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 listed below are completed, accurate and attached. Please check all applicable Certifications in Sections A through I and attach requested information. Please ensure that the form is signed by an Authorized Representative at your institution with the authority to legally bind your institution.

*This form may be used in lieu of a consortium letter of intent for non-FDP Clearinghouse members.

Attached Documents: The below documents will be included in the subaward agreement and are covered by the certifications included in this Subrecipient Certification Form:

STATEMENT OF WORK (required)

BUDGET (required)

BUDGET JUSTIFICATION (required)

SECTION A – General Project Information
USC's PI: Prime Sponsor:
Subrecipient Legal Name:
Subrecipient Address:
Subrecipient Organization Type: □ University □ Other Non-profit □ Industry/For-profit □ Other
Subrecipient Principal Investigator(s) name:
Project Title:
Funding announcement URL:
Subrecipient's Period of Performance: Start: End:
SECTION B – Expenses
Total Direct Costs:
Total F&A Costs F&A Rate Applied: % (please ensure this is compliant with prime sponsor)
Total Estimated Costs:
Cost Sharing/Matching/In-Kind Amount* (if applicable):
*Cost sharing, Matching, and/or In-Kind amounts and justification should be included in the subrecipient's budget
SECTION C- Human Subjects, Animal Subjects, Stem Cells
Will Human Subjects be involved in subrecipient's scope of work? ☐ Yes ☐ No
If "Yes": Federal Wide Assurance (FWA) Number:
Approval Date:
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/research/training-and-resources.htm)
Will Animal Subjects be involved in the subrecipient's scope of work? ☐ Yes ☐ No
If "Yes": PHS Approved Animal Assurance Number:Approval Date:
A copy of IACUC approval must be provided before any subaward will be issued.
Does the work include Embryonic Stem Cells? ☐ Yes ☐ No

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

SECTION D - FDP Clearinghouse Institutions
My institution is currently participating in the <u>FDP Expanded Clearinghouse</u> and as an active and up-to-date profile:
☐Yes (please skip sections E -I and sign and return this form)
☐ No (please complete all sections of this form)
SECTION E - Subrecipient Institution Please fill out the below as applicable. Please note a UEI number and active registration in SAMS.Gov are required for all Subrecipients that include federal funding. If your institution does not currently in compliance with this requirement please work to complete the registration prior to signature on the form.
Subrecipient's Unique Entity Identifier (UEI):
Subrecipient currently have an active registration in the System for Award Management (<u>www.sam.gov</u>)?
☐ Yes (Expiration Date:) ☐ Not at this time (Required prior to issue of Subaward)
☐ Does Subrecipient show "delinquent federal debt in SAM? ☐ Yes ☐ No
Certification Regarding Debarment and Suspension
Is the Subrecipient, Subrecipient 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 (explain in Section I <i>Comments</i> below) ☐ No
Subawards to any entity or individual included in the Federal Excluded Parties are prohibited.
Is the Subrecipient a Domestic Institution?
Subrecipient's Congressional District:
Federal Employer Identification Number (EIN):
Subrecipient CAGE code:
Is the Subrecipient an International Institution? ☐ Yes (complete the below) ☐ No (proceed to next question)
Prime Sponsor is NIH Yes (continue) No (proceed to next question)
☐ By checking this box, Subrecipient acknowledges that per NIH policy on Foreign Subawards (NOT-OD-23-182) the anticipated Subaward agreement will include the provision requiring the foreign subrecipient to provide access to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report, to the primary recipient with a frequency of no less than once per year, in alignment with the timing requirements for Research Performance Progress Report submission. Such access may be entirely electronic.
Is Subrecipient owned or controlled by a parent entity? \square Yes (complete the below) \square No
Name of Parent Entity:
UEI Number: Congressional District:
Address of Parent Entity:
SECTION F - F&A and Fringe Rates
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. A copy of the institution's F&A rate agreement must be furnished to USC via hard copy, website, or email before a

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subaward will be issued.

Subrecipient organization certifies that it **DOES NOT HAVE** an active and/or enforced conflict of interest policy and agrees to abide by USC's policy, located online https://policy.usc.edu/conflict-of-interest-and-commitment/.

 $\underline{\text{DOD}}\text{: This Subaward will include funding from a DOD Contract that may include Covered Defense Information (CDI)}$

(DFARS 252.204-7012): Yes (complete the below) No

expenditures of any funds under any resultant agreement.

☐ Subrecipient hereby certifies that it has implemented information security measures that comply with NIST SP 800-171. (if not then please include explanation in comments section)

SECTION H - 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 I.

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	•	SUBRECIPIENT CER	TIFICATION FORM
			d under 2 CFR 200 for the most recent fiscal year. We will advise
		Note: In the interim a complete copy of subrecipien to a complete copy, must be furnished to University issued.	nt's most recent audit report or the Internet URL link y of Southern California before a subaward will be
		weaknesses, material instances of noncompliance, repo	CFR 200 for the most recent fiscal year. There were material ortable conditions, or findings related to subaward(s) from USC nclosed, including our corrective action plan. The specific award(s) from USC are discussed in Section I.
		We are not subject to Single Audit under 2 CFR 200 be	ecause (check all that apply):
		☐ Non-profit entity (under federal funding thresho	ld)
		☐ Government entity	
		☐ For profit entity	
		☐ Foreign entity (not formed under U.S. laws), or	another exception applies (explain in Section I):
		Note: For organizations that are not subject to Sing	le Audit under 2 CFR 200, University of Southern California
	_	will require entity to complete the attached Audit Co	ertification and Financial Status Questionnaire.
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APPI I certi of fals conse 3801- subav	ROV fy to se, fice quer 3812 wards	VED FOR SUBRECIPIENT the best of my knowledge and belief that the information provide cititious, or fraudulent information, or the omission of any materiances including, but not limited to violations of U.S. Code Title 182. The appropriate programmatic and administrative personnel	led herein is true, complete, and accurate. I am aware that the provision al fact, may subject me to criminal, civil, or administrative 3, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and involved in this application are aware of agency policy in regard to agreements consistent with those policies. Any work begun and/or
APPI I certi of fals conse 3801- subav exper	ROV fy to se, fice quer 3812 wards	VED FOR SUBRECIPIENT the best of my knowledge and belief that the information provide titious, or fraudulent information, or the omission of any materiances including, but not limited to violations of U.S. Code Title 18.2. The appropriate programmatic and administrative personnel is and are prepared to establish the necessary inter-institutional	led herein is true, complete, and accurate. I am aware that the provision al fact, may subject me to criminal, civil, or administrative 3, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and involved in this application are aware of agency policy in regard to agreements consistent with those policies. Any work begun and/or

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Email