

3160 Porter Drive, Suite 100, Palo Alto, CA 94304-8445 Telephone: (650) 723-1659 Email: laregist@stanford.edu

## **ANNUAL SUBRECIPIENT A-133 CERTIFICATION**

Our records indicate that your organization was a subrecipient of research funds awarded to Stanford United the past Fiscal Year, or is currently being considered for receipt of a subaward under such funds. OMB requires Stanford University to ensure that your organization is in compliance with Federal requirements days, please complete this form and provide the required information to the address above.  Please note: Instead of a copy, an online link or URL for the audit report may be provided the provided that the provided in the substitution is in compliance with Federal requirements and provided the required information to the address above.  We have not yet completed our A-133 audit for Fiscal Year We will advise you of the	Circular A-133 s. Within 10  ded. eresults and
	results and
We have not yet completed our A-133 audit for Fiscal Year . We will advise you of the	results and
provide a complete copy of the audit report when it is completed on (date):	
We have completed our A-133 audit for Fiscal Year There were no material weakness instances of noncompliance, reportable conditions; or findings related to any subaward(s) from University. A complete copy of the audit report or URL is enclosed. URL_	sses, material Stanford
We have completed our A-133 audit for Fiscal Year There were material weaknesses instances of noncompliance, reportable conditions, or findings related to subaward(s) from Star University. A complete copy of the audit report or URL, including our corrective action plenclosed.  URL_	nford
We are not subject to OMB Circular A-133 because (check all that apply): Our organization is for-profit. Our organization expended less than \$500,000 total in Federal Awards in Fiscal Our organization is foreign (not formed under U.S. laws), or another exception ap	
(Legal Name of Subrecipient's Organization/Institution)	
(Contact First Name) (Contact Last Name)	
(Contact Title) (Phone) (Email)	
(Physical Address) (City) (State) (Zip Code	e)
(EIN No.) (Congressional Distri	ict)

I certify that the information provided above is accurate, and that all audit findings relating to funds provided by Stanford University have been disclosed. I further certify that my organization is in compliance with A-133 to the extent it is applicable to subawards from Stanford, and with all other laws and regulations applicable to the subawards.

(Date)

(Signature)

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## **AUDIT CERTIFICATION AND FINANCIAL STATUS QUESTIONNAIRE**

For organizations that are not subject to OMB Circular A-133): Please complete the Audit Certification and Financial Status Questionnaire below and provide audit reports or financial statements.

(Select one of the below, as applicable)		
External independent audits of my organization/company have been completed for my organization's most recently completed Fiscal Year ended A true, complete and correct copy of the audit report or URL is attached and hereby provided to Stanford University.  URL		
OR		
My organization/company has <b>not</b> been audited by a U.S. Government audit agency or by an independent CPA firm for the most recently completed Fiscal Year ended <b>True and correct information concerning my organization's finances and fiscal policies are provided in the attached Financial Status Questionnaire, and in the attached financial statements covering the fiscal year noted above.</b>		
(If you have audited financial statements for the most recent fiscal year, please attach and send a complete copy of your organization's audit report.		
(If you do not have audited financial statements for the most recent fiscal year, please complete and return the Financial Status Questionnaire below with the requested documents).		

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## FINANCIAL STATUS QUESTIONNAIRE

(Please select the applicable response)

#### **General Information**

Does your organization have its <u>financial statements</u> reviewed by an independent public accounting firm? (Please enclose a copy of the most recent financial statements for your organization, audited or unaudited.)

Other than financial statements, has any aspect of your organization's activities been audited within the last two years by a governmental agency or independent public accountant? (Please provide a copy of any recent external audit report.)

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

Does your organization have controls to prevent expenditure of funds in excess of approved, budgeted amounts?

Does your organization maintain current, accurate information on the System for Award Management (SAM) website <a href="https://www.sam.gov/">(www.sam.gov/)?</a> What is the current registration expiration date?

## **Cash Management**

Are all disbursements properly documented with evidence of receipt of goods or performance of services?

Are all bank accounts reconciled monthly?

## **Payroll**

Are payroll charges checked against program budgets?

What system does your organization use to control paid time, especially time charged to sponsored agreements?

#### **Procurement**

Are there procedures to ensure procurement at competitive prices?

Is there an effective system of authorization and approval of:

- a) Capital equipment expenditures?
- b) Travel expenditures?

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## **Property Management**

Are detailed records of individual capital assets kept and periodically balanced with the general ledger accounts?

Are there effective procedures for authorizing payment and accounting for the disposal of property and equipment?

Are detailed property records periodically checked by physical inventory?

Briefly describe the organization's policies concerning capitalization and depreciation.

## **Cost Transfers**

How does the organization ensure that all cost transfers performed are legitimate and appropriate?

## **Indirect Costs/Fringe Benefits**

Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate? Does it have a negotiated fringe benefit agreement? **Please provide copies of any negotiated indirect cost rate and fringe benefit agreements.** If none exist, please describe the process for determining that your organization charges Stanford indirect costs and fringe benefit expenses at its most favorable rates.

Does the organization have procedures that provide assurance that consistent treatment is applied in the distribution of charges to all grants, contracts and cooperative agreements? Please summarize the procedures, or provide the URL for these documents.

#### **Cost Sharing**

How does the organization determine that it has met cost sharing goals?

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## **Compliance**

Does your organization have a formal policy of nondiscrimination and a formal system for complying with United States federal civil rights requirements?

Does your organization have a cash forecasting process that will minimize the time elapsed between the drawing down of funds and the disbursement of those funds?

If your organization enters into agreements for work or research to be performed outside of the United States, does it have systems in place to prevent and detect payments made to government officials to allow or procure work and research opportunities for or on behalf of your organization?

## **Documents provided:**

Recent Financial Statements, External FURL_	Review or Audit Report
Indirect Cost Rate Agreement	
URLFringe Benefit Agreement	<del></del>
URL	
	Signature of Authorized Official: