# COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 66-0433765 ORGANIZATION: University of Puerto Rico - Humacao Campus Central Administration GPO Box 364984 San Juan, PR 00936-4984

DATE:03/15/2016 FILING REF.: The preceding

agreement was dated 04/12/2013

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: Facilities And Administrative Cost Rates									
RATE TYPES:	FIXED	FINAL	PROV. (PROVISIONAL)	PRED.	(PREDETERMINED)				
	EFFECTIVE P	ERIOD							
TYPE	FROM	TO	RATE (%) LOCATION	I	APPLICABLE TO				
PRED.	07/01/2015	06/30/2018	60.00 On-Campu	IS	Research				
PRED.	07/01/2015	06/30/2018	26.00 Off-Camp	ous	Research				
PROV.	07/01/2018	Until Amended			Use same rates and conditions as those cited for fiscal year ending June 30, 2018.				

# \*BASE

Direct salaries and wages including vacation, holiday, sick pay and other paid absences but excluding all other fringe benefits.

ORGANIZATION: University of Puerto Rico - Humacao Campus Central Administration AGREEMENT DATE: 3/15/2016

# SECTION II: SPECIAL REMARKS

## TREATMENT OF FRINGE BENEFITS:

Fringe benefits applicable to direct salaries and wages are treated as direct costs.

# TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

The rates in this Agreement have been negotiated to reflect the administrative cap provisions of the revisions to OMB Circular A-21 published by the Office of Management and Budget on May 8, 1996. No rate affecting the institution's fiscal periods beginning on or after October 1, 1991 contains total administrative cost components in excess of that 26 percent cap.

2. The indirect cost rates include administrative expenses such as secretarial, clerical an other general administrative staff personnel necessary for the general administration of Federal Awards. The rates also include departmental administration in addition to general institutional expenses such as office supplies, postage, copying and other general institutional costs.

3. The off-campus rate applies to Research and Regional Medical Programs conducted in facilities not owned by the University and all activities conducted at the University District Hospital.

4. Awards accounted for at the Office of Central Administration should use the indirect cost rate for the campus where the activity is actually being performed.

5. Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$5,000 or more per unit.

AGREEMENT DATE: 3/15/2016

## SECTION III: GENERAL

### A. LIMITATIONS:

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted: such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

#### B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

### C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

#### D. USE BY OTHER FEDERAL AGENCIES:

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

### E. OTHER:

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

#### BY THE INSTITUTION:

ON BEHALF OF THE FEDERAL GOVERNMENT:

University of Puerto Rico - Humacao Campus Central Administration

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

DEPARTMENT	OF	HEALTH	AND	HUMAN	SERVICES

(AGENCY) Darryl W. Mayes -S	Digitally signed by Darryl W. Mayes -S DN: c=US, c=U.S. Government, ou+HHS, ou=PSC, ou=People, 0.9.2342.19200300.100.1.1=2000131669, cmDarryl W. Mayes -S Date: 2016.03.18 13:29:05 -04'00'
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(SIGNATURE)

Darryl W. Mayes

(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

3/15/2016

(DATE) 0402

HHS REPRESENTATIVE:

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