

## SUBRECIPIENT COMMITMENT FORM

**INSTRUCTIONS:** University of Idaho (U of I) requires completion of this Subrecipient Commitment Form for all proposed subrecipients at the time of proposal submission to the prime sponsor. Providing complete and accurate information will expedite the proposal and issuance of the subaward agreement.

### SECTION A - SUBRECIPIENT INFORMATION

**Subrecipient Legal Name** (same as name on DUNS number): \_\_\_\_\_

**Full Address:** \_\_\_\_\_  
 \_\_\_\_\_

**Subrecipient Principal Investigator (PI):** \_\_\_\_\_

**Proposal Title:** \_\_\_\_\_

**Subrecipient's Total Funds Requested: \$** \_\_\_\_\_

**Subaward Anticipated Start Date:** \_\_\_\_\_ **Anticipated End Date:** \_\_\_\_\_

**DUNS (required):** \_\_\_\_\_ **EIN No. :** \_\_\_\_\_

**Institution Type:** \_\_\_\_\_

**Subrecipient currently registered in System for Award Management (SAM) database?**

Yes. **Expiration date:** \_\_\_\_\_ (Update registration if expires in 30 days).

No. **Note: SAM registration is required to receive federal funds. Go to <http://sam.gov/> to register.**

**Subrecipient Place of Performance Address:**

Same as address above.

Is different from the above address and will be performed at:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Subrecipient Congressional District (for "Place of Performance" Address):** \_\_\_\_\_

### SUBRECIPIENT CONTACTS

**Administrative Contact Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Financial Contact Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

<b>Principal Investigator Contact Information:</b> Name: _____ Address: _____ _____ City, State, Zip: _____ Phone: _____ Email: _____	<b>Authorized Official Information:</b> Name: _____ Address: _____ _____ City, State, Zip: _____ Phone: _____ Email: _____
<b>A-133 Audit Contact Information:</b> Name: _____ Address: _____ _____ City, State, Zip: _____ Phone: _____ Email: _____	

**SECTION B – PROPOSAL DOCUMENTS**

The following documents are included in subrecipient subaward proposal submission and covered by certifications in Section B:

- STATEMENT OF WORK** (REQUIRED – Please attach to this form with submission)  
Includes work to be performed, project description, PI, period of performance, deliverables, and milestones.
- BUDGET and BUDGET JUSTIFICATION** (REQUIRED – Please attach to this form with submission) Includes budget for entire length of project and broken down by budget period; and budget justification with reasonable level of detail

**NOTICE: University of Idaho will REVIEW the budget and budget justification in order to assess if costs are appropriately justified and seek agency prior approval when prior approval is required.**

**SECTION C – SPECIAL REVIEW AND CERTIFICATIONS**

1. **Facilities and Administrative Rates** included in this proposal have been calculated based on (check as applicable):
  - Subrecipient’s federally-negotiated F&A rate for this type of work is \_\_\_\_\_ (Enter F&A rate). Subrecipient’s F&A rate agreement is attached or available at the below URL.  
URL: \_\_\_\_\_
  - Subrecipient does not have a federally negotiation F&A rate and has applied the 10% de minimus rate in accordance with 2 CFR 200.331(f).
  - Subrecipient does not have a federally negotiation F&A rate and has applied a negotiated F&A rate with University of Idaho with the attached documentation substantiating the rate.
  - Subrecipient has applied another rate a required by the prime sponsor policies/guidelines.
  - Subrecipient is not requesting any F&A.
  
2. **Fringe Benefit Rate** included in this proposal have been calculated based on:
  - Rate consistent with or lower than Subrecipient’s federally-negotiated rates.  
**(If this box is checked, a copy of Subrecipient’s Fringe Benefit rate agreement must be furnished to U of I before a subaward will be issued, submit along with this Subrecipient Commitment Form.)**
  - Other Rate (please specify): \_\_\_\_\_
  - Not applicable (Subrecipient is not claiming fringe benefits).
  
3. **Committed Cost Sharing:**       **No.**                       **Yes, in the amount of \$** \_\_\_\_\_  
*(Cost sharing amounts must be included in Subrecipient’s budget and budget justification.)*

**PROJECT-SPECIFIC REQUIREMENTS**

**4. Does this project involve Human Subjects** (includes surveys, interviews, observations, or secondary data)?

<input type="checkbox"/> <b>Yes</b> Approval Exp.Date: _____ Number: _____	<input type="checkbox"/> <b>No</b>	<input type="checkbox"/> <b>Subrecipient determined approval not required</b>
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**Have all key personnel involved completed Human Subjects Training?**  **Yes**  **No**

*Note: All key personnel engaged in human subject research must take the NIH human subjects training or human subjects research training ([http://grants.nih.gov/grants/policy/hs\\_educ\\_faq.htm](http://grants.nih.gov/grants/policy/hs_educ_faq.htm))*

**5. Does this project involve Animal Subjects?**

<input type="checkbox"/> <b>Yes</b> Approval Exp.Date: _____ Number: _____	<input type="checkbox"/> <b>No</b>	<input type="checkbox"/> <b>Subrecipient determined approval not required</b>
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**6. Does project involve Select Agent/Toxins?**

<input type="checkbox"/> <b>Yes – a copy of the approval documents is attached or will be provided before the subaward agreements executed.</b>	<input type="checkbox"/> <b>No</b>	<input type="checkbox"/> <b>Subrecipient determined approval not required</b>
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**7. Does this project involve Biosafety of Recombinant DNA?**

<input type="checkbox"/> <b>Yes – a copy of the approval documents is attached or will be provided before the subaward agreements executed.</b>	<input type="checkbox"/> <b>No</b>	<input type="checkbox"/> <b>Subrecipient determined approval not required</b>
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**8. Certification Regarding Debarment and Suspension**

Is the Subrecipient, Principal Investigator, or any other employee or student of Subrecipient participating in this project debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this project by any federal department, agency, assistance programs, or activities?

**Yes. –Explanation is in Section D.**  **No.**

**9. Conflict of Interest**

Subrecipient has a conflict of interest policy that complies with any supplemental Federal Awarding Agency requirements pursuant to 2 CFR 200.112 and 2 CFR 200.318.

**Yes.**  **No.**

**10. Financial Conflict of Interest (FCOI) Policy**

*(Required for projects funded by PHS, NSF, EPA, or other sponsors adopting federal financial disclosure requirements)*

- Not applicable, as this project is not funded by PHS, NSF, or any other sponsor that has adopted financial disclosure requirements.
- This project is funded by PHS, NSF, EPA or another federal sponsor that has adopted financial disclosure requirements; Subrecipient hereby certifies that it has an active and enforced FCOI policy that is consistent with the Federal Sponsor's requirements and the provisions of 42 CFR Part 50, Subpart F, "Responsibility of Applicants for Promoting Objectivity in Research." Subrecipient also certifies that, to the best of Institution's knowledge, (1) all financial disclosures have been made related to the activities that may be funded by or through a resulting agreement, and required by its conflict of interest policy; and (2) all identified conflicts of interest have or will have been satisfactorily managed, reduced, or eliminated in accordance with subrecipient's Conflict of Interest policy prior to the expenditures of any funds under any resultant agreement.

- This project is funded by PHS, NSF, EPA or another federal sponsor that has adopted financial disclosure requirements; Subrecipient has a **pending** FCOI policy established and will adopt and implement a policy prior to execution of the subaward agreement that is compliant with PHS policy using the [Federal Demonstration Partnership \(FDP\) Model Policy](#) as a guide.

## STANDARD REQUIREMENTS

### 11. Affirmative Action Compliance

In accordance with the rules and regulations of the Secretary of Labor (41 CFR 60-1 and 60-2), if Subrecipient has more than 50 employees and subaward will be for \$50,000 or more, it is required to have a written affirmative action program. Indicate whether Subrecipient has a written affirmative action program:

- Yes, Subrecipient has a written affirmative action program developed and on file.
- No, Subrecipient does not have a written affirmative action program.
- Not applicable, because Subrecipient has less than 50 employees or anticipate a subaward amount less than \$50,000.
- OTHER: \_\_\_\_\_

### 12. Mandatory Disclosures

- Subrecipient certifies it has and will disclose to University of Idaho all violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award for disclosure to federal awarding agency or pass-through entity. See [§200.113](#) for more details.

### 13. Fiscal Responsibility (check all that apply)

Subrecipient certifies that its financial system is in accordance with generally accepted accounting principles and:

- has the capability to identify, in its accounts, all federal awards received and expended and the federal programs under which they were received;
- maintains internal controls to assure that it is managing federal awards in compliance with applicable laws, regulations and the provision of contracts or grants;
- complies with applicable laws and regulations;
- can prepare appropriate financial statements, including the schedule of expenditures of federal awards;
- there are no outstanding audit findings which would impact contract costs. If there are findings, submit a copy of the most report that describes the finding and steps to be taken to correct the finding.

### 14. A-133 Audit and Financial Status

*(State, local governments, Indian Tribes, institutions of higher education, or nonprofit organizations that expend Federal funds in excess of \$750,000 are required to comply with the audit requirements of 2 CFR 200.501.)*

A-133 Audit Report Link: \_\_\_\_\_

- Subrecipient is subject to 2 CFR 200.501 and certifies that it completed its A-133 Single Audit for fiscal year ending \_\_\_\_\_. The Single Audit Report disclosed no material weaknesses, no material instances of noncompliance with federal laws or regulations, no reportable conditions, no findings, and there are no unresolved prior year findings related to any subaward(s) from the University of Idaho.
- Subrecipient is subject to 2 CFR 200.501 and certifies that it completed its A-133 Single Audit for fiscal year ending \_\_\_\_\_. The Single Audit Report noted material weaknesses, material instances of noncompliance with federal laws or regulations, reportable conditions, findings, or unresolved prior year findings related to subaward(s) from University of Idaho. The corrective action plan is included in the audit link above. Page number(s) for relevant finding(s) are: \_\_\_\_\_
- Subrecipient is subject to 2 CFR 200.501 and has not completed its A-133 Single Audit for fiscal year ending \_\_\_\_\_ and is not anticipated to be complete until \_\_\_\_\_. Subrecipient will provide written notification of the results along with any required documentation within 30 days of completion.
- Subrecipient is **not subject** to the provisions of 2 CFR 200.510 because its organization:
- |   |   |
|---|---|
| <input type="checkbox"/> Expends less than \$750,000 in federal awards annually | <input type="checkbox"/> Is a non-U.S. entity |
| <input type="checkbox"/> Is a for-profit entity                                 | <input type="checkbox"/> Other _____          |

**15. FFATA – U of I must comply with the Federal Funding Accountability and Transparency Act (FFATA), and to do so requires the following information (based upon Place of Performance information stated above):**

The names and total compensation of the five most highly compensated officers of the entities must be listed if, in the preceding fiscal year, Subrecipient received:

- (i) 80% or more of its annual gross revenues in federal awards (federal contracts, (and subcontracts), loans, grant (and subgrants) and cooperative agreements); AND
- (ii) \$25,000,000 or more in annual gross revenues from federal awards; AND
- (iii) the public does not have access to information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986.

**Is Subrecipient exempt from reporting executive compensation?** Yes  No

**SECTION D – COMMENTS**

**SUBRECIPIENT AUTHORIZED APPROVER:**

**THIS BOX MUST BE COMPLETED**

The information, certifications, and representations above have been read, signed, and made by an authorized official of the Subrecipient named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency policy in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies.

**Any work begun and/or expenses incurred prior to execution of a subaward agreement are at the subrecipient's own risk.**

\_\_\_\_\_  
Signature of Subrecipient's Authorized Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Type or print name and title of Subrecipient's Authorized Official)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Email)