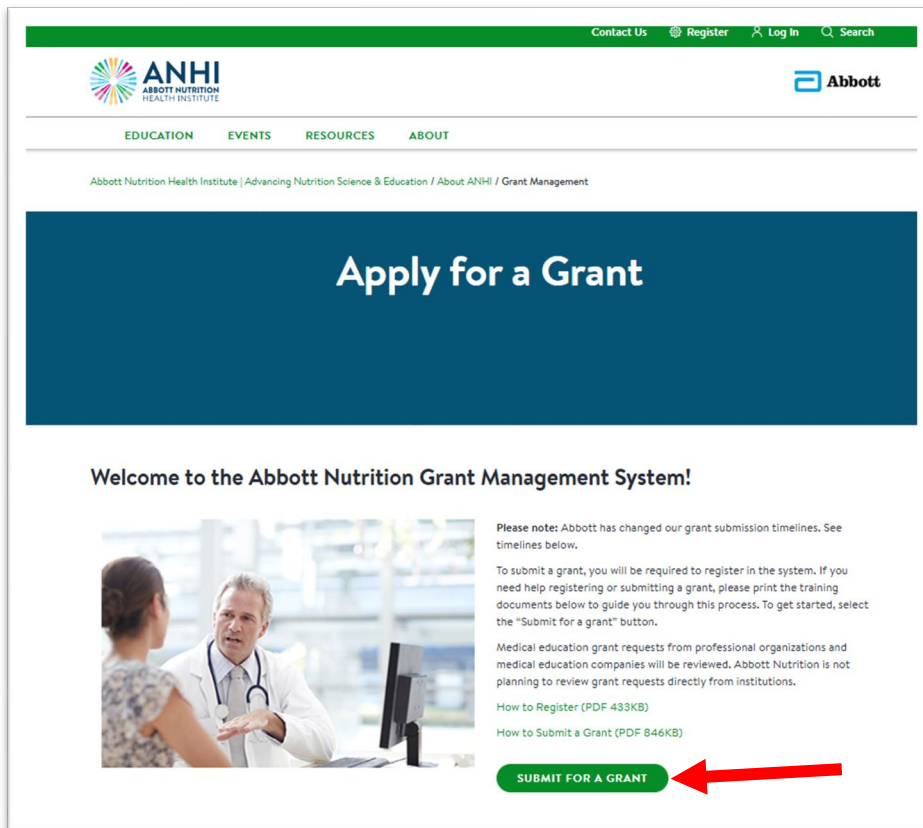


## How to Register

1. Go to <https://www.anih.org/about/grant-management> and click the 'SUBMIT FOR A GRANT' button.



Contact Us Register Log In Search

**ANHI**  
ABBOTT NUTRITION  
HEALTH INSTITUTE

Abbott

EDUCATION EVENTS RESOURCES ABOUT

Abbott Nutrition Health Institute | Advancing Nutrition Science & Education / About ANHI / Grant Management

# Apply for a Grant

## Welcome to the Abbott Nutrition Grant Management System!

**Please note:** Abbott has changed our grant submission timelines. See timelines below.

To submit a grant, you will be required to register in the system. If you need help registering or submitting a grant, please print the training documents below to guide you through this process. To get started, select the "Submit for a grant" button.

Medical education grant requests from professional organizations and medical education companies will be reviewed. Abbott Nutrition is not planning to review grant requests directly from institutions.

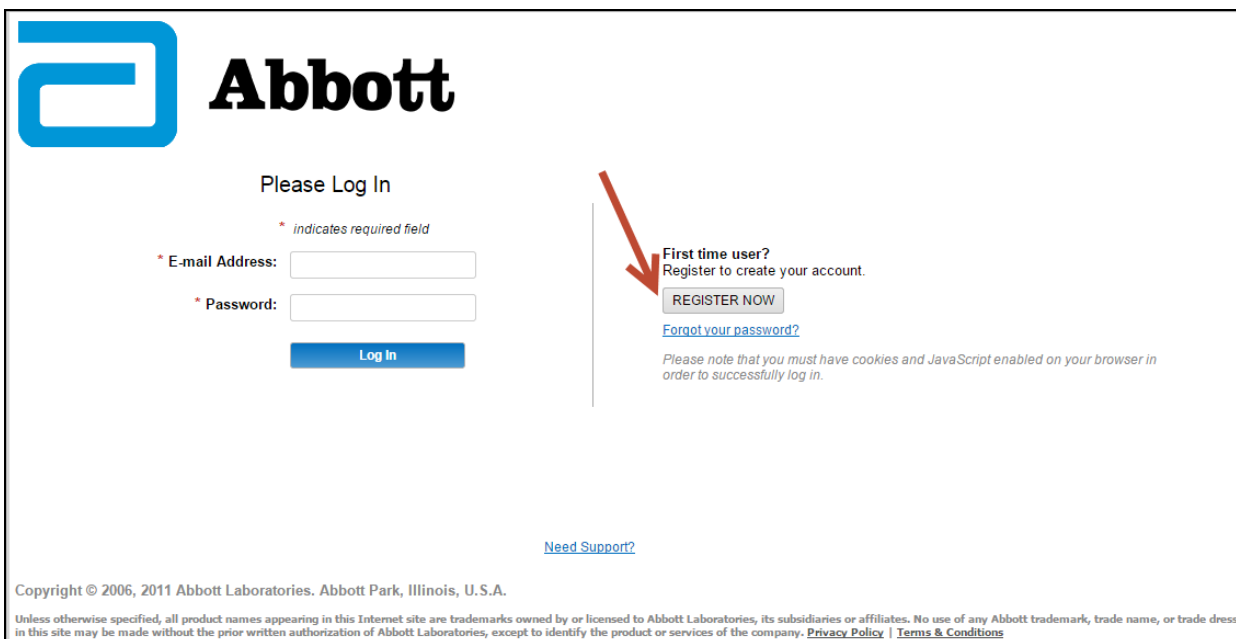
[How to Register \(PDF 433KB\)](#)

[How to Submit a Grant \(PDF 846KB\)](#)

**SUBMIT FOR A GRANT**

2. Click on the 'REGISTER NOW' button

**NOTE:** After you register, you will enter your user name and password on this screen.



**Abbott**

### Please Log In

\* indicates required field

\* E-mail Address:

\* Password:

**Log In**

**First time user?**  
Register to create your account.

**REGISTER NOW**

[Forgot your password?](#)

*Please note that you must have cookies and JavaScript enabled on your browser in order to successfully log in.*

[Need Support?](#)

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3. Select the region you are located in
4. Press the 'Continue' button

**Abbott**

Registration Information \* indicates required field

\* Please select the region in which you are located :  \*

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5. Fill out the registration and IRS information fields
6. Press the 'Save' button when finished

**NOTE: You will need your organization's taxID to register.**

**Abbott**

Registration Information \* indicates required field

*When Registering please be aware that your organization will most likely already exist. In order to become part of your organization please spell out the Organization Name completely and enter the zip code. If you do not see your organization listed, you may continue on with the registration and create a new organization.*

\* First Name:

\* Last Name:

\* Telephone Number:

\* E-mail Address: Please enter your e-mail address, e.g. yourname@yourdomain.com. You will need your e-mail address to log in.

\* Password: The password must be between 6 and 16 characters long and consist of letters, numbers, or any of the following special characters: '@!#\$%&\_'. The password "password" is not valid.

\* Confirm Password:

\* Organization/School Name: Enter the legal name of the organization for which you are applying.

\* Zip/Postal Code :

IRS Information

Tax ID/Charity ID (if applicable) : Enter the nine digit U.S. Tax ID of the 501(c)(3) non-profit organization for which you are applying. If you do not know the organization's Tax ID, please contact the business office of the organization or call the IRS toll-free at 1-877-829-5500. If your organization is not located in the United States or otherwise does not have a U.S. Tax ID number then leave this field empty.

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