**SUBAWARDEE COMMITMENT FORM**

**All subawardees should complete this form when submitting a proposal to the Rockefeller University. It provides a checklist of documents and certifications required by sponsors, as well as an area for the authorized institutional representative to sign.**

SUBAWARDEE’S LEGAL NAME:

SUBAWARDEE’S PI:

**SECTION A - 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, a copy of your F&A rate agreement must be furnished to RU via hard copy, website, or email before a subaward will be issued.)*

10% de minimis Facilities and Administration Rate

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

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

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

Rates consistent with or lower than our federally-negotiated rates *(if this box is checked, a copy of your Fringe Benefit rate agreement must be furnished to RU before a subaward will be issued).*

Other rates *(please specify the basis on which the rate has been calculated in Section D Comments below).*

**3. Certification Regarding Debarment and Suspension**

Is the entity, PI or any other employee or student participating in this project debarred, suspended or otherwise excluded from or ineligible for participation in federal department, agency, assistance programs or activities?

**Yes** **No** *(If “yes”, explain in Section D Comments below.)*

***Subawards to any entity or individual included in the Federal excluded Parties are prohibited***.

**4. Affidavit of access to financial books and records**

This is to allow Rockefeller University and its auditors to have access to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Name of Institution*) records and financial statements if necessary for Rockefeller University to meet Rockefeller University’s Federal audit requirements.

**5. New Key Employees and New Systems**

Are there any new key employees or substantially changed systems?

**Yes** **No** *(If “yes”, list below.)*

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**6. Federal Monitoring**

Has there been recently or is there currently any monitoring by a Federal agency?

**Yes** **No** *(If “yes”, identify the extent and results below.)*

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**SECTION B - Audit Status**

**1. Audit Status**

Subawardee DOES receive an annual audit in accordance with [Uniform Guidance](http://www.ecfr.gov/cgi-bin/text-idx?SID=30cb1d16652ce6ad5ce604c17db12e38&node=sp2.1.200.f&rgn=div6). Most recent fiscal year completed: FY

**Yes**  **No** Were there any audit findings reported? (If “Yes,” explain in Section D, *Comments,* below)

***Note: A complete copy of subawardee’s most recent audit report or the Internet URL link to a complete copy, must be furnished to the Rockefeller University before a subaward will be issued.***

Subrecipient DOES NOT receive an annual audit in accordance with [Uniform Guidance](http://www.ecfr.gov/cgi-bin/text-idx?SID=30cb1d16652ce6ad5ce604c17db12e38&node=sp2.1.200.f&rgn=div6).

Subrecipient is a: Non-profit entity (under federal funding threshold)

Foreign entity

For-profit entity

Government entity

***Note: If a subrecipient does not receive an audit in accordance with*** [***Uniform Guidance***](http://www.ecfr.gov/cgi-bin/text-idx?SID=30cb1d16652ce6ad5ce604c17db12e38&node=sp2.1.200.f&rgn=div6)***, RU will require the entity to submit additional documentation before a subaward will be issued.***

**APPROVED FOR SUBAWARDEE**:

The information, certifications and representations above have been read, signed and made by an authorized official of the subawardee 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 subawardee's own risk.

(Signature of Subawardee's Authorized Official) (Address)

(Type or print name and title of Authorized Official) (City, State, Zip)

(Name and EIN of Subawardee Organization/Institution) (Phone) (FAX)

(Date) (Email)