

Annual Subrecipient Questionnaire for Renewal Activity/Amendments

Section A - Core Information: All Subrecipients must complete this information

Project Information	Subrecipient Information
Subaward No:	<input type="checkbox"/> FDP Expanded Clearinghouse Participant (insert profile link here)

Renewal Documents (check as applicable)

The following documents are included for amendment processing;

<input type="checkbox"/> NO CHANGE in SOW	<input type="checkbox"/> Detailed Budget	<input type="checkbox"/> Cost Share Budget (if applicable)
<input type="checkbox"/> Updated Statement of Work	<input type="checkbox"/> Budget Justification	<input type="checkbox"/> Other:

Compliance Information

Human or Vertebrate Animal Subjects

<input type="checkbox"/> Human Subjects	Approval Date:	Pending <input type="checkbox"/>
<input type="checkbox"/> Animal Subjects	Approval Date:	Pending <input type="checkbox"/>

When applicable, Subrecipient's IRB and/or IACUC approval must be provided to RFSUNY prior to issuance of a subaward amendment

Certifications

PI Debarment and Suspension:

The Subrecipient certifies that the Subrecipient entity, PI, AND ALL OTHER EMPLOYEES OR STUDENTS PARTICIPATING IN THIS PROJECT and the Subrecipient entity: (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 of 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.

has **has not** within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency

SUBRECIPIENT SIGNATURE

By signing below the subrecipient certifies that the information (including attachments), certifications (as applicable) and representations above have been made by an authorized official of the Subrecipient named, attesting to its accuracy and completeness. Subrecipient agrees that should any of the information entered above change for any reason the Subrecipient will notify RFSUNY of any and all such changes.

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:

Name and Title of Authorized Official

Email

Phone

For RF Internal Use Only

- FDP Expanded Clearinghouse verified
- Single Audit reviewed
- No debarment/suspension concerns

Comments/Concerns:

- All necessary information provided
- Subrecipient is in compliance with all requirements

Proceed with Subaward amendment: _____

RF Sponsored Programs Official



If Subrecipient is NOT an FDP Expanded Clearinghouse Member please continue to Section B

Section B – Non-FDP Expanded Clearinghouse Entity Information

Must be completed by all subrecipients NOT in the FDP Expanded Clearinghouse

Entity Information

Active SAM.gov registration: Yes No SAM.gov Expiration Date:

Rate Information

Facilities and Administrative Rates

- No change Subrecipient F&A rate from prior year.
- Our federally-negotiated F&A rates for this type of work have changed.
- A copy of our updated F&A rates is attached
- Our rate agreement is publicly available at:

Fringe Benefit Rates

- No change to Subrecipient Fringe Benefit rate from prior year.
- Fringe Benefit rates have changed.
- A copy of our Fringe Benefit rate agreement is attached
- Our rate agreement is publicly available at:

Additional Certifications

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

Subrecipient certifies Subrecipient does not certify that no payments have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this proposed project. (If does not certify is checked, attach explanation.)

Conflict of Interest (for PHS funded subawards):

Subrecipient 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 45 CFR Part 94 “Responsible Prospective Contractors.” Subrecipient also certifies that, to the best of Subrecipient’s knowledge, (1) all financial disclosures will be 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 and within a timely manner sufficient to enable timely FCOI reporting.

Subrecipient **does not** have an active and/or enforced conflict of interest policy and agrees to adopt Research Foundation for SUNY’s policy. Subrecipient shall complete a financial disclosure form to be provided by the Foundation for each Subrecipient investigator and submit this form to Foundation’s contact. Subrecipient certifies that the required training will be completed by each investigator prior to engaging in any research related to any funded subcontract.

Conflict of Interest (For Non-PHS/NSF Individual COI or any Organizational COI Requirements ONLY):

Check if Applicable

Subrecipient hereby certifies it will comply with the additional standards for financial disclosure, both individual and organizational, and conflict of interest policies which are required by the Prime Sponsor.

Subrecipient also certifies that, to the best of its knowledge:

- a) Any 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/or sponsor requirements;
- b) All identified conflicts of interest have or will have been satisfactorily managed, reduced, or eliminated in accordance with Subrecipient's conflict of interest policy and/or sponsor requirements prior to the expenditure of any funds under any resulting subagreement;
- c) Any information consistent with the Sponsor's guidelines for conflict of interest reporting will be made to the Research Foundation for SUNY as required, either at the time of proposal or before funding begins.

Audit Status:

Yes No Does Subrecipient conduct an annual audit in accordance with OMB Uniform Guidance (2 CFR 200.500 Subpart F)? (If yes, complete section 1; if no, complete section 2)

1. Most recent fiscal year completed: FY _____
 Yes No Were any audit findings specifically related to subawards from the Research Foundation for SUNY reported? If "Yes," explain in Section 3, Comments, below.

Does the most recent audit report reveal any of the following:

- Yes No Material Weaknesses
- Yes No Significant Deficiencies
- Yes No Instances of Material Non-compliance

If "Yes" to any of the above, indicate in Section 3 what actions are being taken to resolve.

2. Subrecipient DOES NOT receive an annual audit in accordance with OMB Uniform Guidance (2 CFR Part 500)

Subrecipient is a:

- Non-profit entity under federal expenditure threshold
- Foreign entity
- For profit entity
- Government entity

Please complete attached addendum. Also, provide a complete copy of your most recent single audit report or independent audit, or provide the URL link to a complete copy.

3. Additional comments on Single Audit(s):

Subrecipient Questionnaire Addendum

for Organizations Not Subject to Federal Audit Requirements

1. Organizational status: sole proprietor partnership corporation foreign other: _____

2. Total revenue for the last fiscal year: \$ _____

3. Number of employees on organization's payroll: _____

4. Total Amount of Federal awards received in the last fiscal year: \$ _____

5. Does your organization have:

- A program specific audit to determine compliance with applicable laws and regulations for a specific federal program? Yes No
- An annual audit performed by certified public accountants? Yes No

If you answered YES to either of the above, please attach a copy of the audit report to this questionnaire.

6. If you answered **NO** to the above, briefly describe the controls you have in place that will provide reasonable assurance that expenditures on this award are made in compliance with the applicable terms and conditions.

7. Will the organization adhere to the Cost Accounting Standards Board (CASB) rules and regulations (48 CFR 30) (applicable to for profit organizations), or Federal Uniform Guidance standards (applicable to non-profits) under the proposed subaward? Yes No

8. Does the organization have a financial management system that provides records that can identify the source and expenditure of funds for subaward activities? Yes No

9. Does the organization's financial management system provide for the control and accountability of project funds, property, and other assets? Yes No

10. Does the organization have formal, written personnel policies? Yes No

11. Does the organization's financial management system allocate labor and benefit expenses that would enable tracking specific charges by individual? Yes No

12. Does the financial management system generate reports that allow for the monitoring of salary charges?
 Yes No

13. Does the organization have a formal, written purchasing procedure? Yes No