



# **OFFICE OF SPONSORED PROGRAMS**





# OVERVIEW

The Office of Sponsored Programs is considered the Pre-Award phase which marks the start of the grant lifecycle that is responsible for reviewing and approving proposals for sponsored awards and accepting grants and contracts for externally funded activities. The primary mission of the Office of Sponsored Programs is to provide core services to faculty and the research administration community, including reviewing and approving proposals, accepting awards, and preparing and issuing agreements.

# PRE-AWARD PROPOSAL PROCESS

- The purpose of the preliminary review is for the PI to receive a timeline to proceed with the submission. The preliminary review and approval phase is applicable to all solicited and unsolicited proposals for submission to a federal agency, a foundation, or an industry. The process is as follows:
- PI identifies agency and selects a topic
- The (PI) submits the following documents to the Grant Specialist designated for their department:
  - The Internal Proposal Routing Form (IPRF) signed by all parties (TU PI, TU Co-PI(s), Department Head, and Dean.
  - **Provost and CFO signature is required if cost-sharing is involved along with the complete and signed Cost Sharing and Matching Sources Form**
  - One Page abstract or program summary
  - Tentative Budget and Budget Justification
  - A copy of the funding announcement and instructions.
  - If subawards are included submit the OSP contact information for the sub-awardees.



# **PRE-AWARD PROPOSAL PROCESS CONTINUED...**

- Review of the preliminary documents is completed and a timeline is issued to show dates and times for when documents are due and when the proposal review will begin.
- The timeline will also include the required dates the proposal documents must be uploaded in the required system along with the OSP submission date and the agency's deadline date.
- Upon final review and discussion, if needed, the proposal will be submitted by one of the OSP staff members prior to the agency's deadline date.

- **ALL forms for OSP can be found on the TU website under Research and Sponsored Programs/Office of Sponsored Programs**

# CONTACT INFORMATION/AVAILABILITY

- Jasmine Jackson
- Director, Office of Sponsored Programs, Kenney Hall, Room 70-218,  
334.724.4472 (office), [jjackson4@tuskegee.edu](mailto:jjackson4@tuskegee.edu) (email)
- Deborah Spencer
- Associate Director of Sponsored Programs, Kenney Hall, Room 70-  
217, 334.724.4478 (office), [dspencer@hornton.tuskegee.edu](mailto:dspencer@hornton.tuskegee.edu) (email)
- Jamillah McCray
- Grants Specialist, Kenney Hall, Room 70-215, 334.724.4473 (office),  
[jmccray@tuskegee.edu](mailto:jmccray@tuskegee.edu) (email)

**Availability: Monday-Friday (8:00 am – 4:30 pm)**



DIVISION OF RESEARCH AND SPONSORED PROGRAMS  
Office of Sponsored Programs

**Proposal Submission Policy**

The number of proposals submitted from Tuskegee University continues to grow steadily from year to year with an increase in the complexity of submissions. Taking into consideration the fact that staffing in the Office of Sponsored Programs has decreased, the workload has increased, and additional time is required to review proposals, properly. In order to ensure that all proposals are submitted in the best quality possible and more time is given to the staff to review, the guidelines below have been set and are effective immediately.

**Proposal Submission Guidelines:**

1. **Twenty-one business days** prior to the submission deadline, the Office of Sponsored Programs must be notified by the PI, of the **INTENT** to submit a proposal. The required documents to be submitted at that time are, the Internal Routing Form (complete and signed by the PI, all university Co-PI's, Department Head, and Dean), abstract, tentative budget, budget justification, and the solicitation. These documents are required for federal and state submissions, subcontracts, white paper submissions, desk submissions, etc. Proposals uploaded to the appropriate system **WILL NOT** be reviewed until **ALL** required documents are received.
2. **Fourteen business days** prior to the submission deadline, the Office of Sponsored Programs must have all required documents uploaded to the required electronic system such as (Research.gov, Fastlane, eRA Commons/Assist, and Grants.gov) for final review. **(This will also include white paper submissions, subcontracts, desk submissions, etc.) DO NOT** upload completed proposals more than **thirty days** prior to the deadline.
3. **ALL** proposals **WILL** be submitted by **close of business at 4:30 pm**, including proposals that are due by **11:59 pm** on the day of submission.
4. If cost-share is required, it must be recorded on the internal routing form with the appropriate source/colleague number. **ALL COST-SHARES MUST BE APPROVED BY THE DEAN, DEPARTMENT HEAD, VP FOR RESEARCH, AND PROVOST.**

