

UNIVERSITY OF SOUTH CAROLINA
SUBRECIPIENT COMMITMENT FORM

All subrecipients are required to submit this form prior to receiving a subaward from the University of South Carolina USC). It provides information needed to conduct a risk assessment and issue the subaward.

SUBRECIPIENT'S LEGAL NAME:

SUBRECIPIENT'S PI:

USC'S PI:

PRIME SPONSOR:

PROPOSAL TITLE:

PERFORMANCE PERIOD BEGIN DATE:

END DATE:

SECTION A – SUBRECIPIENT BUSINESS INFORMATION

INSTITUTIONAL STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

COUNTRY:

WEBSITE:

SUBRECIPIENTS CONGRESSIONAL DISTRICT:

SUBRECIPIENTS DUNS NUMBER + 4:

SUBRECIPIENT EIN NUMBER:

PRIMARY LOCATION OF PERFORMANCE: same as address above- If different, than above, please list below:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

COUNTRY:

If more than one place of performance, please provide the USC Administrative Contact with a list of the additional performance sites.

SECTION B – SPECIAL REVIEW

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, a copy of your F&A rate agreement or a URL link to the agreement must be furnished before a subaward will be issued, unless the subrecipient is a verified FDP Expanded Clearing House member.)

Other rates *(Please specify the basis on which the rate has been calculated)*:

Not applicable *(no indirect cost request for subrecipient)*

2. **Cost Sharing** (if applicable) *Cost sharing amounts and justification must be included in the subrecipient's budget.*

Yes No Amount:

3. **Human Subjects** Yes No

If "yes" indicate the status of IRB Review: Pending Exempt

Approved
Federal wide Assurance (FWA) Number:

4. **Animal Subjects** Yes No

If "yes" indicate the status of IACUC Review: Pending Approved *If "approved" date of IACUC approval:*
PHS Animal Welfare Assurance Number: Yes No *If "yes" provide AAALAC number:*

5. **The Subrecipient is a current member of the FDP Expanded Clearing House** Yes No

If marked yes, please skip sections C and D, and then complete sections E and F.

SECTION C – CERTIFICATIONS

1. Conflict of Interest

Select one of the two following statements if **National Science Foundation (NSF)** is the prime sponsor.

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 does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by USC's policy, available at http://orc.research.sc.edu/coi_policy.shtml.

Select one of the two following statements if a **Public Health Service Agency (PHS)** is the prime sponsor. PHS agencies include the **NIH, CDC, SAMHSA, AHRQ, and ATSDR**.

Subrecipient organization **does have** a PHS-compliant Financial Conflict of Interest (FCOI) policy and my organization will rely on this policy and associated procedures to comply with PHS Conflict of Interest regulation.

Yes No My organization is registered as an organization with a PHS-compliant PCOI policy with the FDP Clearinghouse (http://sites.nationalacademies.org/PGA/fdp/PGA_070596).

Subrecipient does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by USC's policy, available at http://orc.research.sc.edu/coi_policy.shtml.

2. Responsible Conduct of Research (RCR) Only complete if **National Science Foundation** is the prime sponsor

Yes No My organization certifies that it has an Institutional Plan to meet NSF's Educational Requirements for the Responsible Conduct of Research, as required under the "America COMPETES Act" PUBLIC LAW 110-69-August 9, 2007.

Yes No My organization 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 requirements.

3. Debarment and Suspension

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

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

Section D- AUDIT INFORMATION

1. Does the subrecipient organization have a current registration in System for Awards Management (SAM)?

Yes No Expiration Date of Registration:

2. Is subrecipient exempt from reporting compensation according to 17 CFR 229.402(c)(2)?

Yes No

3. Does the subrecipient receive an annual audit in accordance with Uniform Guidance?

Yes No

If a subrecipient does not receive an A-133 audit, USC will require the entity to complete the Mini-Audit Questionnaire on page 4, and may require a limited scope audit, before a subaward will be issued.

a. If answer to question 3 is "no", does the subrecipient receive overall federal funding of at least \$750,000 per year?
Yes No

b. If answer to question 3 is "yes": Has the audit been completed for the most recent fiscal year? Yes No

i. If answer to section 3b is "no" when is it expected to be completed _____

ii. If answer to section 3 or 3b is "yes" were any audit material weaknesses reported? Yes No

MINI AUDIT QUESTIONNAIRE: (Complete only if you answered 'Yes, Are or Have' to question 3, in section C)

Fiscal Responsibility

The subrecipient certifies that its financial system is in compliance 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 recent report that describes the finding and steps to be taken to correct the finding.

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

Date

Name and Title of Authorized Official