Weston Family Foundation

Program Details – Microbiome Innovations for New Therapies (MINT)

Important Dates*

Information Webinar(s)	Tuesday, September 15, 2026 2:00 PM ET Tuesday, October 6, 2026 2:00 PM ET
Letter of Intent (LOI) Deadline	Friday, October 30, 2026 at 2:00 PM ET
Full Proposal Deadline	Monday, February 15, 2027 at 2:00 PM ET
Anticipated Award Notice	April/May 2027

**Dates subject to change*

About the Foundation

At the Weston Family Foundation (formerly The W. Garfield Weston Foundation), more than 60 years of philanthropy have taught us that there is a relationship between healthy landscapes and healthy people. That is why we champion world-class health research and innovation with the same passion that we support initiatives to protect and restore biodiversity on Canada's unique landscapes. We take a collaborative approach to philanthropy, working alongside forward-thinking partners to advance Canada and create lasting impacts. We aspire to do more than provide funding; we want to enable others to find transformational ways to improve the well-being of Canadians. By supporting transformative research on the microbiome, we are unlocking new pathways to enable healthy aging for the well-being of Canadians and turning emerging science into real-world solutions.

Currently, the Foundation focuses on accelerating microbiome solutions, such as microbiome-based interventions, towards real-world implementation such that they can improve clinically relevant health outcomes relevant to chronic diseases within Canada.

With over $85 million invested across more than 145 microbiome research projects, the Foundation brings a strong commitment to this field.

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Program Overview

The Foundation is scaling up our commitment to microbiome science. As a representation of our amplified commitment, the Foundation is pleased to announce the **Microbiome Innovations for New Therapies** granting program (MINT) to support the translation of microbiome-based interventions into real-world impacts for Canadians. MINT is designed to support early- to mid-stage translational projects that de-risk microbiome-based interventions and advance them toward clinical implementation, adoption, and, where appropriate, commercial or partnership-based pathways that enable scale. This program will provide funding to support innovative projects that:

a) Advance microbiome-based interventions toward measurable improvements in health outcomes for Canadians
b) Demonstrate a credible roadmap from scientific rationale and biological validation toward clinical implementation
c) Show potential to scale beyond the laboratory through appropriate partnerships, regulatory planning, implementation pathways, or other development strategies

The MINT program is structured as a staged translational funding pathway designed to move promising microbiome-based interventions from early translational validation toward clinical and commercial readiness. Through Stage I, the Foundation intends to support up to 36 projects across two anticipated streams: up to 18 projects through Grant Call I in 2026 and up to 18 projects through Grant Call II in 2027. Each Stage I grant will provide up to $500,000 over a maximum of 30 months to support high-impact, scalable projects that use microbiome-based interventions to modulate the microbiome, enhance therapeutic responses, or improve health outcomes. Further, Stage I projects will receive regular, group-level mentorship from industry, regulatory, clinical, and/or other mentors, as applicable, to prepare their projects for future development.

At the end of the Stage I grant period, successful projects will have the opportunity to compete for Stage II funding of up to $2M and individualized project mentorship from external experts to further de-risk and advance interventions with strong potential for clinical implementation, commercial readiness, and real-world impact. While follow-on funding is not guaranteed, the Foundation will highly prioritize Stage I projects that are intentionally structured to generate the evidence, milestones, partnerships, and development roadmap needed to support a credible transition to Stage II. At Stage II, projects conducting human intervention trials will be prioritized for funding consideration. Applicants with projects that may not fit this pathway but otherwise align strongly with the program goals are encouraged to contact the Foundation to discuss fit.

Through this staged approach, MINT is intended to build a pipeline of increasingly mature microbiome-based interventions that can contribute to the Foundation's long-term goal of clinically implementing commercially viable microbiome-based therapies for diseases affecting Canadians.

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See the breakdown of the MINT program in the table below.

