REQUEST FOR PROPOSALS (RFP)

February 6th, 2026
Scientific Affairs
900 Ridgebury Rd
P.O. Box 368
Ridgefield, CT 06877-0368

CRM REQUEST FOR PROPOSALS

Dear Investigator,

Boehringer Ingelheim would like to invite your institution to participate in our 2026 Cardiovascular, Renal, Metabolic (CRM) Collaborative Research Grant Program. Research proposals for External Collaboration Research (ECR) are developed and submitted, and if accepted, sponsored and conducted by the applicant. Financial support (funding up to a total of $500,000, which includes overhead) and investigational medicinal product (IMP) is available for up to a 2-year period provided by Boehringer Ingelheim to each accepted proposal. Please note that the fair market value of all costs and the overall cost-effectiveness of the proposals will be taken into consideration during review decisions.

Research Proposals must be submitted via the Boehringer Ingelheim Funding Portal:
https://funding.boehringer-ingelheim.com/welcome/global/
Please select: **"2026 CRM Request for Proposals".**
Once received, proposals will be administratively screened for eligibility by Boehringer Ingelheim. *Eligible proposals will then be reviewed by recognized experts who have demonstrated a history of leadership and expertise in the field of CRM Metabolic Diseases. These experts will make the final selection of proposals for funding.*

If you have questions about the RFP process, please send an email to:
Arti.mathur@boehringer-ingelheim.com

General Information	
Research Program:	Request for Proposal (RFP) External Collaborative Research (ECR)
Research Program Title:	2026 CRM Request for Proposals
Disease Area:	Cardiovascular, Renal, Metabolic (CRM)
Disease State / Indication:	Cardiovascular, Renal, Metabolic (CRM) Metabolic Diseases, Obesity/ MASH
Study Type:	Interventional and non-interventional
Available Support:	Financial & Investigational Medicinal Product (IMP)

Research Program Information	
Key Dates:	**Proposal Submission Opening Date:** (The date when the submission process for proposals begins.) **February 9th 2026, 8am EST** **Proposal Submission Deadline:** (The final date on which all proposals must be submitted for consideration.) **March 23rd, 2026, 8pm EST**
Geographic Scope:	**USA**
References	1. International Cardiometabolic Working Group, Krentz A, Jacob S, et al. Rising to the challenge of cardio-renal-metabolic disease in the 21st century: Translating evidence into best clinical practice to prevent and manage atherosclerosis. Atherosclerosis. 2024;396:118528. doi:10.1016/j.atherosclerosis.2024.118528 2. Ockene JK, Ashe K, Peterson KS, Fitzgibbon M, Buscemi J, Dulin A. Society of Behavioral Medicine Call to Action: Include obesity/overweight management education in health professional curricula and provide coverage for behavior-based treatments of obesity/overweight most commonly provided by psychologists, dieticians, counselors, and other health care professionals and include such providers on all multidisciplinary teams treating patients who have overweight or obesity. *Transl Behav Med*. 2021;11(2):653-655. doi:10.1093/tbm/ibaa030 3. Laddu D, Neeland IJ, Carnethon M, et al. Implementation of Obesity Science Into Clinical Practice: A Scientific Statement From the American Heart Association. *Circulation*. 2024;150(1):e7-e19. doi:10.1161/CIR.0000000000001221

	4. Cusi K, Abdelmalek MF, Apovian CM, et al. Metabolic Dysfunction-Associated Steatotic Liver Disease (MASLD) in People With Diabetes: The Need for Screening and Early Intervention. A Consensus Report of the American Diabetes Association. Diabetes Care. 2025;48(7):1057-1082. doi:10.2337/dci24-0094
Focus:	1. Understand current care pathway, referral patterns and gaps in effective screening, diagnosis, and treatment of Obesity, MASLD/MASH, and/or Metabolic Health; the role of HCPs in appropriate and timely diagnosis, and develop methods to improve effective screening, diagnosis, and treatment of Obesity, MASLD/MASH, and/or Metabolic Health. 2. Identify the drivers, approach, and barriers of HCPs in diagnosing and treating patients with Obesity, MASLD/MASH, and/or Metabolic Health (e.g., time to diagnosis and treatment, patient characteristics). 3. Further understand the mechanism and role of glucagon receptors in body metabolism energy regulation, and metabolic health parameters in Obesity, MASLD/MASH, and/or Metabolic Health. 4. Understand clinical benefits of survodutide in patients with obesity beyond weight loss including comorbidities, complications, special populations, or patient centric outcomes such as non-scale victories, food noise questionnaire, or eating behavior. 5. Better understand the role of survodutide in interconnected Cardio-Renal-Metabolic (CRM) diseases such as, but not limited to, Obesity, T2D, MASLD/MASH, ASCVD, and CKD. 6. Characterize the physical and psychological burden of disease for patients living with Obesity, MASLD/MASH, and/or broader Metabolic Health conditions, evaluate how stigma and bias can impact clinical decision making and patient outcomes, and develop evidence-based methods for improvement. 7. Understand patient expectations and factors influencing their acceptance of treatment (e.g., disease pathology, mechanism of action of obesity medications benefits/risks) and approaches to encourage and support medication adherence for treatment of Obesity, MASLD/MASH, and/or Metabolic Health.
Out of Scope:	The following areas of research are considered out of scope and will not be considered for funding: • Studies that repeat completed, ongoing, or planned clinical studies assessing efficacy and safety of survodutide in targeted indications

