

SUBRECIPIENT COMMITMENT FORM

Please complete this form when submitting a subaward proposal to Lamar University (LU).

SUBRECIPIENT'S LEGAL NAME

SUBRECIPIENT'S PI

LU PI/CONTACT

SPONSOR

PERIOD OF PERFORMANCE DATES

SUBRECIPIENT RESEARCH OFFICE CONTACT NAME

SUBRECIPIENT RESEARCH OFFICE PHONE

SUBRECIPIENT RESEARCH OFFICE ADDRESS

SECTION A – Proposal Documents

The following documents are included in our subaward proposal submission and covered by the certifications below as applicable:

- Have Have not within three (3) years preceding this offer, been convicted of or had a civil judgment against them for commission of fraud or criminal offense in connection with a public (federal, state, or local) contract or subcontract.
- Have Have not within three (3) years preceding this offer, had one or more contracts terminated for default by any federal agency.

SECTION C –Audit Status and Organizational Type

Does the recipient receive an annual audit in accordance with 2 CFR 200.514? Yes No

If "No," please indicate why your organization is not subject to 200.514/A133 audit requirements.

- My organization is a nonprofit that expended less than \$750,000 in U.S. federal funds during our previous fiscal year.
- My organization is a foreign entity.
- My organization is a for-profit entity.
- My organization is a U.S. government entity.

If "Yes," respond to the following:

Has your organization's Uniform Guidance (200.514 formerly A133) audit been completed for the most recent fiscal year? Yes No

Were there any findings or exceptions noted? If "Yes" attach an explanation. Yes No

Subrecipient Business Status:

- Large business Small business (classification)
- Institution of Higher Education Other

SECTION D –Comments

APPROVED FOR SUBRECIPIENT certify that my organization is correctly categorized Subrecipient and is not a contractor. The appropriate programmatic and administrative personnel involved in this application are aware of primary agency policy regarding subawards and prepared to establish the necessary subaward consistent with those policies. The information provided in our proposal and on this form is true and correct, and my organization will honor any commitments made in our proposal. I am the authorized official representative of the recipient named herein, and I have the authority to legally bind my organization in grants administrative matters. I understand that: (a) any work we begin and/or expenses we incur related to our