



SUBRECIPIENT INFORMATION AND CHECKLIST

When submitting a subaward proposal to LUC, the Subrecipient should complete this form and return it to the LUC Administrative Contact, along with the following:

Subrecipient Legal Name:		
Address:		
Sub's DUNS/UEI:	Sub's EIN:	Email:

STATEMENT OF WORK (required)
BUDGET JUSTIFICATION (required)
FRINGE BENEFIT RATE AGREEMENT (if applicable)

BUDGET (required)
F&A RATE AGREEMENT (if applicable)

Loyola University of Chicago Contacts	Subrecipient Contacts
Administrative Contact	Administrative Contact
Name/Title:	Name/Title:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Principal Investigator or Project Director	Principal Investigator or Project Director
Name/Title:	Name/Title:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Financial Contact	Financial Contact
Name/Title: Brian R Slavinskas, Senior Director	Name/Title:
Address: Sponsored Program Accounting 820 N Michigan Ave., LT 13 th fl. Chicago, IL 60611	Address:
Telephone: 312-915-8730	Telephone:
Email: GRNTCON@luc.edu	Email:
Authorized Official	Authorized Official
Name: Meharvan Singh, PhD	Name:
Title: Vice Provost for Research	Title:
Address: Loyola University of Chicago 1032 W Sheridan Rd., Chicago, IL 60660	Address:
Telephone: 773-508-2471	Telephone:
Email: msingh@luc.edu	Email:

DUNS verified in SAM (<https://sam.gov/SAM/>)

P: 773-508-2471 F: 773-508-8942

ORS initials: _____

www.luc.edu/ors



Qualifying Questionnaire

Your institution has been identified as a possible recipient of a subaward from Loyola University of Chicago (LUC). As a direct recipient of US funds, 2 CFR §200.331, requires LUC to perform an initial and/or annual risk-based assessment of its subrecipient’s ability to meet its subaward obligations. Completion of this Questionnaire will provide LUC with the information needed to assess the adequacy of the financial and accounting systems of your organization. Each question should be answered as completely as possible, using extra pages if necessary.

GENERAL INFORMATION

1. How is your organization classified?

- | | | |
|-------------------------|----------------------------|-------------|
| Non-Profit Organization | State and Local Government | Corporation |
| University | Federal Government | Individual |
| Foundation | Foreign Government | Other |

2. Is your organization mature?

- | | | | |
|-----------|-----------|-----------|------------------|
| 10+ years | 5-9 years | 1-4 years | Less than 1 year |
|-----------|-----------|-----------|------------------|

INTERNAL CONTROLS

3. Is your institution presently debarred or suspended from receiving Federal funds?

Yes	No
-----	----

4. Has your institution been able to meet its cash needs/commitments?
If no, please explain below.

Yes	No
-----	----

5. Does your organization have adequate experience receiving same or similar federal awards?

Yes	No
-----	----

6. Are duties separated so that no individual has complete authority over an entire financial transaction?

Yes	No
-----	----

7. Does your organization’s procedures ensure that costs deemed unallowable, per US Federal guidelines, are excluded from the amount billed to the University under this subaward?

Yes	No
-----	----

8. Does your organization have controls to prevent the spending of funds in excess of approved, budgeted amounts?

Yes	No
-----	----

9. Are all sponsored project disbursements properly documents with evidence of receipt of goods or performance of services that can be provided as backup with invoice submissions if requested?

Yes	No
-----	----



Qualifying Questionnaire

AUDIT STATUS		
<p>10. Is your organization a:</p> <p style="padding-left: 40px;">Non-profit entity expending less than \$750,000 per year in US Federal or sub-Federal funds annually</p> <p style="padding-left: 40px;">For-profit entity that expends Federal or sub-Federal funds and has a DCAA audited rate</p> <p style="padding-left: 40px;">For-profit entity that does not expend US Federal funds or have annual audits</p>		
<p>11. Does your organization have a negotiated US Federal rate agreement including (If so, please provide a copy):</p> <p style="padding-left: 20px;">a) Approved fringe benefit rate</p> <p style="padding-left: 20px;">b) Approved indirect cost rate</p>	<p>Yes</p> <p>Yes</p>	<p>No</p> <p>No</p>
<p>12. Is your organization subject to 2 CFR Part 200, Subpart F Single Audit? <i>If yes, please provide URL link or explanation below:</i></p>	<p>Yes</p>	<p>No</p>
URL LINK:		
<p>Date of most recently completed audit (MM/DD/YYYY):</p>		



**Completion of the following sections are required for all organizations not subject to
2CFR Part 200, Subpart F-Single Audit**

Note: 2 CFR Part 200 entities that do not expend \$750,000 for Federal funds.