If you have any questions or concerns, please contact the Office of Sponsored Programs.

Jasmine Jackson – [jjackson4@tuskegee.edu](mailto:jjackson4@tuskegee.edu), 334-724-4472

Deborah Spencer – [dspencert Thornton@tuskegee.edu](mailto:dspencert Thornton@tuskegee.edu), 334-724-4478

Jamillah McCray – [jmccray@tuskegee.edu](mailto:jmccray@tuskegee.edu), 334-724-4473

Kind Regards,

Jasmine Jackson

Digitally signed by Jasmine Jackson  
DN: cn=Jasmine Jackson, o=Tuskegee  
University, ou=Office of Sponsored Programs,  
email=jjackson4@tuskegee.edu, c=US  
Date: 2022.07.11 12:01:37 -05'00'

[Jasmine Jackson](#)

Interim Director, Office of Sponsored Programs

Shaik Jeelani

Digitally signed by Shaik Jeelani  
DN: cn=Shaik Jeelani, o=Tuskegee  
University, ou=Research and the Graduate  
School, email=sjeelani@tuskegee.edu,  
c=US  
Date: 2022.07.12 09:36:29 -05'00'

[Shaik Jeelani](#)

VP for Research and Dean of Graduate School

Tuskegee University  
**Office for Sponsored Programs**  
Fact Sheet

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**Official University Contact Information**

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**Name:** Tuskegee University  
**Address:** 1200 West Montgomery Road  
Tuskegee, AL 36088-1923  
Macon County

**Telephone:** 334-727-8011  
**Contact Information:** <https://www.tuskegee.edu/research-innovation/office-of-sponsored-programs>

**Signing Official:** Dexter Odom  
VP for Business Affairs and CFO  
[dodom@tuskegee.edu](mailto:dodom@tuskegee.edu)  
334-727-8855

**Authorized Official Representative:** Dr. Vijaya Rangari  
Interim, Associate VP for Research  
[vrangari@tuskegee.edu](mailto:vrangari@tuskegee.edu)  
334-724-4875

**Type of Organization:** HBCU (Historically Black College and University)  
**Tax Status:** Tax exempt under Section 501(c)(3) of the IRS code

### Important Numbers

<b>EIN/Tax ID:</b>	63-0288878	<b>Congressional District:</b>	AL-003
<b>DUNS #:</b>	128214178	<b>SAM Registration</b>	Active
<b>UEI #:</b>	U9JCYEXFEEU4	<b>SAM Expiration</b>	07/24/2024
<b>NSF Institutional Code:</b>	0010504000	<b>Cage Code:</b>	1P3Y2
<b>ASAP Code:</b>	0126940	<b>NAICS Code:</b>	923110
<b>STARRS (State of Alabama Accounting and Resource Systems)</b>	VC000130298	<b>FICE Code: (Federal Interagency Committee on Education)</b>	1050
<b>Human Subjects FWA #:</b>	FWA00003249	<b>FWA # Expiration:</b>	2/11/2024
<b>Animal Welfare Assurance#</b>	A393801	<b>Animal Assurance Expiration:</b>	06/30/2026
<b>Radioactive Material License (Alabama Department of Public Health)</b>	226	<b>Expiration Date:</b>	8/31/2024



