



## Subrecipient Commitment Form

<i>Personnel</i>	<p>Investigator is identified.</p> <p>Qualifications of investigator (vitae), pending &amp; current support, etc. are included in the proposal and considered during the peer evaluation.</p> <p>Change in personnel may require prior approval.</p>	Person conducting work is not identified.
<i>Technology Transfer</i>	Potential for patentable or copyrightable technology to be created through project; entity has right to protect technology	No potential for patentable or copyrightable technology to be created through project
<i>Publications</i>	<p>Publication of results expected; investigator to author, or be co-author.</p> <p>Presentations/dissemination, such as professional conferences.</p>	<p>No publications.</p> <p>May include university on list of "customers"</p>
<i>Cost Sharing</i>	May be providing cost sharing or matching funds	<p>Fixed price by project/task.</p> <p>No cost sharing or matching funds involved.</p>
<i>Compliance</i>	<p>Flow-down of prime sponsor terms and conditions, human subjects review, etc.</p> <p>Depending on type of agreement, financial monitoring/restrictions/audit provisions</p>	

Yes    No    My organization is properly categorized as a subrecipient.

**If "No" or unsure, please contact the UCCS Principal Investigator  
BEFORE completing the remainder of the form**

<b>SECTION C: Subrecipient Information</b>
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**Subrecipient Legal Name:**

**Subrecipient Name as appears on DUNS:**

**Subrecipient DBA Name:**

**Year established:**

**Subrecipient's Principal Investigator:**

**Subrecipient Address:**

**Subrecipient Congressional District:**

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Performance Site Address:

Performance Site Congressional District:

DUNS Number: Federal Employer Identification Number (EIN):

Registered in System for Award Management (SAM)? Yes No Expiration Date:

*\*If 'No', subrecipient will need to be registred before a subaward will be issued.*

North American Industry Classification System (NAICS) Code:

Amount of Funding Requested by Subrecipient: \$

Cost Sharing Provided by Subrecipient (if applicable): \$

*Cost sharing amounts and justification must be included in the subrecipient's budget.*

## SECTION D: Proposal Documents - REQUIRED

The following documents are required. Indicate they are attached by checking each box.

Statement of Work

Budget & Budget Justification

Subrecipient Commitment Form, completed and signed by subrecipient's authorized official

Subrecipient Contacts Form

Letter of Commitment, signed by subrecipient's authorized official

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Copy of, or URL to, most recent annual audit (URL: )

Other:

## SECTION E: Special Review and Certifications

1. **Facilities and Administrative (F&A) Rates** included in this proposal have been calculated based on:

Our federally negotiated F&A rates for this type of work, or a reduced F&A rate that we hereby agree to accept.

*(If this box is checked, a copy of your F&A rate agreement or a URL link to the agreement must be provided.)*

Other rates (Please specify the basis on which the rate has been calculated in Section G *Comments* below.

Not applicable

2. **Fringe-Benefit Rates** included in this proposal have been calculated based on the following:

Rates consistent with or lower than our federally negotiated rates.

*(If this box is checked, a copy of your FB rate agreement or a URL link to the agreement must be provided.)*

URL:

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Other rates (Please specify the basis on which the rate has been calculated in Section G *Comments* below.

### 3. Small Business Concern:

Yes      No      The Subrecipient represents that it is a small business concern as defined in 13 CFR 124.1002.

If "Yes": Subrecipient represents that it is a:

- Small disadvantaged business as certified by the Small Business Administration
- Women-owned small business concern
- Veteran-owned small business concern
- Service-disabled veteran-owned small business concern
- HUBZone small business concern

### 4. Human Subjects

Yes      No  
Determination of Exemption or IRB Approval Date:      and IRB Number:      Pending  
(Note: Surveys, interviews, observations, or use of secondary data may be human subject research. Contact your local IRB office for guidance.)

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

Subrecipient has a Federalwide Assurance (FWA) Number?      Yes      No  
If "yes," provide Number:

### 5. Animal Subjects:

Yes      No  
Approval Date:      and Animal Welfare Assurance Number:      Pending

### 6. Conflict of Interest (Check one):

Subrecipient 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 for Which PHS Funding is Sought." 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 expenditure of any funds under any resulting agreement.

Subrecipient does not have an active and/or enforced conflict of interest policy as described above, and hereby agrees to abide by the University of Colorado's policy, available at:

<https://www.cu.edu/ope/aps/5012>

### 7. Drug Free Workplace:

Yes      No      The Subrecipient certifies compliance with The Drug-Free Workplace Act of 1988 (41 USC 702).

### 8. Debarment, Suspension, Proposed Debarment:

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Is the PI or any other employee or student participating in this project debarred, suspended or otherwise excluded from or ineligible for participation in federal assistance programs or activities? (If "yes," explain in Section G *Comments* below.)

Yes                      No

Subrecipient certifies they (answer all questions below):

Are                      Are Not                      Presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal contracts.

Are                      Are Not                      Presently indicted for, or otherwise criminally or civilly charged by a governmental entity.

Have                      Have Not                      Within three (3) years preceding this offer, been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property.

Have                      Have Not                      Within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency.

### 9. Fiscal Responsibility (Check each box that applies):

Subrecipient certifies that its financial system is in accordance with generally accepted accounting principles (GAAP) 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 recent report that describes the finding and steps to be taken to correct the finding.

### 10. Has Subrecipient had any changes in senior leadership in the past three (3) years?

Yes                      No                      If yes, describe:

### 11. Annual federal grant/contract expenditures: \$

### 12. Responsible Conduct of Research (RCR) [For NSF & PHS funded projects]:

Subrecipient certifies that it has an Institutional Plan to meet NSF's Educational Requirements for the Responsible Conduct of Research, as required under Section 7009 of the "America COMPETES ACT" PUBLIC LAW 110-69-August 9, 2007 and Public Health Service (PHS).

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Subrecipient certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by the project will be trained on the oversight in the responsible and ethical conduct of research, as applicable.

### 13. Lobbying (for U.S. federal projects only):

Yes

No

Subrecipient certifies that it is in compliance with the requirements of Section 1352, Title 31, U.S. Code, that limits the use of appropriated funds to influence certain Federal contracting and financial transactions.

### SECTION F: Audit

1. Does the Subrecipient receive an annual audit in accordance with OMB Circular A-133 and/or OMB 2 CFR Part 200? Yes No

If "Yes", has the audit been completed for the most recent fiscal year? Yes No. If "No", when is it expected to be completed (MM/DD/YYYY)?

2. Were there any audit findings reported? Yes No If "Yes", explain in Section G)

3. Subrecipient is a:

State-controlled Institution of Higher Education

Private Institution of Higher Education

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

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

Foreign entity

Non-profit

Government entity

4. Subrecipient's fiscal year ends: (day) (month)

5. Subrecipient Cognizant Audit Agency Name, POC, address and phone:

### SECTION G: Comments

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### **SECTION H: Federal Funding Accountability and Transparency Act (FFATA)**

*Complete for federal funding only*

#### **Executive Compensation:**

Provide the names and total executive compensation of the five (5) most highly compensated officers of the subrecipient entity if:

- a. The recipient in its preceding fiscal year received:
  - i. 80 percent or more of its annual gross revenues in Federal awards; AND
  - ii. \$25,000,000 or more in annual gross revenues from the Federal awards; AND
- b. The public does NOT have access to information about the compensation of the senior executives of the entity through periodic reports filed under sections 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78(d) or section 6104 of the Internal Revenue Service Code of 1986 [26 USC 6104]

If **“Yes”** to a & b: Attach list

If **“No”** to a & b: check this box

**Note:** “Total compensation” means the cash and noncash dollar value earned by the executive during the subrecipient’s past fiscal year of the following [for more information see 17 CFR 229.402 Ch. II].

1. Salary and Bonus
2. Award of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with FAS 123R.
3. Earnings for services under non-equity incentive plans. Does not include group life, health, hospitalization, or medical reimbursement plans that do not discriminate in favor of executives, and are available generally to all salaried employees.
4. Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.
5. Above-market earning of deferred compensation which are not tax-qualified
6. Other compensation. For example, severance, termination payments, value of life insurance paid on behalf of the employee, perquisites of property if the values for the executive exceed \$10,000.

# Subrecipient Commitment Form

**SECTION I: Authorized Representative Approval**

**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 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. No work involving human subjects and/or animals may begin until the subrecipient has obtained registered Institutional Review Board and/or Animal Care and Use Committee review and approval.**

<p>_____</p> <p><b>Signature of Subrecipient's Authorized Official</b></p> <p><b>Name of Subrecipient's Authorized Official</b></p> <p><b>Title of Subrecipient's Authorized Official</b></p> <p><b>Phone</b></p> <p><b>Email</b></p> <p><b>Name of Subrecipient's Organization/Institution</b></p> <p><b>Fax</b></p> <p><b>Date</b></p>	<p><b>If Subrecipient is owned or controlled by a parent entity, please provide the following information:</b></p> <p><b>Parent Entity Legal Name:</b></p> <p><b>Parent Entity Address:</b></p>  <p><b>Parent Entity DUNS:</b></p> <p><b>Parent Entity Congressional District:</b></p> <p><b>Parent Entity EIN:</b></p>
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