FINANCIAL AUDIT STATUS		
13. Does your organization have its financial statements reviewed by an independent public accounting firm or a governmental agency? (Provide a link to your Website or enclose a copy of the most recent financial statements for your organization, audited or unaudited.)	Yes	No
CASH MANAGEMENT		
14. Will any cash from grant funds be kept outside the bank account (in petty cash funds, etc.)?	Yes	No
15. Are all bank accounts reconciled monthly?	Yes	No
PAYROLL		
16. Are payroll charges checked against program/project budgets?	Yes	No
17. Are timesheets kept for each paid employees? If "no," how does your organization monitor personnel effort and align it with time charges to sponsored agreements?	Yes	No
18. Do you have a written policy that addresses pay rates, benefits time and attendance, and leave?	Yes	No
PROCUREMENT		
19. Are there written procedures to ensure procurement of goods and services at competitive prices? <i>Please provide a copy of (or link to) the written policy:</i>	Yes	No
URL LINK:		
20. Does your organization have the ability to account for equipment purchases greater than \$5,000?	Yes	No
21. Is there an effective system of authorization and approval of:		
a. Capital equipment costs?	Yes	No
b. Travel costs?	Yes	No



PROPERTY MANAGEMENT			
22. Are detailed records of individual capital assets kept and periodically balanced with the accounting records?	Yes	No	NA
23. Are there effective procedures for authorizing and accounting for the disposal or property and equipment?	Yes	No	NA
24. Are detailed property records periodically checked by physical inventory?	Yes	No	NA
25. Does your organization have a policy concerning capitalization and depreciation?	Yes	No	NA
COST TRANSFERS			
26. Does your organization ensure that all cost transfers are legitimate and appropriate? <i>Please explain or provide a copy of (or link to) the written policy:</i>	Yes	No	
URL LINK:			
COST SHARING			
27. Does your subaward budget include Cost Share	Yes	No	
COMPLIANCE			
28. Has your organization received grants, contracts, or cooperative agreements from Loyola University of Chicago in the past?	Yes	No	
29. If yes, were there any of those agreements terminated early for fiscal negligence or discrepancies, or due to lack of technical progress or misrepresentation of outcomes?	Yes	No	
30. Does your project involve: Human Subjects in research? Research Exempt?	Yes Yes	No No	
Federalwide Assurance (FW#):			
31. Has your organization or any employees, students or agents who may serve as key personnel on a subaward from Loyola University of Chicago ever been debarred, suspended or otherwise excluded from or found ineligible for participation in federally supported programs or activities?	Yes	No	
32. Does your organization have a cash forecasting process, which will minimize the time elapsed between the disbursement of funds distributed to your organization in advance? <i>If "yes," please explain below:</i>	Yes	No	



33. Does your organization have policies and procedures that address:		
a. Conflicts of Interest	Yes	No
b. Cost Transfer Policy	Yes	No
c. Procurement Policy	Yes	No
d. Subrecipient Monitoring	Yes	No

CERTIFICATIONS

The information, certifications and representations above have been read and made by an authorized official of the Subrecipient named herein. The appropriate programmatic and administrative personnel involved in this subcontract continuation are aware of Loyola University of Chicago’s policy in regards to subaward and are prepared to establish the necessary agreements consistent with those policies. Accepting or continuing an award from a university creates a legal duty for the Subrecipient to use the funds according to the Prime Sponsor terms and conditions and US Federal regulations.

Signature of Subrecipient’s Authorized Official		Date	
Type of print name and title of Authorized Official		Telephone	Email

ATTACHMENTS (Unless website has been provided above)

1. Indirect Cost Rate Agreement	Yes	No	NA
2. Most recent Financial Statements (Audited or Unaudited)	Yes	No	NA
3. Annual Single Audit in accordance with OMB’s 2 CFR Part 200 Section F	Yes	No	NA
4. Completed and signed W-9	Yes	No	NA

Please address any questions regarding this form to the Office of Research Services.

Research Administrator: _____

Telephone: _____ Email: _____