**Fringe Rates Used for Proposal Estimating Purposes:**

University Fringe Rates	
Faculty & Regular Full-time Exempt Staff (salaried)	25%

**Costs in Fringe Benefit Rate Include:**

- |                           |                                   |
|---------------------------|-----------------------------------|
| Medicare                  | Tuition Benefits (Employees Only) |
| Unemployment Insurance    | Health Insurance                  |
| TIAA Retirement           | Disability Insurance              |
| Unemployment Compensation | Life Insurance                    |

**Facility and Administrative (F&A) Rates: (Being negotiated)**

Agreement Date: 09/26/2017			
Activity Type	Rate	Location	Dates
Organized Research	47.00%	On-campus	07/01/2016- Until Amended
Organized Research	23.20%	Off-campus*	07/01/2016- Until Amended
Instruction	60.30%	On-campus	07/01/2016- Until Amended
Instruction	26.00%	Off-campus*	07/01/2016- Until Amended
Other Sponsored Activity	27.40%	On-campus	07/01/2016- Until Amended
Other Sponsored Activity	22.70%	Off-campus*	07/01/2016- Until Amended

**F&A Rate Agreement:**

<https://www.tuskegee.edu/Content/Uploads/Tuskegee/images/Research%20and%20Grad%20Studies/Tuskegee%20University%20Indirect%20Cost%20Rate%20Agreement.pdf>

## ***Cognizant Agency Information***

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**Cognizant Agency for F&A Cost Rates:** Department of Health and Human Services  
Darryl Mayes  
Cost Allocation Services  
(301) 492-4855

## ***Financial Contact***

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**Make Checks Payable To:** Tuskegee University

**Financial Contact Information:** Ms. Moroline Washington, Director  
Contract and Grant Accounting  
204 Kresge Center  
Tuskegee, AL 36088-1923  
(334) 724-4474  
[mwashington2@tuskegee.edu](mailto:mwashington2@tuskegee.edu)

\*\*\*\*Please contact the Contract and Grant Accounting Office for any financial information and invoicing.

## ***ACH and Accounting Contact***

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**Accounting Contact Information:** Ms. Christina Donner, Business and Finance  
Accounting Manager  
116 Kresge Center  
Tuskegee, AL 36088-1923  
(334) 724-4519  
[cdonner@tuskegee.edu](mailto:cdonner@tuskegee.edu)

**Office of Sponsored Programs Departmental Assignments**

**Jasmine Jackson – CAENS, Assisting with CVM, Assisting with CAS  
Director of Sponsored Programs**

John A. Kenny, Room 70-218

Phone: 334-724-4472

Email: [jjackson4@tuskegee.edu](mailto:jjackson4@tuskegee.edu)

**Deborah Spencer – CE, TSACS, CVM, Provost, VP for Research  
Associate Director**

John A. Kenney, Room 70-217

Phone: 334-724-4478

Email: [dspencerthornton@tuskegee.edu](mailto:dspencerthornton@tuskegee.edu)

**Jamillah McCray – CBIS, CAS, President, Bioethics, Library  
Grants Specialist**

John A. Kenny, Room 70-215

Phone: 334-724-4473

Email: [jmccray@tuskegee.edu](mailto:jmccray@tuskegee.edu)

# Tuskegee University

## Office of Sponsored Programs

### Internal Proposal Routing Form

Complete, sign, and submit proposal documents to **OSP twenty-one (21) business days** prior to the submission deadline.

OSP No: \_\_\_\_\_

<b>Proposal Title:</b>	
<b>Principal Investigator:</b>	<b>Co-PI 1:</b>
<b>Department:</b>	<b>Department:</b>
<b>Campus Address:</b>	<b>Co-PI 2:</b>
<b>Campus Phone:</b>	<b>Department:</b>
<b>Campus Fax:</b>	<b>Co-PI 3:</b>
<b>E-mail Address:</b>	<b>Department:</b>

<b>Project Type:</b>	<b>Award Term:</b>	<b>Award Type:</b>	<b>CFDA:</b> _____	<b>Project Involves:</b>
<input type="radio"/> Instruction <input type="radio"/> Research <input type="radio"/> Public Service <input type="radio"/> Student Services <input type="radio"/> Fin. Aid/ Scholarships	<input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Competing Renewal <input type="checkbox"/> Supplement <input type="checkbox"/> Resubmission	<input type="radio"/> Grant <input type="radio"/> Contract <input type="radio"/> Subcontract <input type="radio"/> MOA/MOU	Protocol consent form must be routed to an IRB	<input type="checkbox"/> Human Subjects <input type="checkbox"/> Animal Subjects <input type="checkbox"/> Biohazards <input type="checkbox"/> Radiation

<b>Sponsor/Funding Agency:</b>	<b>Sponsor Type:</b>
<b>Program to which you are applying:</b>	<input type="checkbox"/> Federal
<b>Sponsor Contact Name &amp; Title:</b>	<input type="checkbox"/> State
<b>Sponsor Mailing Address:</b>	<input type="checkbox"/> Local Government
	<input type="checkbox"/> Private
<b>Sponsor Phone:</b>	<input type="checkbox"/> International
<b>FAX:</b>	<input type="checkbox"/> Federal Flow-thru
<b>Is electronic submission required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Appropriation
<b>Deadline:</b>	
<b>Receipt date?</b> <input type="checkbox"/>	
<b>Postmark?</b> <input type="checkbox"/>	

<b>Begin Date:</b>	<b>End Date:</b>
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#### PROJECT BUDGET SUMMARY

Indirect Cost Information	Period	Direct \$	Indirect \$	Total \$	Match \$**
Applicable Federal Rate*	Year 1				M/CS requires completion of the M/CS Form
Requested Rate*	Year 2				
<input type="checkbox"/> Sponsor restricted rate (attach guidelines)	Year 3				
	Year 4				
	Year 5				
*If reduced or waived, attach an Indirect Cost Waiver Form	Total				

<b>University Match**</b>	<b>**Please list source of matching funds (if applicable):</b>	
<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind	1) Unit: _____	GL No: _____
<input type="checkbox"/> Mandatory <input type="checkbox"/> Voluntary	2) Unit: _____	GL No: _____

Is there equipment budgeted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is tuition budgeted for students? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Are subawards included in budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list number of subgrants included here: _____
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**To:** \_\_\_\_\_ *\*Please attach Subrecipient Commitment Form(s)*

**Project Space Requirements:** A "Yes" answer on either of these items requires consultation with VP for Capital Projects. (a) Project requires new space/construction?  Yes  No  
 (b) Project requires renovations of existing space?  Yes  No

#### Conflict of Interest Certification

<i>If "yes" to either or both questions, please explain on an attached sheet.</i>	<b>PI</b>	<b>Co-PI 1</b>	<b>Co-PI 2</b>	<b>Co-PI 3</b>
Will/do you or any member of your household or grant staff benefit in cash exceeding \$5,000 a year from, or own more than 5% of the voting stock or controlling interest in the above sponsor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or any member of your household or grant staff affiliated with the above sponsor or with an external agency in any way that will hinder your abilities to fulfill obligations to TU, its students or your colleagues?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Time and Effort (Use current salary/fringes) on Project**

Name	Academic Yr or Summer?	Time and Effort	Annual Salary	Requested Salary	Current Fringes	Total Salary
					19.50%	
					19.50%	
					19.50%	
					19.50%	
					19.50%	
					19.50%	

