**PRE-AWARD - SUBRECIPIENT QUESTIONNAIRE**

Your organization has been identified as a potential subrecipient at the Pre-Award stage in a Stetson University grant. Participating in a grant submission creates a legal duty for Stetson University and the subrecipient to use the funds according to the award agreement and applicable United States federal regulations. The purpose of this subrecipient questionnaire is to provide Stetson with the information needed to assess the adequacy of the financial and accounting systems of your organization at the Pre-Award stage.

**Please answer all questions below as completely as possible and include copies of requested documentation**. Use extra pages, if necessary. The completed form must be signed by your appropriate authorized official (AOR) and returned to the email address noted above.

**FDP member or participant**: If your institution is a member of the Federal Demonstration Partnership (FDP), you may:

1. fill out the first two lines of Section A below.
2. Answer this question in Section A: Do any of your organization’s employees or their immediate family work at Stetson (bottom of page 1)?
3. Then skip to Section D to complete the certification.
4. Attach a PDF of your organization’s information in the FDP when you submit this document to the Stetson Office of Grants, Sponsored Research and Strategic Initiatives.

**Section A - General Subrecipient Information**

|  |  |
| --- | --- |
| Legal Name |  |
| Address |  |
| UEI number |  |
| EIN or Tax ID number |  |
| SAM.gov Registration | [ ]  Yes – Active [ ]  No – Not Active or Not registered  |
| Entity Type | [ ]  Domestic For-Profit [ ]  Domestic nonprofit [ ]  Domestic Governmental Organization [ ]  Foreign For-Profit [ ]  Foreign Nonprofit [ ]  Foreign Governmental Organization  |
| Legal Entity Registration | If your entity type requires governmental registration, is your registration current?Y [ ]  N [ ]  N/A [ ]  If Y, what govt/state:  |
| Organizational Web Site |  |
| Yes | No |  |
| [ ]  | [ ]  | Does your organization receive grant or contract funding directly from the US Government? |
| [ ]  | [ ]  | Does your organization have a Financial Conflict of Interest (FCOI) policy? |
| [ ]  | [ ]  | If yes, is the FCOI policy compliant with US Federal PHS Financial Conflict of Interest regulations, consistent with the provision of 42CFRPart 50, Subpart F, Responsibility of Applicants for Promoting Objectivity in Research? |
| [ ]  | [ ]  | Do any of your organization’s employees or their immediate family work at Stetson? |
| [ ]  | [ ]  | Does your organization have an approved Federally Negotiated Indirect Cost Rate Agreement? **If yes, please provide a copy of your current approved rate agreement**.  |
| [ ]  | [ ]  | Does your organization have an approved Fringe Benefits rate?**If yes, please provide a copy of approval letter or any supporting documentation**. If no, please provide basis/calculations for rate being used for this subaward. |

*\*Subrecipients of Federal funds must have a UEI number prior to the issuance of a subaward.*

**Audit Status under 2 CFR 200, Subpart F**

Are you a US non-profit organization that files an annual Single Audit with the Federal Audit Clearinghouse (FAC) in accordance with the Uniform Guidance (2 CFR 200, Subpart F)? Yes [ ]  No [ ]

-**If Yes**, and you are a **non-profit organization**, please state whether material weaknesses, material instances of non-compliance, or findings were noted in your audit. Yes [ ]  No [ ]  Next, please sign and date the certification contained in **Section D** of this form and submit to grants@stetson.edu along with the link or copies of your organization’s most recent Single Audit report and all relevant attachments, including corrective action responses or plans, if applicable. You need not complete the remainder of this form.

-**If No** *or* you are a **US based for-profit** or **foreign organization**, please continue answering the remaining sections of this form. Submit the completed form to grants@stetson.edu along with the links or copies to all relevant attachments.

**Section B – Financial Information**

1. Year of incorporation or establishment:
2. Number of Employees:
3. Fiscal year start and end date (Month /Day):
4. Does your organization have annual audited financial statements? Yes [ ]  No [ ]

**-If Yes, provide a copy of the report for the most recent fiscal year.**

-If No, please provide an internal balance sheet and annual revenue/expense statement.

1. Please provide the amount (in USD) of US governmental funds your organization expended in its most recent fiscal year:
2. Did your organization have an audit of any US government funded projects in your most recent fiscal year? Yes [ ]  No [ ]  **If yes, please provide a detailed report of any findings**.
3. Are there any reasons (local conditions, laws, or institutional circumstances) that would prevent an independent accountant from performing an audit of your organization? Yes [ ]  No [ ]
4. Can your accounting records separate the receipts and payments of a Stetson award from the receipts and payments of your organization’s other activities? Yes [ ]  No [ ]
5. Can your accounting system record expenditures on a Stetson award according to budget categories such as salaries, supplies, travel, and equipment? Yes [ ]  No [ ]
6. Do you keep invoices, vouchers and timesheets for all payments made from US government funds for a minimum of 3 years after the date of the receipt of the final invoice payment? Yes [ ]  No [ ]
7. Will any cash from Stetson awards be kept outside of your organization’s bank account (petty cash, etc.)? Yes [ ]  No [ ]
8. Are you able to support your accounting records with source documentation? Yes [ ]  No [ ]
9. Are you capable of invoicing in US Dollars? Yes [ ]  No [ ]
10. Are you capable of producing invoices and supporting documentation in English? Yes [ ]  No [ ]

**Section C – Internal Control Information**

* + - 1. Does your organization have written accounting policies and procedures? Yes [ ]  No [ ]

If No, please describe how transactions are recorded, cash disbursements are made, and the account system is managed.

* + - 1. Are timesheets or other systems used to document employees’ effort spent on US government funded projects? Yes [ ]  No [ ]  If no, please explain.
			2. Does your organization have an inventory system for tracking equipment? Yes [ ]  No [ ]
			3. Does your organization have a purchasing/procurement policy creating standards in the procurement of supplies and other expendable property, equipment and other services? Yes [ ]  No [ ]
			4. Does your organization have a written travel policy? Yes [ ]  No [ ]
			5. If you expend funds in a currency other than US Dollars, do you have written policies for currency conversion? Yes [ ]  No [ ]  N/A [ ]

**-If Yes, please provide a copy of or link to your policy**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section D – Certification Signature**

By signing this form:

I certify under penalty of perjury that the foregoing is true and correct.

I certify that neither the Subrecipient nor any of its employees or agents performing any service on Stetson awarded projects are presently debarred, suspended, proposed for debarment, or declared ineligible from receiving funds from the United States government.

I certify that I am authorized to sign on behalf of the Subrecipient.

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| --- | --- |
|  |  |
| Name: | Signature By:      |
| Title: |       |
| Date: |       |
| Email:  |       |