

Instructions: Optional fields are in blue. All other information and answers are required.			
Entity Name:			
Date Information Last Updated:			
DATA ELEMENT	ANSWER OR INFORMATION REQUESTED	RELEVANT LINKS	COMMENTS
ENTITY RELATED INFORMATION - GENERAL	ANSWER OR INFORMATION REQUESTED		COMMENTS
Entity Information			
Legal Entity Name (Legal name associated with DUNS Number, can be found in SAM)			1
Legal Entity Address (can be found in SAM as Physical Address)			
Legal Entity City (can be found in SAM as Physical Address)			
Legal Entity State (can be found in SAM as Physical Address)	<pre><click to="" view=""></click></pre>		
Legal Entity State (can be found in SAM as Physical Address)			
Legal Entity Country	U.S.A.		
Legal Entity Payment Address	U.S.A.		
Legal Entity Congressional District (please format information as "WA-007", can be found in SAM)			
Legal Entity Fiscal Period End Date (MM/DD)			
Legal Elitity Fiscal Period Elid Date (WW/DD)			
Entity Type			
Please select your Entity type from list (same as FDP Subaward Agreement Template 3B list) :	<click to="" view=""></click>		
If Entity type is not listed, please enter in the adjacent cell:			
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Small Business Concern			
Entity represents that it is a small business concern as defined in 13 CFR 124.1002. (Yes/No)	<click to="" view=""></click>		
If Yes: Entity represents that it is the following type of entity:	<click to="" view=""></click>		
If Other, please specify in the adjacent cell:			
Parent/State/Audit Entity Information (If Entity is owned or controlled by a parent/state entity, or has a separate audit entity)			
Is Entity owned or controlled by a parent/state/audit entity? (Yes/No)	<click to="" view=""></click>		
Parent/State/Audit Entity Legal Name			
Parent/State/Audit Entity Legal Address			
Parent/State/Audit Entity Legal City			
Parent/State/Audit Entity Legal State	<click to="" view=""></click>		
Parent/State/Audit Entity Legal Zip + 4			
Parent/State/Audit Entity Congressional District			
Parent/State/Audit Entity Country	U.S.A.		
Parent/State/Audit Entity EIN Number (sample format: 12-3456789)			
Parent/State/Audit Entity DUNS Number (sample format: 12-345-6789)			
Parent/State/Audit Entity Contact Information			
Parent/State/Audit Entity Contact Name			
Parent/State/Audit Entity Contact Name Phone Number			
Parent/State/Audit Entity Contact Name Email			
Entity Identification Numbers and Codes			
Entity EIN (Employer Identification Number) (sample format: 12-3456789)			
Entity IRS Tax Determination Letter [optional field]	<click to="" view=""></click>		
Entity IRS/W-9 (optional field)	<pre><click to="" view=""></click></pre>		
Entity NAICS Code(s) (North American Industry Classification System) (can be found in SAM) (sample format: 123456)			
Entity DUNS Number (Data Universal Numbering System, can be found in SAM) (sample format: 12-345-6789)			-
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Entity SAM status (System for Award Management, can be found in SAM)	<pre>l<click to="" view=""></click></pre>		
Entity SAM status (System for Award Management, can be found in SAM) Entity SAM Expiration Date (MM/DD/YYYY, can be found in SAM)	<click to="" view=""></click>		



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Entity Name:			
Date Information Last Updated:			
DATA ELEMENT	ANSWER OR INFORMATION REQUESTED	RELEVANT LINKS	COMMENTS
Entity Rate Agreements			
Does Entity have a negotiated Facilities & Administrative (F&A) Rate Agreement? (Yes/No)	<click to="" view=""></click>		
If Yes, please provide a link to Entity's F&A Rate Agreement in Relevant Links			
Does Entity have a negotiated Fringe Benefit (FB) Rate Agreement? (Yes/No)	<click to="" view=""></click>		
If Yes, please provide a link to Entity's FB Rate Agreement in Relevant Links			
Department of Defense Registration Numbers			
Entity CAGE Code (Commercial And Government Entity, can be found in SAM) (sample format: 1ABC2)			
Entity NCAGE Code International (if Entity is a foreign organization)	NA for US Domestic Entities		
Entity Contractor Establishment Code (CEC) (May be Entity DUNS number) [optional field] (sample format: 12-345-678A)			
Entity Directorate of Defense Trade Controls (DDTC) Registration Code (Utilized in some export control actions) [optional field] (sample format:			
A12345)			
Department of Education Registration Numbers			
Department of Education Registration Numbers			
Entity Office of Postsecondary Education (OPE) ID Number (formerly known as FICE Code) [optional field] (sample format: 001234)			
Entity Integrated Postsecondary Education Data System (IPEDS) Number [optional field] (sample format: 123456)			
Entry integrated Postsecondary Education Data System (iPEDS) Number [optional jield] (sumple Jonnat. 1254-50)			
Assurances and Agency Approvals			I
Does Entity have a HHS (US Department of Health and Human Services) /OHRP (Office of Human Research Protection) Human Subjects Federa			
Wide Assurance (FWA) approval? (Yes/No)	<click to="" view=""></click>		
Entity HHS/OHRP Human Subjects FWA Number (sample format: FWA000012345.)			
