

CONCORD CONSORTIUM SUBRECIPIENT COMMITMENT FORM

Each potential subrecipient must include this form with their proposal to Concord Consortium (Concord). It provides a checklist of required documents and certifications, and must be signed by the authorized official of the subrecipient.

SUBRECIPIENT'S LEGAL NAME:

ADDRESS:

SUBRECIPIENT'S PI NAME, EMAIL AND TEL:

SUBRECIPIENT'S RESEARCH ADMINISTRATOR'S NAME, EMAIL AND TEL:

TAX ID NUMBER:

DUNS NUMBER:

CONGRESSIONAL DISTRICT:

PROPOSAL TITLE:

PRIME SPONSOR:

PERFORMANCE PERIOD START AND END DATE:

SECTION A - Proposal Documents

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

- ☐ STATEMENT OF WORK (required)
- ☐ BUDGET AND BUDGET JUSTIFICATION (required)
- ☐ Biosketches and Current & Pending Support of all Key Personnel, in agency-required format
- ☐ Other:
- ☐ Other:

SECTION B - Special Review and Certifications

1. **Facilities and Administrative 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, attach a copy of your F&A rate agreement or provide URL to agreement.)*
- ☐ Other rates *(Please specify the basis on which the rate has been calculated in Comments below.)*
- ☐ Not applicable *(no indirect costs included)*

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

- ☐ Rates consistent with our federally negotiated rates *(If this box is checked, attach a copy of your benefits rate agreement or provide URL to agreement.)*
- ☐ Other rates *(Please specify the basis on which the rate has been calculated.)*

3. Small Business Concern ☐ yes ☐ no

Organization represents that it is a small business concern as defined in 13 CFR 124.1002.

If yes: Organization 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. Cost Sharing: ☐ yes ☐ no. If yes, please provide a description.

5. 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 IRB office for guidance.)

If yes, copies of the determination of exemption or IRB approval must be provided before any subaward will be issued. If not attached here, obtain approval as required and forward these documents to CC's PI as soon as they become available.

If yes and NSF and/or NIH funding is involved:

- Have all key personnel involved completed human subjects training? ☐ yes ☐ no
- Does the organization maintain a plan to meet NSF's Educational Requirements for the Responsible Conduct of Research, as required under the "America COMPETES Act" PUBLIC LAW, and certifies that it has a training program in place and will train all undergraduate and graduate students and postdocs in accordance with NSF's RCR program? ☐ yes ☐ no

Does your organization/institution have a Federalwide Assurance (FWA) Number? ☐ yes ☐ no

If yes, provide number:

6. Conflict of Interest (applicable to NIH, NSF, or any other sponsor that has adopted the federal financial disclosure requirements)

☐ Not applicable because this project is not being funded by NIH, NSF, or any other sponsor that has adopted the 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." 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.

7. 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? ☐ yes ☐ no
(If "yes," explain in Comments below)

The Organization certifies that it and its principals: (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 government 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
- ☐ have ☐ have not within three (3) years preceding this offer, been notified of any delinquent Federal taxes in an amount that exceeds \$3,000 which liability remains unsatisfied

8. Fiscal Responsibility

The 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.

9. Drug Free Workplace

The organization is compliant with The Drug-Free Workplace Act of 1988 (41 USC 702) ☐ yes ☐ no

10. Certification Regarding Lobbying

In the event funds allotted under this proposal are expected to exceed \$100,000, the Organization 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 ☐ yes ☐ no

11. Federal System for Award Management (SAM)

Has the Organization completed annual certifications on the SAM? ☐ yes ☐ no

If "Yes," please provide the date of last certification:

12. Federal Funding Accountability and Transparency Act (FFATA) Information

Does Organization, in its preceding fiscal year, (a) receive 80% or more of its annual gross revenues in federal awards; AND (b) receive \$25M or more in annual revenues from Federal awards; AND (c) 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]?

☐ yes ☐ no. If yes, please furnish the required information to Concord for a FFATA filing.

SECTION C - Audit Status

Is the subrecipient subject to the Single Audit Act Does the subrecipient receive an annual audit in accordance with OMB Circular A-133? ☐ 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:

Were any audit findings reported? ☐ yes ☐ no

If yes, please provide an explanation with a complete copy of the subrecipient's most recent audit report or URL link to a complete copy.

If no, does the subrecipient receive federal funding of at least \$500,000 per year? ☐ yes ☐ no

Subrecipient is a: ☐ Non-profit entity (under federal funding threshold)
☐ Foreign entity
☐ For-profit entity
☐ Government entity

If subrecipient does not receive an A-133 audit, Concord will require the entity to complete Concord's Non-A133 Financial Review Questionnaire, and may require a limited scope audit, before a subaward will be issued.

SECTION D - Comments: Attach pages as necessary.

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.**

Signature of Subrecipient's Authorized Official, and Date

Subrecipient's Authorized Official Name and Title:

Address:

Phone & Fax:

Email: