OFFICE OF THE CONTROLLER

Grants and Funds Management

Understanding Cost Share

April 2024



Table of Contents

ntroduction to Cost Share	3
Recording Cost Share	14
Roles and Responsibilities	30
Cost Share Budget vs. Actuals	34
Salary Cap	37
Key Takeaways	43
Resources and Contacts	45



Introduction to Cost Share



What is Cost Share?

Cost sharing is the portion of project costs not provided by the sponsor. Cost sharing occurs whenever any portion of project costs is provided at USC's expense rather than at the expense of the sponsor.

Most sponsors expect cost share to be charged in **ratio** throughout the life of the project. Record cost share in ratio with project spending – do **NOT** wait until the end of the project to record cost share.

Sponsors *can and will* withhold reimbursement if you are not meeting cost share requirements!

Always reach out to your Post Award Accountant (PAA) to verify cost share if you have questions.



Ways to Meet Cost Share Requirements

The method of meeting cost share requirements is determined at the proposal stage and must be approved by the sponsor.

1. Cash Match

Definition: Cash outlay by USC using departmental funds or sponsored award funds specifically for cost share or externally provided cash for cost share.

Example 1: A sponsor awards \$400,000 for research but stipulates in the agreement that USC must spend \$50,000 toward the award.

Example 2: Department of Commerce gives USC \$50,000 to spend as cost share on another sponsored award such as PTAC.

2. Waived Indirect Cost (IDC)

Definition: When IDC is "waived" the University agrees not to charge its federally negotiated IDC rate to the sponsor. The portion waived is considered "unrecovered IDC" and can be used as cost share if this is allowed by the sponsor.

Example: USC may agree to charge less than our federally negotiated rate in order to meet our cost share requirements.

3. Third Party Match

Definition: Third-party in-kind matching includes, but is not limited to, the valuation of non-cash contributions provided by a third party. An in-kind match may be in the form of services, supplies, real property, and equipment. Sometimes a third party will give us the cash instead of the value.

Example: A consultant is volunteering a portion of their time worked on a project, and the value of the time can be used to meet cost share.



Uniform Guidance: Cost Share and Matching

Uniform Guidance 200.306 - Cost Sharing or matching

For all Federal awards (USCSP), any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching when such contributions meet all the following criteria:

- 1. Are verifiable from the non-Federal entity's records;
- 2. Are not included as contributions for any other Federal award;
- 3. Are necessary and reasonable for accomplishment of project or program objectives;
- 4. Are allowable under subpart E of this part;
- Are not paid by the Federal Government under another Federal award, except where the Federal statute authorizing a program specifically provides that Federal funds made available for such program can be applied to matching or cost sharing requirements of other Federal programs;
- 6. Are provided for in the approved budget when required by the Federal awarding agency; and
- 7. Conform to other provisions of this part, as applicable.



Types of Cost Share

Mandatory

Cost sharing that is required by the sponsoring agency. It may be in the form of a specific dollar amount or a certain percentage of total costs.

- Non-compliance leads to funding loss.
- Considered binding commitment on the part of University.

Voluntary Committed

Cost sharing that has been proposed by the institution to voluntarily commit a specific portion of the costs of the project when it is not required.

- Included in the proposal as condition of receiving funding.
- Is a binding commitment to the University

Voluntary Uncommitted

Cost sharing that is not required by the terms of the sponsored program and is not included or budgeted for as part of the sponsored program.

 May be needed to cover actual effort/cost that is over and above what was committed in the proposal.



Where to View the Cost Share Proposal ?

The Cost Share Proposal can be found in <u>USCeRA</u>.

U	SC	RA 1	Home Awards	✓ Faculty Expertise ✓ Proposals ✓			Mrs. J	panne Callahan 👻
Budg	et							
Q Vi	ew All	🖶 Print All					_	
Actio	n	Report Date	Report Type	Notes	Total F&A %	USC Cost	Sponsor Cost	Total
Q	4	01/17/2020	New Funds	01/17/20SA: Per attached Subaward Agreement.,	46.5	\$115,536	\$229,461	\$344,997
٩	4	05/01/2023	Additional Funds	05/01/23SA: Increase funding per attached Amendment No. 04.	46.5	\$100,669	\$482,231	\$582,900
٩	4	08/17/2023	Re-Budget	Source Post Award Action 08/17/23SA: Rebudget funds per attached justification and approval.	46.5	\$0	\$0	\$0
				Το	al Direct	\$216,205	\$711,692	\$927,897
			Indirect Costs		USC	\$100,536	\$238,308	\$338,844
				Award	Subtotal	\$316,741	\$950,000	\$1,266,741
					SCRF		\$0	\$0
					Facilities		\$0	\$0
				Tota	I Budget	\$316,741	\$950,000	\$1,266,741

Where to View the Cost Share Proposal?

The Cost Share Proposal can be found in USCeRA.

USCORA A Home Awards - Fa	aculty Expertise 👻 Proposals 👻		Mrs.	Joanne Callahan 👻		
Proposal #15510-19-4999 Title "Deposition Tailor-made Size	6 Summary e-sieving Sorbents	for Post-combustic	on CO2 Cap	oture"		
Project	Le	ad PI	Tools			
Status	Dr. James Ritter Current & Pending	C Audit Trail				
Sponsor Awarded Type	emical Engineering	Engineering + Add Note				
New Dates	Ot	her	Print Cover Page			
10/01/2019 - 09/30/2022	Cł	emical Engineering Dr. Armin Ebner Current & Pending				
Awards						
10009797 Deposition Tailor-made Size-sieving Sorbents for Post-corr	nbustion CO2 Capture	bloaded Documents (7)				
All Forms		Department Cost S	Share Commit	ment		
Proposal/Award Processing Form (PAP)	✓ Complete	Pi Name	Dept #	Fac. Rel.		
Cost Share	✓ Complete		155100	Yes		

✓ Comp

Federal Approval

Agreed on 10/18/2018

Pi Name		Dept #	Fac. Rel.	Year	Sal/Wages	Fringe	Travel	Equip.	Other	IDC	Total
		155100	Yes	1	\$84,948.00	\$30,588.00	\$0.00	\$0.00	\$0.00	\$53,724.00	\$169,260.00
		155100	Yes	2	\$74,741.00	\$25,929.00	\$0.00	\$0.00	\$0.00	\$46,811.00	\$147,481.00
Daman											
Depar Totals Year	tment by										
Depar Totals Year Year	tment by Total										
Depar Totals Year Year	tment by Total \$169,260.00										

Where to View the Cost Share Proposal ?

The Cost Share Proposal can be found in USCeRA.

		UNIVERSITYOF SOUTHCAROLINA COLLEGE OF ENGINE	ERING AND COMPUTING		
October 1	8, 2018				
То:	Dr.	, Chemical Engineering			
From:		, Senior Associate Dean for Research and Grad	uate Education		
Re:	CEC Co	st-sharing on DOE Proposal with RPI	M		
Cc:					
Congratulations on the invitation to submit a full proposal on a team project titled "Deposition Tailor-made Size-sieving Sorbents for Post-combustion CO2 Capture". DOE requires a 20% cost share for the program, however, due to GTI's inability to provide cost share RPI requested we provide 25% which we agreed to do. The three year project includes has a total budget of \$850,000 including \$283,488 in cost share as discussed above. If awarded, USC's share will generate \$211,733 in IDC. The cost share					
salary. Be covered b	ecause by IDC return t	is a research grant employee, the cost share of the Department and PI.	his salary will be		
If the grar	nt is funded, th if the	ne college will assist with documentation of cost share. ere are any questions.	Please contact		



What is Allowable?

Matching and cost share funds have the same restrictions as sponsored funds. These funds must follow the same allowable and unallowable guidelines in their sponsored award.

If, for example, a conference is unallowable under the grant award that has matching requirements, then grantees would not be able to use the matching funds instead. The expense must be allowable with sponsored funds for it to be allowable with matching or cost share funds.



What is Allowable?

Allowable

Not Allowable

Other direct costs, travel, lab supplies, etc.

Contributed Effort

2

3

4

5

Program Income

Approved unrecovered IDC

Contributions from 3rd parties (non-USC Entities)

**Note: Cost Share must follow the same guidelines as the award.

lt

Items categorized as IDC. For example, USC space and utilities, administrative/clerical salaries, and postage.

2

Any costs specifically disallowed by the Sponsor.

3

Other Sponsored Programs (Federal Funds should not be cost shared on Federal Funds)





Demonstration

Where to find Cost Share information in USCeRA?



Recording Cost Share



Various Ways to Meet Cost Share





Various Ways to Meet Cost Share

In-kind The departments responsibility to provide GFM and PAA documentation (memo from the organization outlining the services they provided) to support the in-kind match being received in order for the Post Award Accountant to post to the General Ledger. In-kind documentation should be received quarterly giving Grants and Funds Management the opportunity to report properly.

Waived: Grants and Funds Management is responsible for posting waived IDC monthly.



Cost Share Chartfield Creation Process



HCM Cost Share Combo Codes

- Cost Share account codes or "Combo Codes" must be created in HCM in order for cost share to be properly recorded for payroll expenses.
- Cost Share Combo Codes begin with a "C".
- Forms are Available Online at: <u>http://hr.sc.edu/forms.html</u>
- Account change forms should be used to update and allocate applicable salary charges as cost share on the project.
- Forms should be submitted timely and are subject to the Cost Transfer Policy just like direct expenses.



HCM Cost Share Combo Codes

		rsity of TH CAF	ROLINA	HU	B ▼ H	CM DISTRIBL	JTION - H	CM DISTRIBUTION SEAR	СН								Sign ou	ıt		
	USCID		Supervisor	USCID	Pay	/ Group		Combo	Project B	U	F	rom Pay	/ Period	Nu	um of F	Records				
	Name		Empl.Rcd		Pay	/ End Date (m	n/d/y)	Operating Unit	Project		T	ALL o Pay P	~ eriod		10000 r der By	/				
	Job		Empl.Class		Ear	n End Date (r	m/d/y)	Department	CFDA		F	ALL iscal Mo	~ onth		Chartfi Total	ield,Name	~			
	HCM Dept.		Full/Part		Dis	to t.Status		Fund	Contract		F	JULY iscal Ye	~ ar		Sub-To Detail	otal				
	Journal.		All Reg/Temp		→ A Dis	ALL t.Type	~	Class	Sponsor		P	ALL Pay Run	v ID		Sum.A	djustmen	its			
	Check		All Std.Hours		→ A Dis	ALL t.Class	~	Account	Costshar	8					Fringe	-Summary	(Hori 🗸			
	Check Date (m/d/y)		HCM BU [C	ampus]	/ Dis	ALL t.Code	~		1001212	20										
	to		All		~															
						Sub	mit Clear	r CSV RETRO	O											
Records Found: 22																				
NAME USCID	FISCAL PERIOD : JOURNAL	JOB HC DEF	M GROUP PT	PAY PERIOD	CHECK	CHK DATE	СОМВО	CHARTFIELD		LBR \$	LBR %	ТАХ	RETIRE	LIFE	LTD	HEALTH	DENTAL	FRNG \$	FRNG %	тот \$
	2324-1 : PAY0167742	UG76 1552	01 C12	07/15/2023	8001343671	07/14/2023	C00000007285	CL040-155001-A0001-101-	-10012120	1,981.34	8.92%	154.20	493.54	0.02	0.14	54.54	0.60	703.04	35.48%	2,684.38
TOTAL	2324-1 : PAY0168835	UG76 1552	UT C12	07/31/2023	8001353686	07/31/2023	00000007285	CL040-155001-A0001-101-	-10012120	1,981.34 3,962.68	8.31%	37.77 191.97	493.55 987.09	0.02	0.13	50.82 105.36	0.55	582.84 1,285.88	29.42% 32.45%	2,564.18 5,248.56

Cost Share on Tuition Supplements

Office of Student Financial Aid and Scholars

Calculate Description of Conducts Assistant Tuiton Supportend to the Office of Buddet Financial Ad and Scholarships, Folior the steps below. On a compared, click Year's or an an antibility of the Step Step Step Step Step Step Step Ste	South C	arolina		1244 Blossom St., Suite 200 Colu Phone: 803-777-8134 Fax	mbia, SC 292 <: 803-777-09
Jose bits onto response recipiones of Graduate Acasteant Tuilon Supplements to the Office of Student Financial Ad and Scholamships. Follow the steps below. One completed, click 'Next' to sign acastemic to for encloance of completing to form a unique account. Separate forms are needed for each unique account number and for revisions. 1: Outputs to enform of all students paid form a unique account. Separate forms are needed for each unique account number and for revisions. 1: Outputs to enform of all students paid form a unique account. Separate forms are needed for each unique account number and for revisions. 1: Outputs to enform of all students paid form a unique account. Separate forms are needed for each unique account number and for revisions. 1: Output to enform of all students paid form a unique account. Separate forms are needed for each unique account number and for revisions. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1: Output to enform of all students paid form a unique account formation. 1:		Graduate	Assistant Tuition Suppl	ement Form	
Nature for the formed provident information. A comparison of the formation information before completing the form. A comparison of the formation information before completing the form. A comparison of the formation information before completing the form. A comparison of the formation information. B comparison of the formation information. B comparison of the formation information information. B comparison of the formation information information. B comparison of the formation of the formation information. B comparison of the formation of th	Use this form to report recipients of C	Braduate Assistant Tuition Supplement to	o the Office of Student Financial Aid ar	d Scholarships, Follow the steps below, Once completed,	click "Next" to sig
is called as a form of all students based from a unique second. Separate forms are needed for each unique account number and for revisions. is called as former 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is should not be submitted on the same form. Implicitie de same 10° is former	Note the following important inform	ation before completing the form:			
- Our lices Banner ID's should not be submitted on the same form.	Complete one form for all stu	dents paid from a unique account. Sepa	rate forms are needed for each unique	account number and for revisions.	
Type 1. Complete the account and department information. Be sure to provide the complete account information. DEPARTMENT D Michair Center: Mechanical DEPARTMENT D PLOD FOLWING: ACCOUNT? Departmential OPERATING UNT DEPARTMENT D DEPARTMENT CONTACT F MONSER DEPARTMENT Feel USA approximation of the accounter on dipartment of the accounter and proximation on term of a monser of the approximation of the accounter on diparted for 121 of the automation of the amount will be form decader of the analysis of the automatication is a revision to a previously submitted supplement. Active the total supplement field and spring the automatication is a revision to a previously submitted supplement was then use the dipartment of the account and dipartment was then use the dipartment was then use the dipartment submitted, e dipartment of the account and dipartment was then use the dipartment submitted, and 1-6 hours receive 33% of the amount submitted, S dipartment fulling	Duplicate Banner ID's should	I not be submitted on the same form.			
DPARTMENT NAME DEFARTMENT D PAID FROM WHICH ACCOUNTY DEFARTMENT NAME DEFT NUMBER CLASS COOE DEFORM WHICH ACCOUNTY DEFORM WHICH ACCOUNTY DEFORM WHICH ACCOUNT DEFORM WHICH ACCOUNTY DEFORM WHICH ACCOUNT DEFORM WHICH ACCOUNT DEFORM WHICH ACCOUNT DEFORM WHICH ACCOUNT Torm ACCOUNT EXPONENT DEFORM WHICH ACCOUNT DEFORM WHICH ACCOUNT EXPONENT DEFORM WHICH ACCOUNT EXPONENT Torm ACCOUNT EXPONENT DEFORM WHICH ACCOUNT EXPONENT DEFORM WHICH ACCOUNT EXPONENT DEFORM WHI	Step 1. Complete the account and de	enartment information. Be sure to provide	e the complete account information.		
Methair Center - Machanization [15501 [1500	DEPARTMENT NAME	DEPARTMENT ID	PAID	ROM WHICH ACCOUNT?	
OPERATING UNIT DET NUMBER FUND NUMBER CLASS CODE PE USINESS UNIT DEDOCTID ATTIVID DECIDE DEDOCTID ATTIVID DECIDE DEDOCTID ATTIVID DECIDE DEDOCTID ATTIVID DEDOCTID DEDOCTID ATTIVID DEDOCTID DEDOCTID ATTIVID DEDOCTID DEDOCTIDE ATTIVID DEDOCTID DEDOCTIDE ATTIVID DEDOCTID DEDOCTIDE ATTIVID DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTIDE DEDOCTI	McNair Center - Mechanical	155401	Depa	rtmental	
Include Image: Second Seco				CLASS CODE	
PC_BUSIPESS UNIT PROJECT ID ACTIVITY ID IDEPARTMENT CONTACT PHONE NUMBER DEPARTMENT CONTACT E-MAIL ADDRESS (1933) 777-9596 'gadowd@cec.sc.edu tap 2. Choose the academic year, indicate whether the award is for fail and spring, or summer, and indicate if the authorization is a revision to a previously submitted supplement. ACADEMIC YEAR 'gadowd@cec.sc.edu tap 2. Choose the academic year, indicate whether the award is for fail and spring, or total for summer) in the 'TOTAL SUPPLEMENT' field. If and spring, the anount will be whoted every between the fail and spring tarms. If the student is graduating at the end of the fail term, or the account is ending before 12/31 of the current year, then use the drop down box to fail and spring tarms. If the student is graduating at the end of the fail term, or the account is ending before 12/31 of the current year, then use the drop down box to fail and spring tarms. If the student is graduating at the end of the fail term, or the account is ending before 12/31 of the current year, then use the drop down box to fail and spring. The student is graduating at the end of the fail term, or the account is ending before 12/31 of the current year, then use the drop down box to fail and spring. The student is prove 100% of the amount submitted, 6-8 hours receive 67% of the amount submitted, and 1-5 hours receive 33% of the mount submitted. Number of students to be awarded? Image: Control term endipicate ID's. FOR TEMM MOICATED ABOVE ACCOUNT ENDING IN FALL Passe to not enter explicate ID's. FOR TEMM MOICATED ABOVE ACCOUNT ENDING IN FALL Passe to not enter	CL040	155000	EN700	202	
LipsCIP pot00124 I DEPARTMENT CONTACT PHONE NUMBER DEPARTMENT CONTACT E-MAIL ADDRESS Teg 2. Choose the academic year, indicate whether the award is for fall/spring, or summer, and indicate if the authorization is a revision to a previously submitted supplement. AcaDEMIC YEAR 2224 TERM 2224 S This A REVISION TO A PREVIOUS AUTHORIZATION SUBMITTED? No Teg 3. Enter the total supplement for the academic year (total for fall and spring, or total for summer) in the TOTAL SUPPLEMENT field. If awarded for fall and spring, the amount will be fore 1237 No Teg 3. Enter the total supplement for the academic year (total for fall and spring, or total for summer) in the TOTAL SUPPLEMENT field. If awarded for fall and spring, the amount will be fore 1237 The amount submitted, and 1-5 hours receive 33% of the amount submitted. Murbler of student is enrolled in 9 or more hours, they will receive 100% of the amount submitted, 6-8 hours receive 67% of the amount submitted, and 1-5 hours receive 33% of the mount submitted. No Action to write any special instructions. Index or facture to previously automated to result and spring. The set of the previous and the complexity of the amount submitted and spring. The academic to previous a set of the previous and the complexity of the amount submitted. Action to write any special instructions. Index or factor topicate 10x. Total SupPLEMENT Action to write any special instructions. Index Orawford will	PC BUSINESS UNIT	PROJECT ID	ACTIVITY ID		
PEPARTMENT CONTACT PHONE NUMBER Department CONTACT PHONE NUMBER Department CONTACT PHONE NUMBER Department CONTACT PHONE NUMBER Department Contract Phone Number Departmen	USCIP	80000124	1		
Image 2. Choose the academic year, indicate whether the award is for fall/spring, or summer, and indicate if the authorization is a revision to a previously submitted supplement. Image 2. Choose the academic year, indicate whether the award is for fall/spring, or summer, and indicate if the authorization is a revision to a previously submitted supplement. Image 2. Choose the academic year, indicate whether the award is for fall and spring, or total for summer) in the "TOTAL SUPPLEMENT field. If awarded for fall and spring, the amount will be wided evenly between the fall and spring arms, if the student is graduating at the end of the fall term, or the acount is ending before 1231 of the current year, then use the drop down box to dicate TES. If a student is enrolled in 9 or more hours, they will receive 100% of the amount submitted, 6-8 hours receive 67% of the amount submitted, and 1-5 hours receive 33% of the mount submitted. Number of students to be awarded? ¹ Image: Total SUPPLEMENT GRADUATING FALL/ ACCOUNT ENDING M FALL Pases bit alphabeloally. Please for adplace to the and student - NO Health Insurance - 6 credit hours. Image 2 crewford will complete the Journal entry to 'cost share' tuition Is this section to write any special instructions. Image 2 crewford will complete the Journal entry to 'cost share' tuition Image 2 crewford will complete the Journal entry to 'cost share' tuition Image: Crewford will complete the Journal entry to 'cost share' tuition Image: Crewford will complete the Journal entry to 'cost share' tuition Image: Crewford will complete the Journal entry to 'cost share' tuition Image:	DEPARTMENT CONTACT PHONE (803) 777-9596	NUMBER	DEPARTMENT CONTACT E-M gadowd@cec.sc.edu	AL ADDRESS	
ACADEMIC YEAR TERM ST HIS A REVISION TO A PREVIOUS AUTHORIZATION SUBMITTED? No Step 3. Enter the total supplement for the academic year (total for fail and spring, or total for summer) in the "TOTAL SUPPLEMENT" field. If avarded for fail and spring, the amount will be fiveded every between the fail and spring terms, if the student is graduating at the end of the fail term, or the account is ending before 12/31 of the current year, then use the drop down box to mount submitted. 6 - 8 hours receive 67% of the amount submitted, and 1-5 hours receive 33% of the amount submitted. Number of students to be awarded? ACCOUNT ENDING IN FALL Prease ist aphaneer ID Prease Ist aphaneer Prease Ist aphaneer ID Prease Ist aphaneer ID	Step 2. Choose the academic year, i	ndicate whether the award is for fall/spri	ng, or summer, and indicate if the auth	orization is a revision to a previously submitted supplemen	t.
TEM FallSpring I Is THIS A REVISION TO A PREVIOUS AUTHORIZATION SUBMITTED? No Tep 3. Enter the total supplement for the academic year (total for fall and spring, or total for summer) in the 'TOTAL SUPPLEMENT' field. If awarded for fall and spring, the amount will be dived evenly between the fail and spring terms. If the student is graduating at the end of the fall term, or the account is ending before 1237 of the current year, then use the drop down box to didate VES. If a student is enrolled in 9 or more hours, they will receive 100% of the amount submitted, 6-8 hours receive 67% of the amount submitted, and 1-5 hours receive 33% of the mount submitted. Number of students to be awarded?? 1 Image: Contract of the current year. Then use the drop down box to dive ta phototicity. Pearle 1st aphototicity. Passe do not enter dupleate IDs. TOTAL SUPPLEMENT GRADUATING FALL/ ACCOUNT ENDING N FALL Pearle 1st aphototicity. Pease do not enter dupleate IDs. FOR TERM IND/CATED ABOVE GRADUATING FALL/ ACCOUNT ENDING N FALL Sommerns I - New Graduate Student - NO Health Insurance - 6 credit hours. Image: Convert of the long submitted in the form electronically. Lindsay Crawford will complete the Journal entry to 'cost share' tuition Image: Convert of Date Image: Convert of Date Signature Date Date Date Date Exercise Standard		ACADEMIC YEAR		* 2324	
Service of the servi		TERM		Fall/Spring	
		IS THIS A REVISION TO	A PREVIOUS AUTHORIZATION SUBM		
LAST NAME, FIRST NAME BANNER ID FOR TERM INDICATED ABOVE GRADUATING FALL/ ACCOUNT ENDING IN FALL Pease do not enter duplicate ID's. FOR TERM INDICATED ABOVE ACCOUNT ENDING IN FALL SOMMENTS I - New Graduate Student - NO Health Insurance - 6 credit hours. Indisay Crawford will complete the Journal entry to 'cost share' tuition tags this section to write any special instructions. Lindsay Crawford will complete the Journal entry to 'cost share' tuition tags 4. Review the information entered to ensure completeness and accuracy. Once reviewed, click 'Next' below to sign and submit the form electronically.	vided evenly between the fall and s dicate YES. If a student is enrolled mount submitted. Number of students to be awarded	pring terms. If the student is graduating i in 9 or more hours, they will receive 100 ?*1	at the end of the fall term, or the accou % of the amount submitted, 6-8 hours	it is ending before 12/31 of the current year, then use the d receive 67% of the amount submitted, and 1-5 hours received the submitted of the amount submitted of the submitted of	rop down box to ve 33% of the
LAST NAME, FIRST NAME BANNER ID FOR TERM INDICATED ABOVE GRADUATING FALL/ ACCOUNT ENDING IN FALL Passe lat alphabelically. Please do not enter duplicate ID's. FOR TERM INDICATED ABOVE GRADUATING FALL/ ACCOUNT ENDING IN FALL COMMENTS I - New Graduate Student - NO Health Insurance - 6 credit hours. No Indicated Student - NO Health Insurance - 6 credit hours. Lindsay Crawford will complete the Journal entry to 'cost share' tuition Indicated Student - NO Health Insurance - 6 credit hours. Lindsay Crawford will complete the Journal entry to 'cost share' tuition		,			
	LAST NAME, FIRST NAME	BANNER ID	TOTAL SUPPLEMENT	GRADUATING FALL/	
COMMENTS Jse this section to write any special instructions. I - New Graduate Student - NO Health Insurance - 6 credit hours. Lindsay Crawford will complete the Journal entry to 'cost share' tuition tep 4. Review the information entered to ensure completeness and accuracy. Once reviewed, click 'Next' below to sign and submit the form electronically.	Please list alphabetically.	Please do not enter duplicate ID's.	FOR TERM INDICATED ABOVI	ACCOUNT ENDING IN FALL	
COMMENTS I - New Graduate Student - NO Health Insurance - 6 credit hours. Lindsay Crawford will complete the Journal entry to 'cost share' tuition tep 4. Review the information entered to ensure completeness and accuracy. Once reviewed, click "Next" below to sign and submit the form electronically. Losoparator Date FOR SCHOOL USE ONLY			\$ 5,680.00		
Juse this section to write any special instructions. Lindsay Crawford will complete the Journal entry to 'cost share' tuition tep 4. Review the information entered to ensure completeness and accuracy. Once reviewed, click 'Next' below to sign and submit the form electronically. Signature Signature Date FOR SCHOOL USE ONLY	COMMENTS	- New Graduate	e Student - NO Health Insurance - 6 cn	dit hours.	
itep 4. Review the information entered to ensure completeness and accuracy. Once reviewed, click "Next" below to sign and submit the form electronically.	Use this section to write any special	instructions. Lindsay Crawford will con	nplete the Journal entry to 'cost share'	tuition	
Signature Date FOR SCHOOL USE ONLY	itep 4. Review the information enter	ed to ensure completeness and accurac	y. Once reviewed, click "Next" below t	sign and submit the form electronically.	
Signature Date Signature Date FOR SCHOOL USE ONLY	0	3030373730			
Signature Date FOR SCHOOL USE ONLY	Signature	07/24/2023, 2:39 PM Date			
Signature Date FOR SCHOOL USE ONLY					
FOR SCHOOL USE ONLY	Signature	Date			
		FOR S	CHOOL USE ONLY		
	GA*				

- Complete a departmental tuition supplement form, charging the departmental account covering the cost share.
- In the **Comment** box indicate which project is being cost shared.
- Submit the form to Financial Aid as normal, however a copy will also need to be sent to your PAA.
- Financial Aid will charge your department. Your PAA will add the cost share combo code to the transaction when it comes over from Banner.



Cost Share Chartfield in PeopleSoft Finance

Entering chartfield information on a Payment Request.

	Add a New Line	
Instructions ② Line Description Quantity 1	Unit Unit Price *Line Amount SpeedChart Key Q 1000.00 Q COLLEGE OF ARTS AND SCIENCES	
Line Quantity *Amount	*GL Business Unit Operating Unit Department Fund Code Account Class PC Business Unit	Project Activity Cost Share
+ - 1 1000.00	USC01 Q CL071 Q 135500 Q A0001 Q 52250 Q 101 Q Q	Q Q 10012971 Q
OK Cancel		



Cost Share Chartfield in PeopleSoft Finance

Entering chartfield information for Travel expense report.

⊽	*Date 09/12/2023	*Expense Type Air Travel Expenses	~	*Descripti * DL4056 248 chara	on octers remaining	A Contraction	*Payment Type Personal Reimburseme	en 🗸 Ø*	*Amount 500.00	*Currency USD Q	+ -
	*Billing Type *Location *Ticket Number	AVAILABLE V Out of State 12345678	Q		E Receipt Split		✓ Default Rate Non-Reimbursable No Receipt	*Exchange Base Currency A	1.0000 Rate mount	10000 🤣 🎥 500.00 USD	1
	Acco	ounting Details ⑦ Chartfields Ⅱ									
		Amount 500.00	Dept	Fund A0001 Q	Account 52024 Q	Class Q	PC Bus Unit Project	Activity Q	٩	Cost Share 10010321	۵



Cost Share Chartfield in PeopleSoft Finance

Entering chartfield information on a P-Card Expense Report.

*Date	*Expense Type			*Descript	tion				*Paymer	nt Type			*Amount	*Curren	су	
09/08/2023	MEMBERSHIP FEE	ES	~	* Member	ship				Prepaio	d Payments	~		500.00	USD		I
*Billing Type *Merchant ⊽ Acco	AVAILABLE V Preferred SCARC punting Details (?)	Non-Preferred		244 char	acters remaining			1	Default Ra Non-Reiml No Receip	te bursable t	Base (<i>®</i> ₊ *Exchange Currency An	1.000 Rate nount	500.00	🕫 🖹 USD	
Amount	Oper Unit	Dept		Fund	Account		Class	PC Bu	us Unit	Project		Activity		Cost S	nare	
500.	.00 CL071	Q 135500	Q	A0001 Q	52250	Q	101	Q	Q		Q		Q	100129	971	Q



Step 1: Search for the employee using the Search for Person field.Step 2: Click the Actions arrow and select Account Funding Change from the list.

K My Homepage		Actions	EPAF	\Diamond	:	\oslash
Start a Personnel Action Form Search for Just Search In Search	Current Employee	Actions×View Personal DataView Job DataAccount Funding Change	bill Business Unit SCCOL USC Columbia cord 0 Job Indicator Primary Job ient 155020 CEC COLLEGE OF ENG AND COMP Empl Class FTE Full Time Equivalent ode Faculty/Staff Staff			
Act on Personnel Action Form Getting Started Evaluate an EPAF eForm						
 Update an ePAF eForm View an ePAF eForm 						



Step 3: Select the applicable Effective Date, if different than the default.

Step 4: Click the No button to toggle to Yes indicating you want to copy the row that needs to be changed.

Step 5: Click the Select Chartstring button.

< My Homepage	EPAF ŵ 🎝 🗄 Ø
+ Account Funding Change : Distribution Details	Form ID 636013
Employee Details	
Position Number	Name
Department 155020 CEC COLLEGE	ENG AND COMP Empl ID
Pay Group C12	Empl Record 0
Compensation 96135.000000	
Effective Date	
Pay Period Effective Date 2023-09-01	
Current Distribution	
This segment displays current funding. Use select buttons to copy any current fu	g into new funding. Copy any rows of funding you want to keep as is, and copy any rows you want to keep and update.
Percent of Distribution ☆ Amount ☆ Operat	1 row
Deselect All	
New Distribution	
Build new funding in the table below. Include any rows you want to keep from cu	t funding. Use the + and - buttons on the far right side of the table to add or delete rows as needed. Delete any rows without a funding percent/amount. Funding percent must total to 100%.
	4
Percent of Distribution \diamond Amount \diamond Select	۱۲۵۳ artString Operating Unit ◇ Department ◇ Fund Code ◇ Account ◇ Class Field ◇ Business Unit ◇ Project/Grant ◇ Activity ID ◇ Cost Share ◇ Combination Code ◇ Insert A Row Delete A Row
1 100.000000 96135.000000 Select	artString CL040 155001 A0001 51200 101 A0000001702 +

Step 6: On the Select Chartstring page, click in the **Combination Code** field and enter the **Cost Share Combination Code** that was requested using the Cost Share Request form.

Step 7: Click the Search button.

				٤	Select Chartstring					×
Combination Code	C0000007204 Q									
Operating Unit CL040	Department Q 155001	Fund Code Q A0001	Account Q 51200	Class Field	Business Unit	Project/Grant	Activity ID	Cost Share	٩	
Search										

Step 8: On the ePAF page, notice the Cost ShareCombination code is now added to the New Distribution line.

My Homepage							EPAF							ራ	\Diamond	: 0
Effective Date	e															
	Pay Period Effective Dat	te 2023-09-01	٩													
Current Distri	ibution															
This segment di	isplays current funding. Use select	buttons to copy any	current funding into new fu	inding. Copy any rows	of funding you w	ant to keep as is	s, and copy any r	rows you want to ke	ep and update.							
	Percent of Distribution \diamondsuit	Amount 🜣	Operating Unit 🗘	Department ◇	Fund C	ode 🗘	Account \diamond	Class Field 🗘	Business I	Jnit \diamond F	roject/Grant ≎	Activity	D \diamond Cost Share	\$	Selec	t≎
1	100.000000	96135.000000	CL040	155001	A0001		51200	101							Yes	
Deselect All	tion															
Build new fundin	ng in the table below. Include any ro	ows you want to keep	p from current funding. Us	e the + and - buttons o	on the far right sid	le of the table to	add or delete rov	ws as needed. Dele	ete any rows without a	a funding percent/a	mount. Funding pe	ercent must total to	9 100%.			1 ro
Percen	nt of Distribution \diamond	Amount \diamond	Select ChartString	Operating Unit \diamond	Department \diamond	Fund Code	○ Account ◇	Class Field 🛇	Business Unit \Diamond	Project/Grant 🛇	Activity ID \diamond	Cost Share ♦	Combination Code \diamond	Insert A Roy	v Dele	te A Row
1	100.000000	96135.000000	Select ChartString	CL040	155201	A0001	51200	101				10012120	C00000007204	+		-
Total Distribu	ition															

Step 9: Click the **Submit** button to move the request through the approval process. (**Note:** Applicable attachments supporting the employee's move to cost share on the project should be uploaded, including PI's instruction/approval.)

My Homepage							EPAF							厽	∆ : ⊘
Effective Date															
	Pay Period Effective	Date 2023-09-01	٩												
Current Distribut	tion														
This segment displa	ays current funding. Use sele	ect buttons to copy any	y current funding into new	funding. Copy any row	s of funding you v	vant to keep as is	, and copy any	rows you want to	keep and update.						
	Percent of Distribution ♢	Amount	◊ Operating Unit ◊	Department ◇	Fund (Code ◇	Account ◊	Class Field	♦ Business	s Unit 🛇	Project/Grant ◊	Activity	ID ◇ Cost Sł	hare 🛇	1 row Select ≎
1	100.000000	96135.00000	00 CL040	155001	A0001		51200	101						(Yes
Deselect All															
New Distribution	1														
Build new funding in	n the table below. Include an	y rows you want to ke	ep from current funding. L	Jse the + and - buttons	on the far right si	de of the table to	add or delete ro	ws as needed. De	elete any rows withou	t a funding percent/	amount. Funding p	ercent must total I	o 100%.		
<u> ۳</u>															1 row
Percent of	Distribution ≎	Amount ◇	Select ChartString	Operating Unit ◇	Department �	Fund Code <	○ Account	Class Field 0	Business Unit ≎	Project/Grant	○ Activity ID	Cost Share ≎	Combination Code	e ◇ Insert A Rov	v Delete A Row
1	100.000000	96135.000000	Select ChartString	CL040	155201	A0001	51200	101				10012120	C00000007204	+	-
	1														
	Percent 1	fotal 100.00													
File Attachments	3														
Status			Action	Description ◇						File Name	• ≎			Delete	1 row
1			Upload		~									Delete	
Add]										
Add															
▶ Comments															
Search Sa	ve Submit														

Step 10: The form is submitted and routed to the next approval step.

K My Homepage			EPAF			ſ	r 4 : 0
Start a Personnel Action Form Search for Person	+ Account Funding Change : Finalized						Form ID 636014
Just v Search In Clear	You have successfully submitted your eForm. The eForm has been routed to the next approval step. multiple approvers.						
Act on Personnel Action Form	View Approval Route Transaction / Signature Log						1 row
Z Evaluate an EPAF eForm	Current Date Time	Step Title	User ID	Description	Form Action	Time Elapsed	
Opdate an ePAF eForm	Refresh Log	maated	WD 179		Submit		
🧑 View an ePAF eForm							



Demonstration

 How to record Cost Share on a Payment Request



Roles and Responsibilities



Cost Share Roles and Responsibilities

Principal Investigator & Grant Support (Dept.)

- Review Cost Share Budget (Use USCeRA and Grant Dashboard)
- Request Cost Share account set up (Combo Codes, etc.)
- Process any needed account change forms to ensure cost share is recorded timely (i.e., salaries, P-Cards, etc.)
- Monitor & track cost share is recorded in ratio with spending.
- If Cost share requires a re-budget, be sure to follow the proper procedures and coordinate with your SAM administrator.
- If 3rd Parties are providing cost share, remind contributors of obligations and obtain needed documentation. Submit documentation to GFM so it can be properly recorded.

Grant and Funds Management

- Report Cost share on any required financial reports and invoices.
- Review 3rd Party Cost Share request submissions and record entries.
- Record waived IDC.

Please note:

GFM is not responsible for ensuring charges other than waived IDC post to your grant(s).

GFM <u>audits</u> for allowability as it relates to Cost Principles and Uniform Guidance.



Working Without Sponsored Funding

A no-cost extension allows work to continue on a project beyond the project's end date as long as the project does not need additional funding from the sponsor. You should use cost share to capture your time and effort in no cost extensions if there is no sponsored funding remaining.

No-cost extensions help to ensure all sponsored project activities can be completed. Nocost extensions should not be requested for the sole purpose of expending remaining unencumbered funds.

It is important to be familiar with the award's terms and conditions regarding no-cost extensions. Sponsors may require that a request for extension be submitted well in advance of the project end date.



Working Without Sponsored Funding

No Cost Extension Procedures

- 1. Requests for no-cost extensions should be initiated by the PI and/or the associated departmental business administrator.
- 2. All no-cost extension requests should be submitted as a Post-Award Action in USCeRA.
 - Your USCeRA request must include a proposed end date for the project and a justification for the extension.
 - Please upload your justification as a PDF document.
 - Your SAM administrator will prepare and submit the request for the no-cost extension to the sponsor. Upon receipt of approval by the sponsor, SAM will extend the project.

NSF No-Cost Extension Requests: The request has to be submitted by your SAM administrator. The PI can initiate the request in <u>Research.gov</u>, under Awards & Reporting > Notifications & Requests.

NIH No-Cost Extension Requests: The request must be submitted via eRA Commons by your SAM administrator. Refer to the current version of the <u>NIH Grants Policy Statement</u> for additional information.



Cost Share Budget vs. Actual



Cost Share: Budget vs. Actual

Use the Grant Dashboard in the Finance Intranet to view cost sharing, the portion of project costs not provided by the sponsor. Most sponsors expect cost share to be charged in **ratio** throughout the life of the project.

Category	Budget	Current Month Activity	Life to Date Expenses	Balance	Encumbrances	Available Balance	Cost Share Budget	Cost Share Actual	Balance
SALARIES	265,559.00	16,942.01	232,400.91	33,158.09		33,158.09	113,458.00	38,886.51	74,571.49
FRINGE BENEFITS	100,912.00	6,411.06	84,264.06	16,647.94		16,647.94		17,508.33	(17,508.33)
CONTRACTUAL SERVICES	53,846.00	8,951.50	42,488.98	11,357.02		11,357.02	585,118.00		585,118.00
TRAVEL	25,250.00		8,980.54	16,269.46		16,269.46	25,500.00		25,500.00
SUPPLIES	17,385.00	250.23	9,252.21	8,132.79		8,132.79			
FIXED CHARGES	336,000.00	5,250.00	220,615.14	115,384.86		115,384.86	247,602.00		247,602.00
DIRECT EXPENSE	798,952.00	37,804.80	598,001.84	200,950.16		200,950.16	971,678.00	56,394.84	915,283.16
INDIRECT COST RECOVERY	9,259.00	651.10	7,547.78	1,711.22		1,711.22	14,481.00	20,302.03	(5,821.03)
INDIRECT EXPENSE	9,259.00	651.10	7,547.78	1,711.22		1,711.22	14,481.00	20,302.03	(5,821.03)
TOTAL EXPENSE	808,211.00	38,455.90	605,549.62	202,661.38		202,661.38	986,159.00	76,696.87	909,462.13





Demonstration

- Viewing Cost Share Budget on the Grant Dashboard
- Viewing Cost Share Actuals on the Grant Dashboard



Salary Cap



What is Salary Cap?

A Salary Cap is an imposed limit for the total salary rate allowed to be charged for an individual by a sponsor. For example, NIH currently has a salary cap of \$221,900.

Any amount above the salary cap must recorded as cost share and will be considered mandatory uncommitted cost share to properly capture total expended effort and cannot be used as effort on another sponsored project.

This is to prevent double counting of effort and ensure faculty do not become overcommitted.

Please note: This is different from voluntary uncommitted cost share because this is a sponsor-imposed limitation and represents costs that are specifically unallowable by the sponsor.

Salary Cap Example

Dr. Greyhound's annual institutional base salary is \$300,000 and they have committed (and expended) 10% effort on an NIH grant that has a salary cap of \$221,900.

Due to the NIH limit, the max we can directly charge this NIH grant is \$22,190 (\$221,900 x 10%).

In order to properly record the effort committed (and expended) on the NIH grant, the remainder would have to be booked as cost share on the grant:

10% Effort at IBS:	\$30,000	(\$300K x 10%)
Allowed per Cap:	\$22,190	(\$221,900 x 10%)
Amount to Cost Share:	\$7,810	(\$30,000 - \$22,190)

Payroll form would directly charge 7.07% and cost share 2.93% to the grant to account for the full 10% effort expended.



Total Expended Effort Example

	Percent of Distribution 🗘	Amount \Diamond Operating Unit \Diamond	Department 🗘	Fund Code 🗘	Account 🗘	Class Field ≎	Business Unit 🗘	Project/Grant 🗘	Activity ID 🛇	Cost Share 🗘	Select 🛇
1	7.940000	15755.739000 CL071	135800	A0001	51300	101					No
2	32.060000	63618.261000 CL071	135800	F1000	51300	202	USCSP		1		No
3	60.000000	119061.000000 CL071	135800	A0001	51300	101					No No





Salary Cap Calculation Template

The Salary Cap Calculation template can be found on the Salary Allocation section of the <u>Business Manager, Grant Administration, and</u> <u>Principal Investigator Training Toolbox pages</u> on the Controller's Office website.



Salary Cap Calculation Template

To help with salary distribution allocations related to Salary Caps, we've developed the following Excel spreadsheet template to assist.

When using this template, you will need to know:

- Employee's total salary per pay period (remember bonuses or cash awards are excluded)
- Sponsor Salary Cap
- Total effort percentage committed

You can find this template here:

- Salary Cap Calculation Workbook Template
- There is a tab for 12, 11, and 9-month Appointments



Key Takeaways



Cost Share – Key Takeaways

It is very important to ensure there are departmental funds available to cover your cost share responsibility.

Review Cost Share Budget at the beginning of the award. You are responsible for recording your cost share. Record cost share in ratio with project spending – do <u>NOT</u> wait until the end of the project to record cost share!

Sponsors *can and will* withhold reimbursement if you are not meeting cost share requirements!



Resources and Contacts



Available Resources

Visit the Controller's Office website for the following resources:

- <u>Cost Share Information</u>
- For Cost Share and Salary Allocation training resources visit the <u>Business Manager, Grant</u> <u>Administration, and Principal Investigator</u> pages in the Resource and Training Toolbox.