	• Phase III (confirmatory) studies with survodutide in non-targeted indications • Head-to-head studies comparing survodutide with other therapeutic options • Studies involving pediatric populations (under 18 years of age)
Eligibility Criteria:	• Applicants must be an MD, DO, other qualified HCP, or PhD • Applicants must be eligible for industry support • Boehringer Ingelheim will be the sole provider of funding for the proposal being submitted • Proposal must align to one or more of the award program areas of CRM research interest • Proposal must be independently conducted in accordance with local regulatory, legal and ethical guidelines • Completed application must be received by end of day on March 23, 2026 • Proposal is to be implemented and expected to show final results within 2 years from project start to final report • Applicants receiving grants are expected to publish the results of their research
Submission Requirements:	• Proposal submissions are **due by end of business (8 pm EST) on Monday, March 23rd, 2026**. Please see the enclosed for submission process and proposal requirement. • Once received, proposals will be administratively screened for eligibility by Boehringer Ingelheim. Eligible proposals will then be reviewed by recognized external experts who have a demonstrated history of leadership and expertise in the field of CRM. • If selected as a finalist, applicants must present their study proposal in person. Please note that all travel costs (including transportation, lodging and incidentals) are the sole responsibility of the finalists and Boehringer Ingelheim will not provide any reimbursement. • Please note: By submitting a proposal and if selected as a finalist, you are agreeing to attend and present your study proposal in person and bear responsibility for all associated travel costs.

	• We look forward to your institution's participation in the 2026 CRM Research Grant Program. Please feel free to share this invitation with colleagues who may be interested in this program. • The proposal outline, body of the application, budget template and all appendices to the proposal will be submitted by logging onto https://funding.boehringer-ingelheim.com/welcome/us • Please be sure to save your work during the application process. Applications will not reach BI unless the SUBMIT APPLICATION button is clicked. • As a panel of recognized external experts in the field will review proposals, established methods may be referred to by reference rather than described in detail in the proposal. New methodology or novel approaches should be described in detail. In general, the scope of the proposal should match the program budget. • The proposal should include appropriate goals and deliverables for the entire project. A final report of project results must be provided at completion of the project. Both precision and potential scientific and clinical impact of the project will be weighed during the review process and should be discussed in the application.

Terms and Conditions:	• This RFP does not commit Boehringer Ingelheim to award support of any size nor to pay any costs incurred in the preparation of a response to this request. Boehringer Ingelheim reserves the right not to fund any requests, or to review incomplete proposals. • Boehringer Ingelheim further reserves the right to request and to receive additional information and clarification relating to the submission; such a request would be provided by Boehringer Ingelheim via e-mail. • All communications about the RFP must come exclusively to the US External Research Medical Affairs Coordinator, and as appropriate, the Boehringer Ingelheim Funding Portal. Failure to comply may disqualify applicants. Proposals received after the submission date or through other channels will not be considered. • Boehringer Ingelheim adheres to both Federal and State Transparency Reporting Regulations and as such will report transfers of value from grants provided to Health Care Providers and medical, scientific, and patient organizations. • Grant funding shall be paid directly only to the entity that is specified in the proposal as “Sponsor”. Boehringer Ingelheim will not make any payments to any individuals or co-sponsors of the program. No grant has been awarded until a formal agreement has been fully executed between Boehringer Ingelheim and the Sponsor. All proposals must have comprehensive and itemized budgets. • Boehringer Ingelheim expects all organizations that it supports to ensure equal access to all of their programs in accordance with applicable law, and to promote equal opportunities through policies and practices, without unlawful preference or exclusion based on race, color, creed, religion, sex, material status, sexual orientation, gender identity, gender expression, ancestry, national origin, citizenship status, age, mental, physical or intellectual disability, veteran status, pregnancy, childbirth or related medical condition, genetic information or any other class or characteristic protected by applicable law.