	2027	2028	2029	2030	2031	2032	2033
Grant Call 1	Stage I			Stage II			
Grant Call 2		Stage I			Stage II		

Important things to know about the Foundation:

- Focus is on translational research.
- Funds are provided contingent on meeting milestones. If your project is awarded, funds will be provided in tranches when milestones are completed.
- We focus on scalability and staged translational development. MINT Stage I projects should be designed with a clear path beyond the initial 30-month grant, including the evidence, milestones, partnerships, regulatory considerations, and development activities that would be needed to support future clinical and commercial advancement. Projects that demonstrate strong progress and a credible roadmap toward Stage II development will be highly prioritized for future Foundation funding opportunities, while recognizing that follow-on funding is not guaranteed.
- Our application process is interactive. Applicants are encouraged to connect with the Foundation to discuss their proposals. Applicants will receive feedback and recommendations from reviewers, and if warranted, will be given an opportunity to implement changes.
- Applicants apply with a Letter of Intent (LOI), which will be reviewed internally. Successful LOIs are invited to submit a full proposal and are expected to address reviewers' comments. Historically, ~35% of LOIs go on to the full proposal stage, after which ~60% of full proposals are awarded.
- We provide more than funding. Our grantees also benefit from opportunities such as expert advice from our scientific advisors, industry exposure, networking, and international collaboration opportunities.
- Projects are expected to consider pathways for dissemination, partnership development, and knowledge mobilization to support the advancement and adoption of their findings beyond the scope of the grant.

Institutions and individuals affiliated with and applying through or on behalf of institutions (collectively, "Applicants") should carefully discuss the Program announcement and the terms of this document with the appropriate office at their institution before applying. The submission of an LOI or a Proposal does not bind either the Foundation or the Applicants by any commitment to provide or receive funding, respectively.

Successful Applicants will be required to agree to terms substantially similar to those contained in this document and the Foundation reserves the right to alter, delete or add additional terms in the Grant Agreement between the successful Applicants and the Foundation.

The Foundation reserves the right to accept or reject any or all applications at its discretion and to negotiate the terms of the specific grant agreement with Applicants. The Foundation, at its sole discretion, may change the timeline of the application process.

1. Project Scope

The Microbiome Innovations for New Therapies (MINT) Program provides funding to innovative and scalable projects across Canada that leverage the microbiome to deliver new interventions for improving health in a real-world context. This includes modifying or manipulating the microbiome to confer health benefits or reduce the impact of diseases affecting Canadians. MINT supports translational work that advances microbiome-based interventions along the pathway to clinical implementation, directly contributing to the Foundation's long-term goals.

Projects must be **translational** and identify, validate, or investigate microbiome-based interventions with high potential to treat or prevent disease or enhance therapeutic response to existing therapies. The Foundation will consider all potential chronic disease areas with a demonstrated relevance to Canadians that show strong evidence linking the microbiome.

Projects should seek to develop therapeutic or preventative strategies with strong potential for real-world impact, including a credible pathway toward clinical implementation, adoption, scale, or other routes by which the intervention could improve health outcomes for Canadians, including:

- Health Canada or FDA approved and/or investigational microbiome-relevant drugs, such as small molecules, biologics, and live biotherapeutic products.
- Dietary substrates, including, but not limited to, prebiotics, fibres, or oligosaccharides.
- Microbial-derived products, such as fecal microbiome transplants (FMT), probiotics, and fermented food products.

Projects should identify and develop a scalable, microbiome-based intervention with a clear rationale for how the intervention is expected to improve health outcomes in Canadians. These interventions should have potential to expand on these findings in large clinical intervention studies. Therefore, the following examples are **not eligible**:

- Dietary interventions where the gut microbiome is an exploratory outcome
- Testing existing probiotics/prebiotics available in the Canadian market in a new health condition without a strong rationale for why the probiotic/prebiotic could improve the health condition

Projects must develop or build on therapies that influence the microbiome, or contain microbiome components, to improve health outcomes in targeted patient cohorts and/or the general population.

Ideal Stage I projects should generate the translational evidence needed to mature a microbiome-based intervention toward larger-scale development, clinical trials, and commercial readiness. Applicants should clearly describe how the proposed 30-month project will de-risk the intervention and what additional work would be required in a future Stage II project. Relevant maturation activities may include, but are not limited to: generation of human-relevant evidence; validation in target populations or human-derived models; optimization of intervention design, formulation, delivery, or dosing; clarification of regulatory and ethics pathways (including engaging with consulting services); early commercialization and IP planning; manufacturing or scale-up considerations; identification of clinical, industry, or implementation partners; and preparation for larger clinical studies.

The Foundation will highly prioritize projects that can clearly articulate how the Stage I project will position the intervention for a potential Stage II application of up to $2M. Applicants whose projects are strongly aligned with the MINT goals but may follow a different development pathway are encouraged to contact the Foundation to discuss fit.

Please see the end of this document for definitions of key terms.

2. Funding Specifications

Through this funding call, the Foundation anticipates supporting up to 18 Stage I projects, with each project eligible to receive up to $500,000 over a maximum of 30 months. This call represents the first of two anticipated Stage I grant calls under MINT. The Stage I grant call in 2027 is expected to support up to 18 additional projects, resulting in up to 36 Stage I projects across the broader MINT pathway. The number of grants awarded is contingent on the receipt of a sufficient number of high-quality applications, and the Foundation reserves the right to adjust the funding envelope at its sole discretion. At the end of the Stage I grant period, successful projects may have the opportunity to compete for Stage II funding of up to $2M to further advance clinically and/or commercially viable interventions.

- Throughout MINT's Stage I, projects will receive quarterly group-level mentorship for regulatory, commercial, clinical, manufacturing, and other external experts to equip projects with the necessary tools to move toward real-world impact. At the end of Stage I, the Foundation aims to conduct a workshop convening grantees to present their findings and network with potential industry collaborators. Projects that progress to Stage II will receive individualized mentorship to best position their projects for success.
- All Foundation grants are provided in tranches and contingent upon grantees meeting pre-defined project milestones and reporting requirements, including but not limited to the submission of progress/milestone and/or annual reports.

- Project activities must be completed and funds used over a period of up to 30 months for consideration for further Foundation funding.
- Funds will be granted only for direct costs that are appropriate and justifiable for the work proposed. Consulting services that directly support project execution (e.g., IP, regulatory, commercialization, or business strategy support) are allowable direct costs where justifiable in the budget.
- Items and cost must be clearly described in the budget of the full Proposal.
- Funds cannot be used for large equipment purchases, computer purchases, administrative costs, institutional overhead or any indirect costs, unless written approval from the Foundation is received.
- Funds cannot be used for administrative or indirect costs or for salaries for people who already receive salaries from their institutions.
- The funds awarded may deviate from the full amount requested.
- Travel expenses to scientific conferences/meetings to present work funded by the Foundation can be included in the budget.
- Each item and its cost must be clearly described in the budget (provided at the proposal stage).
- Budgets should be developed to account for rising costs during the tenure of the project. This could be calculated at 2% per year.
- A proportion of the funds can be used for goods and services procured outside of Canada (e.g., licensing IP, costs associated with accessing a database). However, it is required that the majority of funds will be spent on work (i.e., goods and services) conducted in Canada.
    - The Foundation does not guarantee renewal or continuation of grant funding though it may decide to provide additional funding to scale projects at its discretion. For the MINT program, projects that demonstrate strong progress during Stage I may have the opportunity to compete for subsequent Stage II funding of up to $2M to further de-risk and advance commercially viable interventions for downstream clinical implementation, adoption, and scale.
- Grantees are eligible to apply for funding through other Foundation programs.

Responsibility for the planning, direction, and execution of the proposed project will rest solely with the applicants.

LOIs are welcome from both Canadian **qualified donees** and Canadian **non-qualified donees** as defined by the CRA with projects that are keeping with the program guidelines and describing proposed work that is charitable. Only those who successfully pass both the LOI review and an internal diligence review by the Foundation will be invited to submit a full proposal.

Multiple institutions: In the event of collaboration between multiple institutions, it is the responsibility of the Principal Applicant to subcontract and distribute/manage funds appropriately and in a timely manner.

Full or partial support of projects: The Foundation can support a full project or a portion of any project. In the case of the latter, applicants should provide proof of the necessary resources to complete the full project.

Conditional funding and milestones: Grants are conditional on grantees meeting pre-determined milestones and providing deliverables, including submission of progress reports and/or participation in Foundation sponsored assessment meetings. Continued support is contingent upon the progress reports being favourably reviewed by the Foundation.

Supplemental funding: The Foundation encourages grantees to seek additional funds outside the Weston Family Foundation to further their work once the term of the initial grant has ended. The Foundation does not guarantee renewal or continuation of grants. The Foundation may, at its discretion, seek to further support successful projects. Grantees are also eligible to apply for funding through other Foundation programs.

3. Intended Outcomes and Impacts

The MINT program contributes to the Weston Family Foundation's goals by supporting translational projects that advance microbiome-based interventions from proof-of-concept toward clinical and commercial readiness. MINT is designed to de-risk promising interventions at critical early stages by generating early human-relevant evidence and addressing key barriers to scale, regulation, and adoption.

Through milestone-driven funding, integrated mentorship, and pathways to follow-on support of up to $2M, MINT builds the scientific, translational, and commercial foundations required for microbiome-based interventions to progress toward clinical implementation. Collectively, outcomes from MINT-funded projects are expected to strengthen the pipeline of viable interventions that, over time and across programs, advance the Foundation's long-term goal of delivering a commercially viable microbiome-based therapy for Canadians.

MINT is also intended to support a nearer-term translational roadmap for our Microbiome portfolio. Over the next several years, the Foundation aims to identify, support, and mature a portfolio of early-stage projects with the strongest potential to progress toward later development. By the end of MINT's Stage I, successful projects should be better positioned to define the next major development steps required for clinical and commercial advancement, including the evidence base, partnerships, regulatory considerations, implementation pathway, and resources needed to move toward patient impact.

Progress toward the Microbiome Initiative's goals will be driven by programs like MINT that generate translationally meaningful outcomes and reduce key barriers to clinical and commercial advancement through expert guidance and mentorship. As an early-to-mid translational program, MINT is expected to produce outcomes that signal increased readiness of microbiome-based interventions for downstream development, adoption, and scale.

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The following examples illustrate the types of outcomes that may be generated through MINT-funded projects.

Outcome	Measure (e.g.,)
Commercial Developments	IP filings/disclosure, license agreements
Leveraged Funding	Additional funding support during or after the MINT grant to expand on or continue the project
Non-Scientific Journal Content	Mentions/coverage via traditional news outlets, conferences/meeting presentations
Scientific Journal Content	Scholarly publications (e.g., journal articles)
Partnerships/Collaborations	New partnerships/collaborations (academic, industrial)
Resources	New research tools (e.g., cell/animal models, assays, libraries), new methodology, datasets
Clinical or Implementation Readiness	Defined next clinical step, regulatory or ethics pathway, clinical study design, implementation partner, or plan for adoption in a relevant care pathway

Program Eligibility

LOIs are welcome from both Canadian **qualified donees** and Canadian **non-qualified donees** as defined by the CRA with projects that are keeping with the program guidelines and describing proposed work that is charitable. Only those who successfully pass both the LOI review and an internal diligence review by the Foundation will be invited to submit a full proposal. Funds can also be used to support the Canadian portion of collaborations with members from other geographies.

- Principal Applicant must be a researcher working in Canada at least 50% of the time at or above the level of Assistant Professor or equivalent. Principal Applicants cannot be at the post-doctoral level.
- Co-Applicants must be at the post-doctoral level or above and working in Canada.
- Collaborators must be at the post-doctoral level or above and can be working outside of Canada.

Applicants can submit a maximum of one application, when acting as a Principal Applicant, to the program. Applicants may appear as a Co-Applicant or Collaborator on any number of applications. Current or past Foundation grantees can also submit applications. As applicable, any Proposal submitted pursuant to this Program must be approved by the institution on whose behalf or through which the Proposal is being submitted.

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Application Process

The application process consists of two stages: Letters of Intent (LOIs) and Proposals. **Applicants may submit a maximum of one application, when acting as a Principal Applicant, to the program.** Applicants must submit a LOI to the Foundation to be considered for Proposal submission to the Program. Each LOI will be reviewed internally by the Foundation with consultation from expert advisors as required. The LOI stage is intended to assess alignment with program objectives, translational potential, and overall fit, while the Proposal stage will require more detailed articulation of milestones, methodology, and project execution plans.

Applicants should note that the LOI and Proposal stages refer to the application process for the Stage I grant. Separately, MINT is designed as a staged funding pathway, in which successful Stage I projects may later have the opportunity to compete for Stage II funding following completion of the 30-month Stage I grant period.

The LOI stage of the application process is a brief but significant stage of evaluation. It is expected that only a small proportion of applicants will be invited to submit full Proposals.

Applicants whose LOIs meet the review criteria and are favourably reviewed will be invited to submit a full Proposal. Proposal instructions and LOI feedback will be forwarded along with the invitation. Applicants will be required to obtain and submit relevant institutional signatures at the Proposal stage. Complete Proposals will be reviewed by a review panel comprising of international subject experts. Unsuccessful Proposals may receive written feedback from the scientific review committee at the discretion of the Foundation. No appeal process is available.

If awarded, applicants must ensure that the grant agreement is reviewed and signed **within four weeks of notification of selection**; otherwise, the Foundation reserves the right to cancel the grant. We will not entertain modifications to the terms listed within our agreements unless an organization can provide proof of statutory restrictions or limitations that prevent them from fulfilling the terms of the agreement.

Our application process is interactive. Applicants are encouraged to connect with the Foundation to discuss their prospective applications for eligibility and fit. During the review process you may receive additional questions from the review committee that need to be addressed prior to final decisions being made.

The Foundation, at its sole discretion, may change the timeline of the application process.

LOIs and Proposals must be submitted using the Foundation's online grants management system, available at westonfdn.smartsimple.ca. Applicants are encouraged to contact staff at microbiome@westonfoundation.ca for any questions related to their application.

The Foundation will be offering two online information webinars on **Tuesday, September 15** and **Tuesday, October 6, 2026**, at 2:00 PM ET during which prospective applicants can learn more about the program. Both webinars will feature the same content, resources and

information and are designed to provide multiple opportunities for prospective applicants to engage with the program team prior to the LOI deadline. Details will be forwarded to interested applicants in advance of the meeting and can be found on the Foundation website. Applicants are asked to indicate their intention to join the meeting by emailing microbiome@westonfoundation.ca or by signing up at the event page through the Foundation website. A recording of the webinar will be available online.

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Review Criteria

The following criteria will be considered in reviewing LOIs and Proposals.

At the LOI stage, the primary focus will be on eligibility, the proposed project, and a clear link between the project and the goals of the program.

- Eligibility: Is the principal applicant eligible to receive funding as per all eligibility requirements?
- Scope: Is the project consistent with the program strategy/funding priorities?
- Innovation: Does the project challenge/expand current paradigms in the field? Will the work refine, improve, or be a new application of existing knowledge, methods, or technologies? Does the project demonstrate potential to lead to novel applications?
- Potential for Real-world Impact: If successful, can the project be scaled to positively affect more people, interventions, or care pathways? Does the project have a credible path toward future clinical, commercial, or implementation-focused development? Is the proposed work structured in a way that could generate the evidence or milestones needed to support a future Stage II application?
- Likelihood of Success: How likely is it that the stated goals will be achieved? Are the project goals grounded in the state of the field and strength of the team?
- Preliminary data: Up to one page of preliminary data can be attached to the application to support the rationale, hypothesis, and feasibility of the study.
- Proposals submitted for funding consideration will be adjudicated by a panel of external experts. Reviewers will consider the potential impact and will strongly consider the strength of the project's proposed milestones, alignment with program aim and priority areas, appropriateness of the budget, the suitability of the project team, knowledge mobilization plans, scalability and the potential for translational outcomes and pathways to real-world impact, including clinical, implementation, partnership, regulatory, or commercialization outcomes, as appropriate.
- Milestones: Are the proposed milestones and timeline feasible and appropriate? Has the team identified critical milestones and relevant contingencies? Does the applicant indicate a well-thought-out strategy with go/no-go checkpoints that will help mitigate risk? Have potential problem areas been adequately considered and addressed? What are next steps if work is unsuccessful?
- Budget: Is the proposed budget reasonable and appropriate?
- Team: Does the project team have the capabilities and capacity to reliably execute the project? Does the team have the appropriate co-production partners that are required to provide input or direction for the project? Does the proposed project capitalize on any unique resources or competencies? Does the team have experience in translating scientific findings? Have strategic partners been identified that will facilitate the mobilization and application of newly discovered knowledge?
- Knowledge mobilization: Are there clear and appropriate next steps beyond this study/project to continue development if successful? Have the appropriate partnerships and collaborations been established to facilitate long-term impact?

- Scalability: Is there a realistic likelihood of scaling this project to serve a greater population/disease?
- Impact: Does the proposed project deliver practical and measurable outcomes (quantitative and/or qualitative) that have meaningful and lasting impact?
- Canadian Context: Does the project meaningfully consider, plan for and safeguard benefit to Canada or Canadians?
- Roadmap to Stage II Development: Does the project present a credible pathway beyond Stage I? Have the applicants clearly identified the milestones, partnerships, and resources that would be needed to position the project for future Stage II funding and eventual clinical implementation?
- Integrated Development Plan (IDP): If the project is successful, what are the next steps needed to advance the intervention toward real-world application, clinical implementation, and commercial readiness? Does the IDP outline both the short-term Stage I milestones and the longer-term development roadmap that could support a future Stage II application? What additional resources (financing, infrastructure, collaborators) will be needed? What is the timeline to delivery? Please consider both short-term and long-term steps.

Regulatory and Ethics Approval

It is highly recommended that applicants initiate the process of seeking regulatory approval (e.g., Health Canada Approval, ethics etc.) where required, as early as possible. Obtaining necessary regulatory approvals can introduce significant lag into a research project and be a major hurdle to success. The review panels will prioritize projects that proactively seek to understand and address necessary regulatory approvals (Health Canada, ethics) in advance of the launch of the project. Approval of ethics will be a critical first milestone of projects selected for funding.

The Foundation will permit a **maximum** period of two months from the project start date for grantees to secure the required regulatory approvals. Projects facing longer approval timelines will be reconsidered and may be terminated by the Foundation. If grantees deal with any delays in regulatory approvals, the Foundation encourages them to report the delay as soon as possible and ideally before any relevant progress reports. Failure to report delays in milestones being accomplished within the proposed project timeframe may result in amendments to the project, or in rare cases, a termination of the project.

Power Calculations

Applicants should provide appropriate power calculations to justify project scale and demonstrate statistical significance of proposed studies and prospective outcomes (as necessary). It is highly recommended that applicants include a power calculation in the Proposal phase of the application, and that recruitment should exceed the calculated number of subjects based on the calculation. If a power calculation is not possible due to a lack of previous research, the power calculation of the current gold standard option or closest related therapeutic option should be included.

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Important Notes

The Weston Family Foundation provides more than funding. Our grantees may also benefit from opportunities such as expert advice from our scientific advisors, industry exposure, networking, and internal collaboration opportunities.

Mentorship Funded projects will participate in the MINT mentorship program, which is intended to support the non-scientific aspects of intervention development, including clinical translation, regulatory planning, partnership development, implementation, and pathways to real-world impact. Grantees will be paired with mentor(s) with relevant expertise for their project. Mentorship will generally include quarterly group-based 30-minute meetings with assigned mentor(s), during which grantees can discuss progress, challenges, key decisions, and next steps in the development pathway. Grantees will also be expected to submit mentorship reports summarizing what they are learning through mentorship and how those insights may apply to the future direction of the project. Additional details are available in the **Mentorship Instructions** document.

Stage II follow-on funding At the end of the 30-month Stage I granting period, a subset of successful projects may have the opportunity to compete for Stage II funding up to $2M. Stage II funding is intended to support the further development, de-risking, and advancement of microbiome-based interventions with strong potential for clinical implementation, commercial readiness, and real-world impact. Stage II follow-on funding is not guaranteed and will be awarded at the Foundation's discretion.

Use of AI Applicants may use AI tools/models to support background landscape reviews and inform their planning materials (e.g., IDP). Applicants must not input confidential, proprietary, unpublished, or personal information into external AI systems and remain fully responsible for the accuracy and appropriateness of submitted content.

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Reports and Assessments

Grantees are responsible for the completion of the following if a grant is awarded:

Milestones Proposed projects must include clear, quantified milestones that guide the continuation of a project. Pre-determined milestones, as agreed upon by the Grantees and the Foundation before contracting, will be used to determine reporting dates and the distribution of payment tranches. A milestone report will be required one month prior to payment. Note that budgets for specific milestones should reflect actual spending required per milestone, rather than evenly dividing the budget for each milestone. For a given tranche of work, there may be one or more Go/No-Go criteria in which, only if achieved, the work may continue. Otherwise, the project should not move forward, and the grantee should contact the Foundation to discuss next steps. Go/No-Go's may not be required in every tranche. Grantee and Foundation Staff should mutually confirm Go/No-Go's.

Progress and Budget Reports Interim reports on milestone achievement and financial reconciliation are due according to the milestone timelines. An annual progress report including a brief written report with detailed budget reconciliation is due at a minimum every 12 months unless otherwise notified by the Foundation. Submission dates and reporting frequencies will be linked to project milestones and the nature of the project, as agreed upon by the Grantees and Foundation. Failure to submit reports on time may result in a pause of future payments and possible termination of the project.

Final Report Upon completion, a final report will summarize key findings, challenges and next steps, including materials that show results (figures, pictures, publications, etc.) as well as the final budget report.

Foundation Visits Foundation members (staff or Board) may wish to visit grantees to see project work under way.

Financial Accountability Grantees are expected to account for the moneys expended under any Foundation grant; any moneys spent either not in accordance with the approved project or prior to pre-approval of any material change are both recoverable and subject to restitution by the grantees to the Foundation and may be cause for immediate termination of funding. Any funding provided beyond what is needed for the agreed upon project must be immediately reported. The Foundation will then advise how the funding may be directed.

Impact Monitoring Reports Grantees are expected to report impacts related to the funded work, including, but not limited to, academic and media publications, patents and patent licensing, novel academic and commercial partnerships, and follow-on funding. As a number of these items may occur after the grant completes, the Foundation would expect the grantee to report on these metrics annually for up to 3 years after the grant completion.

Mentor Reports Grantees are expected to meet with their assigned mentors quarterly. Grantees will then fill out an annual report to discuss the key impacts of mentorship on their project, including how the mentorship supports the non-scientific aspects of development, which will be signed off by their mentors before submission to the Foundation.

Confidentiality

The Foundation treats all LOIs, proposals, projects, and associated information (collectively, the "Confidential Information") in confidence using reasonable care in protecting such Confidential Information from disclosure to third parties who do not participate in the grant review process and Foundation assessments. All Confidential Information will be used by the Foundation and its review committee for the purposes of reviews and assessments and will be shared only in accordance with the sharing policy as set out herein. Notwithstanding the foregoing, Confidential Information shall not include any information that:

a. was generally known to the public prior to the effective date of this Program announcement;

b. becomes generally known to the public through no unlawful or unauthorized act by any recipient of Confidential Information; or

c. was independently developed by the Foundation or its review committee without reference to Confidential Information.

If the Foundation or any of its review committee members is requested to disclose Confidential Information pursuant to a legal or governmental proceeding, the Foundation shall give the Applicant or other owner(s) of such Confidential Information notice of such disclosure request as soon as is reasonably practicable. Participating reviewers will be subject to the Foundation's standard non-disclosure agreements for such engagements.

Liability and Indemnity

Each applicant pursuant to this program acknowledges and agrees in responding to the program announcement that the applicant shall have no claim against the Foundation, and its respective representatives or affiliates, should such Program response be unsuccessful for any reason. Each applicant hereby releases the Foundation, its representatives, and affiliates, from any cause of action, complaint, or claim in connection with the application process and its outcome.

The Foundation's role in grants awarded pursuant to this program is that of a funder. It is not the sponsor of funded projects. The Foundation will not assume any liability associated with funded projects and each Applicant who is ultimately awarded a grant pursuant to this Program releases the Foundation from any and all liability with respect thereto and further indemnifies the Foundation, and its respective representatives and affiliates, from any claim or loss whatsoever associated with the applicable grant.

Intellectual Property Policy and Intellectual Property Agreements among Collaborators

The Foundation acknowledges that any intellectual property ("IP") that arises from research funded through this program is not the property of the Foundation. The Foundation does require that applicants and collaborators agree on any material IP issues prior to submission of a proposal.

Publication and Sharing Policy

Any presentation, releases, papers, interviews, publication, or other forms of communication dealing with the awarded project or the results from the awarded project must acknowledge the funding provided by the Foundation, in a manner proportionate to the contribution of the Foundation. For example, grantees must acknowledge the Foundation as a funder in the acknowledgements section of publications and add the Foundation's logo to conference presentation acknowledgements sections. Any other use of the Foundation's intellectual property, including its name, logo or trademark requires prior written permission of the Foundation.

The Foundation expects that all tools/reagents (i) funded by and (ii) that result from funded projects will be made readily available to the community for research purposes either freely or at reasonable prices. The Foundation may let the public know of these tools/reagents, so researchers know they are available.

The Foundation requires any clinical trial awarded under any of its funding programs be registered with ClinicalTrials.gov, PDTrials.org, or other appropriate public registries.

Applicant Commitment

Organizations and individuals affiliated with and applying through or on behalf of an organization should discuss the program announcement and the terms of this document with their organization prior to submitting an application (LOI or proposal). The submission of an LOI or a proposal does not bind either the Foundation or the applicants to any commitment to provide or receive funding, respectively. Successful applicants will be required to agree to terms substantially similar to those contained in this document and the Foundation reserves the right to alter, delete or add additional terms within the Grant Agreement between the successful applicants and the Foundation. The Foundation will not negotiate the terms of the specific Grant Agreement with applicants outside of those that are statutory in nature. The Foundation, at its sole discretion, may change the timeline of the application process and will communicate any such changes.

Please note that by applying to this program, you consent to receive emails from the Weston Family Foundation regarding current and future funding programs. You can unsubscribe at any time.

