

Plymouth State University

Office of Sponsored Programs
17 High Street, MSC 51
Plymouth, NH 03264
Tel: 603-535-3233
http://www.plymouth.edu/office/sponsored-programs/

Subrecipient Commitment Form

SECTION A: Proposal Information

PSU Principal Investigator: _____
Submitted Proposal Title: _____
Prime Sponsor: _____
Performance Period: Begin Date: _____ End Date: _____

SECTION B: Subrecipient Requirements & Responsibilities

Dear Potential Subrecipient,

Any organization planning to enter into a collaborative subrecipient relationship with the Plymouth State University (PSU) must complete this form at the proposal stage. Federal government rules require that PSU determine if your organization's role in the above mentioned project will be that of a true subrecipient (as opposed to a 'contractor'). The table below illustrates the differences between these two roles, as described in e-CFR 200.330 'Subrecipient and contractor determinations'. Please review the table and select all that apply to your organization to help determine if a formal subrecipient partnership can be established between your organization and PSU.

Subrecipients	Contractors (suppliers/vendors)
<input type="checkbox"/> Subrecipients have performance measured against whether the objectives of the sponsored project are met <input type="checkbox"/> Subrecipients have responsibility for programmatic decision making <input type="checkbox"/> Subrecipients are subject to all of the compliance requirements from the prime award that are pertinent to the subrecipient, e.g. effort reporting on federal awards <input type="checkbox"/> Subrecipients use the sponsored funds to carry out a program, as compared to providing goods or services for a program of Plymouth State University.	<input type="checkbox"/> Contractors provide goods and services within normal business operations <input type="checkbox"/> Contractors provide similar goods or services to many different purchasers <input type="checkbox"/> Contractors operate in a competitive environment <input type="checkbox"/> Contractors provide goods or services that are ancillary to the operation of the sponsored project <input type="checkbox"/> Contractors are not subject to compliance requirements of the sponsored project

Note: Subrecipient will be expected to provide a complete copy of the subrecipient's most recent audit report, or the URL link to a complete copy, before a subagreement can be established.

Yes No My organization is properly categorized as a subrecipient as described above and agrees to the project roles, compliance responsibilities, and audit requirements listed above.

If "No" or unsure, please contact the PSU Project Director BEFORE completing the remainder of the form

Subrecipient Commitment Form

SECTION C – Subrecipient Information

Subrecipient Legal Name: _____

Subrecipient DBA Name: _____

Subrecipient
Address

Congressional
District

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: _____

Subrecipient's Principal Investigator: _____

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

- Statement of Work
- Budget & Budget Justification
- Subrecipient Commitment Form, completed and signed by subrecipient's authorized official
- Subrecipient Contacts Form (Attachment 3A)
- Letter of Commitment, signed by subrecipient's authorized official

- 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.)

URL _____

- Other rates (Please specify the basis on which the rate has been calculated in Section G *Comments* below.)
- Not applicable (No F&A request for subrecipient.)

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 _____

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

Subrecipient Commitment Form

3. Subrecipient Business Status (Check one):

- Large Business Small Business Institution of Higher Education
 Historic Black College or University/Minority Institution Other _____

If a small business, identify business classification (*Certified by the Small Business Administration):

- Small Disadvantaged Business (SDB)* (8a)*
 Women-owned small business (WOSB)
 Veteran-owned small business (VOSB)
 Service-disabled veteran-owned business (SDVOSB) HUBZone small business*

4. Conflict of Interest (Check one):

- 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, "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 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 PSU's policy (See Sections 2.11 & 2.12) available at:
<https://www.plymouth.edu/office/vpaa/files/2015/04/Faculty-Handbook.pdf>

5. Debarment, Suspension, Proposed Debarment:

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

The Organization 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.

6. Fiscal Responsibility (Check each box that applies):

The organization 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.

Subrecipient Commitment Form

7. Research Subject Compliance Information (Check as applicable):

Yes No Human Subjects will be involved in the subrecipient's portion of this project.

If "Yes," please provide your organization's OHRP approved FWA #: _____

Yes No Animal Subjects will be involved in the subrecipient's portion of this project.