Visit the SAM Office website for the following resource:

No Cost Extensions

Visit the Grant Administration page on the Controller's Office website for the following resource:

• Using the Account Funding Change eForm





GATEWAYS FOR: STUDENTS FACULTY & STAFF ALUMNI PARENTS & FAMILIES CALENDAR MAP DIRECTORY APPLY GIV

SEARCH SC.EDU

Q

Office of the Controller

Office of the Controller	Sponsored Award Management						
General Accounting	Award management occurs once the grant, contract or cooperative agreement has been						
Grants and Funds Management	awarded to the university. During award management, the principal investigator (PI), along with assistance from department grant support staff, is responsible for fulfilling the						
Sponsored Award Set Up	proposed project and overseeing financial and personnel activity, all while ensuring						
Sponsored Award Management	compliance with university and sponsor policies and procedures.						
Sponsored Award Invoicing and AR							
Sponsored Award Reporting	Sound management of sponsored projects is critical to maintain the public trust in research results and outcomes.						
Sponsored Post Award Close Out	Success of a sponsored project is contingent on both the ability of the PI and grant support staff to carry out the						
Grants and Funds Staff Directory	project by ensuring proper stewardship of the awarded funds.						
Compliance and Tax Management	Award Management Activities Major activities that may occur during award management include:						
Payroll Department	• expending funds including purchasing managing personnel and travel						
Operational Management	making modifications to the award budget, personnel, and timeframe						
and Reporting	 monitoring financial activity on the award, and when necessary, initiating cost transfers in a timely fashion 						
External Financial Reporting	 issuing project reports, including both financial and technical 						
and Transparency	• if an award has one or more subawards, it is important for the PI to carefully monitor the sub awardee's						
Resource and Training	activity						
Toolbox	Expand all						
Contact Us	Cost Share (+)						
	Expense Monitoring (+)						
	Expense Timing (+)						
	Cost Transfers (+)						
	Monthly Payroll Account Funding Review Checklist for Business Managers/PI						
	Advance/Risk Accounts						

Where to Find the Resources

For Cost Share resources, visit the <u>Sponsored Award</u> <u>Management</u> page found in the Grants and Funds Management section.





SEARCH SC.EDU

α

Office of the Controller

	Office of the Controller	Grant Administration					
-	General Accounting	Grant Administration of Sponsored Awards supports academic and adminis	trative business				
_	Grants and Funds Management	units to include personnel management, fiscal operations, and coordination with multiple governing areas to ensure compliance with Uniform Guidance and grant awards. Understands and executes the various stages of the grant lifecycle including pre-award review, grant progress monitoring, and award closure in coordination with the Principal					
_	Compliance and Tax Management						
-	Payroll Department	Investigators.					
	Operational Management and Reporting	Below is a list of Grant Administration tasks you may be responsible for within your college/de	partment. Sections				
_	External Financial Reporting and Transparency	include links to training resources that support each task. Note: Each year the Controller's Office provides refresher trainings starting the month of Febru	ary thru the end of				
	Resource and Training Toolbox	April. Registration links for all scheduled trainings are sent to our BIZMANAGER listserv end of January, provided in our monthly newsletter, and in a prior week reminder email. On demand training can be found in the sections					
	Business Manager	below.					
≱	Grant Administration		Expand all				
	Principal Investigator	Account Funding Change	(+)				
	Policies & Procedures	Close Out Matrix	+				
	Forms	Cost Share	+				
	Newsletters	Cost Transfers	(+)				
	PeopleSoft Finance Training Schedule	Indirect Cost (IDC)	•				
	Listservs	Introduction to Grants Management	+				
	Social Media	Milestone Notifications	(+)				
-	Contact Us	Monitoring Awards					
		No Cost Extensions	•				

Where to Find the Resources

For Cost Share training resources, visit our Grants Administration page in the Resource and Training Toolbox section.



Controller's Office Contact List

General Accounting (JEs, JVs, Apex, GL issues/Questions	Email Address
General Email Address	genacctg@mailbox.sc.edu
Cash Advance Settlement	cashadvc@mailbox.sc.edu
Payroll Retro Journal Entries	retroje@mailbox.sc.edu
Chartfield Maintenance	cfmaint@mailbox.sc.edu
Moving & Relocation Mailbox	moving@mailbox.sc.edu
PeopleSoft Finance Security Requests	pssecure@mailbox.sc.edu
Accounts Payable	Email Address
Accounts Payable General Email Address	Email Address ap@mailbox.sc.edu
Accounts Payable General Email Address AP Uploads	Email Address ap@mailbox.sc.edu apupload@mailbox.sc.edu
Accounts Payable General Email Address AP Uploads Supplier Maintenance	Email Address ap@mailbox.sc.edu apupload@mailbox.sc.edu apsupplr@mailbox.sc.edu
Accounts Payable General Email Address AP Uploads Supplier Maintenance Travel Office	Email Address ap@mailbox.sc.edu apupload@mailbox.sc.edu apsupplr@mailbox.sc.edu Email Address
Accounts Payable General Email Address AP Uploads Supplier Maintenance Travel Office General Email Address	Email Address ap@mailbox.sc.edu apupload@mailbox.sc.edu apsupplr@mailbox.sc.edu Email Address teoffice@mailbox.sc.edu

Controller's Office Contact List

Capital Assets	Email Address
Physical Inventory	physinv@mailbox.sc.edu
Cash Management and Treasury	Email Address
General Treasury Email Address	treasury@mailbox.sc.edu
Program Expense Card	cards@mailbox.sc.edu
Team Card	teamcard@mailbox.sc.edu
Travel Card	trvcard@mailbox.sc.edu
Compliance and Tax	Email Address
General Compliance Email Address	concpl@mailbox.sc.edu
General Tax Email Address	tax@mailbox.sc.edu
Research/Development Sales/Use Tax Exemptions	rdequip@mailbox.sc.edu
Time and Effort Reporting	timeandeffort@sc.edu

Controller's Office Contact List

Grants and Funds Management	Email Address			
Sponsored Award Specific Questions	Contact your Post Award Accountant (PAA)			
Payroll	Email Address			
General Email Account	payroll@mailbox.sc.edu			



Questions



THANK YOU!

Office of the Controller



Address:

1600 Hampton Street Columbia, SC 29208



Contact Number: Phone: 803-777-2602 Fax: 803-777-9586



Email Address: controller@sc.edu





Alone, we can do so little; together, we can do so much.