Entity HHS/OHRP Human Subjects Federal Wide Assurance Expiration Date (MM/DD/YYYY) [optional field]			
Entity DOD (Department of Defense) Human Subjects FWA Addendum (optional field) (sample format: 123456)			
Does Entity have PHS (Public Health Service) /OLAW (Office of Laboratory Animal Welfare) approval? (Yes/No)	<click to="" view=""></click>		
Entity PHS/OLAW Assurance Number (sample format: A1234-56)			
Entity PHS/OLAW Animal Welfare Assurance Approval Date (MM/DD/YYY) [optional field]			
Entity PHS/OLAW Animal Welfare Assurance Approval Expiration Date (MM/DD/YYYY) [optional field]			
Is Entity AAHRPP (Association for the Accreditation of Human Research Protection Programs) accredited? (Yes/No)	<click to="" view=""></click>		
Entity AAHRPP Assurance Number [optional field]			
Entity AAHRPP Assurance Approval Date (MM/DD/YYYY) [optional field]			
Is Entity AAALAC (Association for Assessment and Accreditation of Laboratory Animal Care International) accredited? (Yes/No)	<click to="" view=""></click>		
Entity AAALAC Accreditation Assurance Number [optional field]			
Entity AAALAC Accreditation Assurance Issue Date (MM/DD/YYYY) [optional field]			
Does Entity have USDA (United States Department of Agriculture) Research Registration Number? (Yes/No)	<click to="" view=""></click>		
Entity USDA Research Registration Number [optional field] (sample format: 12-A-3456)			
Entity USDA Research Registration Expiration Date (MM/DD/YYYY) [optional field]			
Entity USDA Type of Performing Institution Designation [optional field]			
Does Entity have a NRC (Nuclear Regulatory Commission) Radioactive Materials License Number? (Yes/No)	<click to="" view=""></click>		
Entity NRC Radioactive Materials License Number [optional field] (sample format: AB-C123-4)			
Description of Defense (DOD) (Office et News) Description (DND) Control Description (DND) Control Description			
Department of Defense (DOD) /Office of Naval Research (ONR) System Review/Audit Questions			
Entity Property Management System Audit (PMSA) - Approval Date (<i>MM/DD/YYYY</i>) [optional field] Entity Contractor Purchasing System Review (CPSR) - Approval Date (<i>MM/DD/YYYY</i>) [optional field]			
Entity Contractor Purchasing System Review (CPSR) - Approval Date (MM/DD/YYYY) [optional field] Entity Contractor Purchasing System Review (CPSR) - Approval Expiration Date (MM/DD/YYYY) [optional field]			
Entity Defense Contract Audit Agency (DCAA) - Report on Audit of Estimating System Approval Date (MM/DD/YYYY) [optional field]			
Entity Defense Contract Audit Agency (DCAA) - Report on Audit of Billing System Approval Date (MM/DD/YYYY) [optional field]			
Entity Defense Contract Audit Agency (DCAA) - Report on Audit of Accounting System Internal Control Approval Date (MM/DD/YYYY) [optional field]			
ONR Administrative Contracting Officer (ACO) [optional field]	1		
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by ing (for U.S. federal projects only): Entity hereby certifies to the best of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)	destruction of records, making false statements or receiving stolen property. (Yes/No)			
by ing (for U.S. federal projects only): Entity hereby certifies to the best of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)				
bobbying (for U.S. federal projects only): Image: Constraint of the set of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of a Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)	Vithin three (3) previous years, entity has had one or more contracts terminated for default by any federal agency. (Yes/No)	<click to="" view=""></click>		
bobbying (for U.S. federal projects only): Image: Constraint of the set of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of a Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)		1	1	
bobbying (for U.S. federal projects only): Image: Constraint of the set of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of a Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)	obbying			
Entity hereby certifies to the best of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)	· •			
person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, an a employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)				
Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)				
		<click to="" view=""></click>		
If "No," please explain in the adjacent cell:	Congress, or an employee of a Member of Congress on its behalf in connection with the awarding of any contract. (Yes/No)			
	I If "No." please explain in the adjacent cell.			