If "Yes," please provide your organization's Animal Welfare Assurance #: _____

8. Responsible Conduct of Research (RCR) [For NSF, PHS, & USDA-NIFA funded projects]:

The Organization 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).

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

Subrecipient organization hereby certifies that it will ensure that all program directors, faculty, undergraduate students, graduate students, postdoctoral researchers, and any staff participating in the research project will be trained in the responsible and ethical conduct of research, as required per USDA-NIFA terms & conditions.

9. Lobbying (for U.S. federal projects only):

Yes No In the event funds allotted under this proposal are expected to exceed \$100,000, the Organization 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. a. Does the subrecipient receive an annual audit in accordance with 2 CFR Part 200 Subpart F? Yes No
b. If "Yes", has the audit been completed for the most recent fiscal year? Yes No
c. If "No", when is it expected to be completed (MM/DD/YYYY)? _____

2. Were there any audit findings reported? (if "Yes", explain in **Section G Comments** below)
 Yes No

Note: A complete copy of subrecipient's most recent report, or the URL link to the complete copy must be provided to PSU before a subaward will be issued.

URL _____

3. If "No" to question (1.a.), does the subrecipient receive overall federal funding of at least \$750,000 per year?
 Yes No If "No", skip 4.

4. Subrecipient is a:

- 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 (under federal funding threshold)
 Government entity

5. On what month and day does the subrecipient's fiscal year end? _____

Note: If subrecipient is exempt from requirements of 2 CFR Part 200 Subpart F, PSU will require the entity to provide a copy of its most recent financial statement or audit report.

Subrecipient Commitment Form

SECTION G – Comments

SECTION H – Federal Funding Accountability and Transparency Act (FFATA) – Complete for federal funding only

Executive Compensation:

Provide the names and total 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 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.

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.**

(Signature of Subrecipient's Authorized Official)

(Date)

(Name of Subrecipient's Authorized Official)

If Subrecipient is owned or controlled by a parent entity, please provide the following information:

Parent Entity
Legal Name _____

(Title of Subrecipient's Authorized Official)

Parenty Entity
Address: _____

(Phone)

Parent Entity Congressional District: _____

(Email)

Parent Entity DUNS: _____

(Name of Subrecipient's Organization/Institution)

Parent Entity EIN: _____

(Fax)

Attachment 3B

Subaward Number:

Research Subaward Agreement Subrecipient Contacts

Subrecipient Place of Performance for [FFATA](#) reporting

Name:
Address:
City: State: Zip Code+4: Zip Code [Look-up](#)
EIN No.: DUNS: Parent DUNS:
Institution Type: Congressional District:
Is Subrecipient currently registered in [SAM.gov](#)? Yes No
Is Subrecipient exempt from reporting executive compensation? Yes No If no, complete 3B, page 2

Subrecipient Administrative Contact

Name:
Address:
City: State: Zip Code:
Telephone: Email:

Subrecipient Principal Investigator

Name:
Address:
City: State: Zip Code:
Telephone: Email:

Subrecipient Financial Contact

Name:
Address:
City: State: Zip Code:
Telephone: Email:
Central email: Is this the remittance address? Yes No
Remittance Address (if different):

Subrecipient Authorized Official

Name:
Address:
City: State: Zip Code:
Telephone: Email:
Central email:

Attachment 3B Page 2
Research Subaward Agreement
Highest Compensated Officers

Subaward Number:

Subrecipient:

Institution Name:

PI Name:

Highest Compensated Officers

The names and total compensation of the five most highly compensated officers of the entity(ies) must be listed if the entity in the preceding fiscal year received 80 percent or more of its annual gross revenues in Federal awards; and \$25,000,000 or more in annual gross revenues from Federal awards; and the public does not have access to this 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. See FFATA § 2(b)(1) Internal Revenue Code of 1986.

Officer 1 Name:

Officer 1 Compensation:

Officer 2 Name:

Officer 2 Compensation:

Officer 3 Name:

Officer 3 Compensation:

Officer 4 Name:

Officer 4 Compensation:

Officer 5 Name:

Officer 5 Compensation:
