

SUBRECIPIENT CERTIFICATION FORM

Our records indicate that your organization is currently being considered for receipt of a subaward under research funds awarded to the University of Southern California. Please ensure that all Documents in Section A are completed, accurate and attached, check all applicable Certifications in Sections B through D and attach requested information. Additionally, if applicable, the Uniform Guidance (2 CFR 200) requires the University of Southern California to ensure that your organization is in compliance with the requirements of 2 CFR 200. As such, please check all applicable Audit Questions in Section C and attach requested information.

SUBRECIPIENTS'S LEGAL NAME: _____

SUBRECIPIENT'S PI: _____

USC's PI: _____ PRIME SPONSOR: _____

USC PROPOSAL TITLE: _____

SUBRECIPIENT'S TOTAL FUNDS AWARDED: _____

SUBRECIPIENT'S PERFORMANCE PERIOD: BEGIN: _____ END: _____

SECTION A – Proposal Documents

The following documents will be included in the subaward and are covered by the certifications below:

STATEMENT OF WORK (required)**BUDGET** (required)**BUDGET JUSTIFICATION** (required)**SECTION B - Certifications**

1. **Facilities and Administrative Rates** included in this subaward 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, please attach a copy of your F&A rate agreement must be furnished to USC via hard copy, website, or email before a subaward will be issued.)

☐ De minimis rate (10% on MTDC)

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

☐ Not applicable (no indirect cost request for subrecipient)

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

☐ Rates consistent with or lower than our federally-negotiated rates
(If this box is checked, a copy of your FB rate agreement must be furnished to USC before a subaward will be issued.)

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

3. **Human Subjects** ☐ Yes ☐ No **Approval Date:** _____

If "Yes": Copies of the IRB approval must be provided before any subaward will be issued.

If "Yes" and NIH funding is involved:

Have all key personnel involved completed Human Subjects Training? ☐ Yes ☐ No

Note: All key personnel engaged in human subject research must take the NIH human subjects training or human subject research training (<https://grants.nih.gov/policy/humansubjects/training-and-resources.htm#Education%20Requirement>)

4. **Animal Subjects** ☐ Yes ☐ No **Approval Date:** _____

If "Yes": A copy of the IACUC approval must be provided before any subaward will be issued.

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5. **Stem Cells** ☐ Yes ☐ No

If "Yes": A copy of the Stem Cell approval must be provided before any subaward will be issued.

6. **Conflict of Interest (applicable to NIH, NSF, or other program requiring federal financial disclosure)**

☐ Not applicable. This project is not being funded by NIH, NSF, or any other program requiring federal financial disclosure.

If funded by NSF:

- ☐ Subrecipient Organization/Institution 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 expenditures of any funds under any resultant agreement.
- ☐ Subrecipient does not have an active and/or enforced conflict of interest policy and agrees to abide by USC's policy and related procedures. See: <https://oprs.usc.edu/policies/conflicts-of-interest/> for the text of USC's policy.

If funded by PHS/NIH:

- ☐ My 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 the PHS Conflict of Interest regulation.
- ☐ Yes, we are registered as an organization with a PHS-compliant FCOI policy with the FDP Clearinghouse. (<http://thefdp.org/default/fcoi-clearinghouse/compliant-entities/>)
- ☐ My organization **DOES NOT HAVE** a PHS-compliant policy in place but will have one at the time of award. (A sample FDP FCOI policy can be found at <http://thefdp.org/default/committees/research-compliance/conflict-of-interest/>)

List the names of individuals working on this project who are responsible for the design, conduct, or reporting of this research in Section E *Comments* below.

- ☐ Subrecipient does not have an active and/or enforced conflict of interest policy and agrees to abide by USC's policy, located online at <https://oprs.usc.edu/policies/conflicts-of-interest/>

7. **If funded by DOD: Covered Defense Information (CDI)(DFARS 252.204-7012):**

If applicable as required under 252.204-7012, Subrecipient hereby certifies that it has implemented information security measures that comply with NIST SP 800-171.

☐ N/A ☐ Yes ☐ No

8. **Cost Sharing/Matching/In-Kind** ☐ Yes ☐ No **Amount:** _____

Cost sharing, Matching, and/or In-Kind amounts and justification should be included in the subrecipient's budget

9. **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 E *Comments* below)

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

10. **Ethics in Research Training (applicable to projects funded by NSF)**

☐ Not applicable because this project is *not* being funded by NSF.

☐ Subrecipient Organization/Institution hereby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by this NSF proposal will be trained on the oversight in the responsible and ethical conduct of research.

11. **Is subrecipient a for-profit entity?** ☐ Yes ☐ No

If "Yes", USC PI must complete the attached Fair and Reasonable Cost Analysis Form.

SUBRECIPIENT CERTIFICATION FORM**SECTION C - Audit Status****1. Audit Status**

☐ We have completed our Single Audit as required under 2 CFR 200 for the most recent fiscal year. There were no material weaknesses, material instances of noncompliance, reportable conditions; or findings related to any subaward(s) from USC. **A complete copy of the audit report is enclosed or a URL link is provided in Section E.**

☐ We have not yet completed our Single Audit as required under 2 CFR 200 for the most recent fiscal year. We will advise you of the results **and provide a complete copy of the audit report** when it is completed on (date): _____

Note: In the interim a complete copy of subrecipient's most recent audit report or the Internet URL link to a complete copy, must be furnished to University of Southern California before a subaward will be issued.

☐ We have completed our Single Audit as required by 2 CFR 200 for the most recent fiscal year. There were material weaknesses, material instances of noncompliance, reportable conditions, or findings related to subaward(s) from USC University. **A complete copy of the audit report is enclosed, including our corrective action plan.** The specific audit finding(s) noted in the audit report relating to subaward(s) from USC are discussed in Section E.

☐ We are not subject to Single Audit under 2 CFR 200 because (check all that apply):

- ☐ Non-profit entity (under federal funding threshold)
☐ Government entity
☐ For profit entity
☐ Foreign entity (not formed under U.S. laws), or another exception applies (explain in Section E):

Note: For organizations that are not subject to Single Audit under 2 CFR 200, University of Southern California will require entity to complete the attached Audit Certification and Financial Status Questionnaire.

SECTION D – Federal Funding Accountability and Transparency Act

1. Location of Subrecipient (Name, Address, City, State, Zip + 4, Congressional District, and Country):

Note: If primary place of performance is different than Location of Subrecipient, provide location of where the project will be performed (Name, Address, City, State, Zip +4, Congressional District, and Country)

2. Unique Entity Identifier (UEI) of Subrecipient receiving award:

3. Is Subrecipient owned or controlled by a parent entity? ☐ Yes ☐ No

NOTE: If yes, please provide the Name, Unique Entity Identifier (UEI), and Location (Address, City, State, Zip + 4, Congressional District, and Country) of parent entity:

4. Does Subrecipient currently have an active registration in the System for Award Management (www.sam.gov)?
 Yes ☐ No ☐

5. Does the Subrecipient show "delinquent federal debt" in SAM?
 Yes ☐ No ☐

6. Exempt from reporting compensation ☐ Yes ☐ No If "No", proceed with filling out the top 5 paid officers below. Executive compensation information for the Subrecipient must be reported if: More than 80% of annual gross revenues are from the Federal Government, and those revenues are greater than \$25M annually; compensation information is not already available through reporting to the Security and Exchange Commission (SEC). (For more information about this requirement, please see <https://www.govinfo.gov/app/details/CFR-2012-title2-vol1/CFR-2012-title2-vol1-part170>)

Officer 1	Name	_____	Compensation	_____
Officer 2	Name	_____	Compensation	_____
Officer 3	Name	_____	Compensation	_____
Officer 4	Name	_____	Compensation	_____
Officer 5	Name	_____	Compensation	_____

SUBRECIPIENT CERTIFICATION FORM**SECTION E - Comments****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 and start date of the subaward agreement are at the Subrecipient's own risk.**

Signature of Subrecipient's Authorized Official_____
Legal Name of Subrecipient's Organization/Institution_____
Name and Title of Authorized Official (Print)_____
Address_____
Email_____
City, State, Zip_____
Phone_____
Fax_____
Federal Employer Identification Number (EIN)_____
Date_____
Unique Entity Identifier (UEI)