	in ito, prose explainin die dujacent cen.	1	1	



Instructions: Optional fields are in blue. All other information and answers are required.			
Entity Name:			
Date Information Last Updated:			
DATA ELEMENT	ANSWER OR INFORMATION REQUESTED	RELEVANT LINKS	COMMENTS
Affirmative Action Compliance			COMMENTS
In accordance with the rules and regulations of the Secretary of Labor (41 CFR 60-1 and 60-2), indicate which of the statements to the right			
apply to entity regarding affirmative action.	<click to="" view=""></click>		
abilit o curri rebrand annuere accou			
FFATA			1
FATA - Report Executive Compensation		1	
Is Entity exempt from reporting compensation? (Yes/No)	<click to="" view=""></click>		
Please note: Executive compensation information for the Entity must be reported if (1) more than 80% of annual gross revenues are			
from the Federal government AND (2) those revenues are greater than \$25M annually, AND (3) compensation information is not			
already available through reporting to the Security & Exchange Commission (SEC).			
If "No", provide information requested for the top five paid officers in the adjacent cell.	-		
	1	1	
ENTITY RELATED INFORMATION - AUDIT			1
Single Audit Information			
Single Audit Status			
5 Entity subject to the Single Audit requirements in 2 CFR Part 200? (Yes/No)	<click to="" view=""></click>		
If Yes, please complete "If Yes" section below.			
If No, please complete "If No" section below.			
If Yes:			
Most recent fiscal year with completed Single Audit:	FY2015		
Is Entity qualified as low-risk entity by Auditor, or as defined in 2 CFR 200? (Yes/No/Not Available)	<click to="" view=""></click>		
Did the Entity's most recent Single Audit contain any findings? (Yes/No)	<click to="" view=""></click>		
Did the Entity's most recent Single Audit contain any Significant Deficiencies? (Yes/No)	<click to="" view=""></click>		
Did the Entity's most recent Single Audit contain any Material Weaknesses? (Yes/No)	<click to="" view=""></click>		
Were any of the findings related specifically to any pass-through federal funding to the entity? (Yes/No)	<click to="" view=""></click>		
	•	•	
Please provide link to most recent completed Single Audit Report in Relevant Links		а	
Please provide links to Entity Single Audit Reports from previous Fiscal Year in Relevant Links			
Please provide link or attachment to a management letter if it has been issued.			
If No:			
Entity IS NOT subject to the Single Audit requirements in 2 CFR Part 200 due to being the following type of entity:	<click to="" view=""></click>		
ENTITY CERTIFICATION OF ACCURACY OF INFORMATION			
Entity Authorized Official Approval/Certification			
The information, certifications and representations above are accurate and current information and have been read and made by an official of			
the Entity named herein that is authorized to make such certification on behalf of the entity.			
Entity Authorized Official Name			
Entity Authorized Official Title			
Entity Authorized Official Email			
Entity Authorized Official Phone			
Date of Authorized Official Approval (MM/DD/YYYY)			
Entity Profile Preparer Name			
Entity Profile Preparer Name Email			