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Subrecipient's proposal # _

Subre	cipient Lega	al Name:						
Subrecipient PI Name:				UMBC PI Name:	UMBC PI Name:			
Subre	cipient Cent	tral Email:		Funding Agency				
Propo	sal Title:							
Propo	sed Budget	Amount for `	Year (1): DC: \$	IDC: \$	Total: \$			
Total I	Total Project: DC: \$			IDC: \$	Total: \$			
Agree	ment Type:	Cost R	eimbursable or	Fixed Price				
Cost S	Sharing:	No Y	Yes; If Yes, amoun (Cost sharing amo	t: \$ unts and justification must be a part	of Subrecipient's budget).			
Perfor	mance Perio	od: Begin (r	nm/dd/yyyy):	End (mm/dd/yyy	у):			
Subre	cipient DUN	S #:	S	Not applicable for foreign entity)				
Subre	cipient is pa	art of <u>FDP Ex</u>	panded Clearinghou	se or University System of				
					If " Yes ", please move to Section B			
S	SECTION A		TIONS					
2.	Our fed is check Other ra	erally-negotiate ked, a copy of y ates (specify the	d F&A rates for this type our F&A rate agreement basis on which the rate	t must be furnished to UMBC be has been calculated in Section	that we hereby agree to accept. (If this box fore a subaward will be issued.)			
			of the Uniform Guidance					
 Debarment, Suspension, Proposed Debarment: Is the Subreicipient PI or any other employee or student participating in this project debarred, suspension excluded from or ineligible for participation in Federal Assistance programs or activities: 								
	Yes No							
	The Organization Certifies they: (answer all questions below)							
	Are	Are Not	presently debarred, s Federal Contracts	suspended, proposed for debarr	nent, or declared ineligible for award of			
	Are	Are Not	presently indicted for	, or otherwise criminally or civill	charged by a governmental entity			
	Have	Have Not	rendered against the attempting to obtain, violation of Federal o	m for commission of fraud or cri or performing a public (Federal or State antitrust statutes relating eft, forgery, bribery, falsification	convicted of or had a civil judgment minal offense in connection with obtaining, State, or Local) contract or subcontract; g to the submission of offers; or commission or destruction of records, making false			
	Have	Have Not	within three (3) years by any Federal Agen		ne or more contracts terminated for default			
4.	Rates c	onsistent with o	or lower than our federall	ave been calculated based or ly-negotiated rates. (If this box is a subaward will be issued).	[Check one]: s checked, a copy of your FB rate			

We do not have a federally negotiated fringe benefit rate. The fringe benefit expenses charged to the Subaward Agreement will be the actual direct costs of the benefits.

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5. Subrecipient Business Status:

•	**certified by Small Business Administration:		
Institution of Higher Education	Small Disadvantaged Business (SDB)**		
Large Business	Women-Owned Small Business (WOSB)		
Small Business*	Small Minority Business (SMB)		
Alaska Native Corporation (ANC)	Veteran-owned Small Business (VOSB)		
Historic Black College or University	Service Disabled Veteran-Owned Small Business (SDVOSB)		
Other (explain in Section D)	HUBZone Small Business**		

*if Small Business, identify business classification

6. Affirmative Action Compliance - Indicate in accordance with the rules and regulations of the Secretary of Labor (41 CFR 60-1 and 60-2) that your organization has:

A written affirmative action program has been developed and is on file

A written affirmative action program has not been developed but one will be developed by time of award

A written affirmative action program has not been developed; Subrecipient hereby agrees to abide by UMBC's policy available at: <u>http://www.usmd.edu/regents/bylaws/SectionVI/</u>

7. Conflict of Interest (applies to all projects, check one):

Not applicable because this project is not being funded by PHS (NIH, CDC, AHRQ, etc.) or any other sponsor that has adopted the financial disclosure requirements (NSF, etc.) See http://sites.nationalacademies.org/PGA/fdp/PGA_070596 for list of sponsors that adopted federal financial disclosure requirements.

Subrecipient Organization/Institution hereby certifies that it has an active and enforced conflict of interest policy that is consistent with the provision of 42 CFR Part 50, Subpart F "Responsibility of Applicants for Promoting Objectivity in Research." and 42 CFR Part 94 "Responsible Prospective Contractors". 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 though 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.

Subrecipient does not have an active and/or enforced conflict of interest policy, but will have a PHS compliant policy in place and published at the time of award . A sample FDP COI policy can be found at http://sites.nationalacademies.org/PGA/fdp/P A_061001

Subrecipient does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by UMBC's policy, which is located at http://www.umbc.edu/policies/ under Section II (II-8.00.05).

8. Subrecipient Audit Status:

Does the Subrecipient receive an annual single audit in accordance with 2 CFR Part 200? Yes No

If "Yes": Most recent fiscal year for which audit was completed: FY_

Were any audit findings reported?	Yes	No; If "Yes",	were they affecting UMBC funding?	Yes	No
A complete copy of Subrecipient's most recent audit report: Can be found at:					
			Is attached as part of this document		

If "No": Subrecipient is a [Check one]:

Non-profit entity expending less than \$750,000 per year in Federal or Sub-Federal funds annually

For-profit entity that expends Federal or Sub-Federal funds and has a DCAA audited rates

For-profit entity that does not expend Federal funds or have annual audits

Foreign entity

Note: If a subrecipient does not receive an annual single audit as described above, UMBC will require the entity to complete a Financial Status Questionnaire, and may require a limited scope audit, before a subaward will be issued.

Audit Point of Contact / Phone / Email:

9. Fiscal Responsibility - The organization 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;



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SECTION B – REGULATORY APPROVALS

1. Human Subjects: Yes No or Pending

If "Yes": Copies of the IRB approval and approved "Informed Consent" form must be provided as an attachment to this form. If "Pending", forward above documents to UMBC's OSP as soon as they become available. An approved protocol must be received by UMBC prior to issuance of a Subaward.

If "Yes": Have all key personnel involved completed Human Subjects Training? Yes No

2. Animal Subjects: Yes No or Pending

If "Yes": A copy of the IACUC approval must be provided as an attachment to this form. If "Pending", forward the document to UMBC's OSP as soon as it become available. An approved protocol must be received by UMBC prior to issuance of a Subaward.

3. Restricted Research: Yes No or Pending

If **"Yes"**: A copy of the applicable approval must be provided as an attachment to this form. If **"Pending"**, forward the document to UMBC's OSP as soon as it become available. An approved document must be received by UMBC prior to issuance of a Subaward.

SECTION C – PROPOSAL DOCUMENTS

The following documents are included in our proposal submission and covered by the certifications below (check as applicable):

STATEMENT OF WORK (REQUIRED)

BUDGET AND BUDGET JUSTIFICATION (REQUIRED)

Biosketches of all Key Personnel, in agency-required format

Other: _____

Other: __

SECTION D – COMMENTS

APPROVED FOR SUBRECIPIENT

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 **a**re 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.

Submit the Subrecipient Commitment Form along with a Statement of Work, Budget, and Budget Justification to the UMBC Office of Sponsored Programs. Additional administrative materials may be required depending on the sponsoring agency.

Signature of Subrecipient's Authorized Official	Address	
Type of print name of Authorized Official	City, State, Zip	
Name of Subrecipient Organization/Institution	Phone	Fax
Date	Email	