carryover funds will be reallocated differently from the approved budget **AND** if the additional amount exceeds the approved budget line item by 25%.

Revision Attached? (Yes/No) _____
 To be submitted? (Yes/No) _____

I CERTIFY THAT ALL EXPENDITURES REPORTED OR PAYMENTS REQUESTED ARE FOR APPROPRIATE PURPOSES AND ARE IN ACCORDANCE WITH THE AGREEMENT SET FORTH IN THE AWARD DOCUMENTS.

Typed Name/Title: Gwen S. Payne, Sr. Accountant Telephone Number: 314-721-1532
 Email Address: gwen.s.payne@example.com Date of Certification: 12/4/2007