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Foundation Definitions

Microbiome-based interventions: Microbiome-based interventions typically refer to bacterial, dietary, fecal microbial transplant, phage, fungal, or other interventions that alter the composition and/or function of a given microbiome. Bacterial interventions include probiotics or (targeted) antibiotics that increase or decrease the amounts of different bacterial genera, species, and/or strains within the microbial community. Dietary interventions, such as fibre or fermented foods, may alter the microbiome by providing the necessary nutrients for specific microbial communities to thrive. Fecal microbial transplants transfer stools from appropriate donors into patients with a variety of disease states, like *Clostridium difficile*, with the aim to improve disease outcomes. Phage therapy uses bacteriophages, or viruses against bacteria, to target specific bacterial pathogens in the microbiome.

Microbiome-based interventions have been used in several forms over the years to alter drug metabolism, treat disease, and improve general health outcomes. By targeting the microbiome, interventions have the potential to target specific patient subgroups, improve responses to therapy, and personalize patient treatment plans.

> Examples: Patients with type 1 diabetes frequently experience co-morbid gastroenteropathy, which presents with vomiting, nausea, abdominal pain, bloating, constipation, diarrhea, and fecal incontinence. Many of these patients also experience prolonged colonic transit time, which may result in changes in the gut microbiome to increase bacterial fermentation and gas production, potentially worsening symptoms. Further, microbiome-based interventions have shown promise as potential therapies to improve symptoms and insulin sensitivity for patients with type 1 diabetes. A Danish research team tested the safety and clinical efficacy of capsule-based oral fecal microbial transplant (FMTs) treatment in a randomized controlled trial of 20 patients with type 1 diabetes and severe symptoms of gastroenteropathy. They found that capsule-based oral FMT was safe, increased microbial diversity, and significantly improved symptoms and quality of life.

Therapeutic A pharmacological approach (including small molecules, biologics, cell therapies, and vaccines, including drug repositioning and repurposing), medical device, surgical intervention, or magnetic or electrical brain stimulation.

Clinical trial Research in which one or more human subjects are prospectively assigned to one or more interventions to evaluate the effects of those interventions on health-related biomedical or behavioral outcomes.

Translational research Applied research towards developing therapeutics for the prevention, treatment and/or symptomatic management of human disease. For example, for small molecule drug development, this includes target validation to phase II clinical trials.

Tool An item that accelerates translational development of therapeutics, e.g., biomarkers, in vivo assays, drug delivery systems.

- Tools must have a direct impact on the translational development of therapeutics for diseases involving the microbiome and will be valued only on their ability to do this.
- Any value the tools contribute to basic research will not be taken into consideration. For example, tools will not be valued for their ability to identify new targets or understand disease mechanisms.
- Projects covering only the discovery/identification of a tool are out of scope.
    - For biomarkers:
        - Biomarkers must be under development for human disease diagnosis, prognosis, patient stratification to clinical trials, measuring disease progression, and/or to predict/measure response to therapy (e.g., surrogate for a clinical endpoint).
        - Biomarkers should measure pathology of the disease (e.g., fluid, imaging or tissue biopsy derived biomarkers) and not be based on cognitive, neuropsychological or behavioural phenotypes. Genetic biomarkers including somatic mutations, SNPs, epigenetics and gene products are in scope if they meet the other eligibility criteria.
    - For assessment/diagnostic tools,
        - If developing a tool or clinical assessment instrument, the tool must be tested in patients with a relevant disease.
        - Requires discussion of why the new assessment would be better than existing ones.

Principal Applicant

- The individual or organization, with the other co-applicants, is responsible for overseeing the planning, direction, and execution of the proposed project. Only one team member can be designated as the Principal Applicant.
- The Principal Applicant is responsible for handling all correspondence with the Foundation. This includes submitting any requested information.
- If awarded the grant, the Principal Applicant is responsible for managing funds and ensuring that at least one applicant on the grant attends all assessment meetings.
- The Principal Applicant must hold a position at or above the level of Assistant Professor or equivalent and be working at least 50% of the time at a CRA qualified donee institution or non-qualified donee organization located in Canada. Funds will be paid to the institution that the Principal Applicant is affiliated with and appointed at.

Co-Applicant(s):

- Individual(s) who, with the Principal Applicant, are responsible for the planning, direction, and execution of the project.

- Co-Applicants must be at the post-doctoral level or above and working at a CRA-qualified donee institution or non-qualified donee organization located in Canada.

Collaborator(s)

- Administrative or support individual(s) who can act as a contact person.
- Individual(s) or organizations who contribute substantially to the project but do not lead the work.
- Industry partners.
- Can be NQDs.
- Collaborators can be working outside of Canada.
- For research projects, collaborators must be at the post-doctoral level or above.

For any questions regarding the program, please contact Caroline Seiler at caroline.seiler@westonfoundation.ca.