**Approvals (PI should secure signatures before requesting administrative approval from Sponsored Programs)**

<b>Principal Investigator:</b>	<b>Co-PI 1:</b>	
<b>Co-PI 2:</b>	<b>Co-PI 3:</b>	

In signing this IPRF, I understand and accept responsibility for the design, execution, and management of this project, including the project budget, and any applicable reports in accordance with funding program guidelines and the policies of the University, if awarded; I have provided complete disclosure of any financial interests that present an actual or potential conflict of interest; and I am not delinquent in submitting final project reports to sponsors from previous grants I have received; and **I will ensure that all staff and students working on the project have read, understand, and comply with the University's policies on Intellectual Property, the Drug Free Workplace, Conflict of Interest, Risk Management and other University Research requirements, as well as all federal, state and local regulatory agency requirements related to the project.**

<b>Department Head:</b>	<b>Date:</b>
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In signing this IPRF, I certify that the project's activities and purpose are consistent with the mission of the University and academic unit; **PI and/or Co-PI(s) workloads are within 100% of effort; facilities and space, and other unit resources necessary to complete the proposed project are available\*\*\*** to the project or provisions have been arranged within the unit to make such space or other institutional resources available in the event an award is made (**enclose signed agreement**).

<b>Center Director/Dean:</b>	<b>Date:</b>
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In signing this IPRF, I certify that the project's activities and purpose are consistent with the mission of the University and academic unit, and that approval by the Department Head and/or Center Director, or me in absence of such **signatures, signifies that adequate support and resources will be available in the event an award is made including provisions for expensive service contracts \*\*\*\* required of sensitive and specialized instrumentation (enclose signed agreement).**

**Sponsored Programs Use Only**

<b>VP for University Advancement/Development</b> (only if foundation, etc)	<b>Date:</b>
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<b>Chief Information Officer:</b> (only if IT infrastructure is involved)	<b>Date:</b>
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<b>Provost:</b> (only if cost-sharing and matching is involved)	<b>Date:</b>
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<b>OSP Staff:</b>	<b>Date:</b>	In signing this IPRF, I certify that the budget, format, representations, and other requirements are correct. I certify that the project meets the standards of federal, state, and/or local requirements, that the application will be submitted in accordance with University policy, that all appropriate signatures have been obtained, and that all compliance requirements have been met.
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<b>VP for Research</b>	<b>Date:</b>	In signing this IPRF, I certify that the proposal meets the requirements and standards of the University.
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**Return to the Provost office electronically a pdf with copy of final IPRF, abstract, and Aims of submission**

\*Projects submitted at the last minutes will be automatically placed on a queue for processing at the following cycle.

\*\*Projects that require matching must be accompanied by appropriate documentation of assurance

\*\*\*Approved and signed agreements for

\*\*\*\*Projected defrayment % by users, or institutional guarantees must be demonstrated

# Cost Sharing and Matching Sources (CSMS)

Tuskegee University Office of Sponsored Programs

Principal Investigator: \_\_\_\_\_ Date: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Proposed Project Title: \_\_\_\_\_ Proposed Dates of Activity: \_\_\_\_\_  
 Funding Agency: \_\_\_\_\_ Deadline: \_\_\_\_\_

Instructions: Please type or print clearly, and complete all applicable boxes. Use additional sheets if necessary.

Category	Source	Account No.	Use	% of Time Use	Value Calculation	Amount of Value (\$)
Tuskegee University Personnel (Name and title)	Basic budget or funded project title and funding agency	Account # and line item	Description of the Contribution made to the Proposed project.		Please indicate how you arrived at the \$ value	
Other Personnel (Name and Employer)						
Consultants (Name and capacity)						
Volunteer Service (Name and/or agency)						

Category	Source	Account No.	Use	% of Use	Value Calculation	Amount of Value (\$)
Supplies	Basic budget or funded project title and funding agency	Acct. # and line item	Description of the contribution made to the proposed project.		Please indicate how you arrived at the \$ value	
Property (Land, buildings, etc.)						
Equipment	Please indicate how, where and when purchased					
Other						
Unrecovered Indirect Cost						
					<b>TOTALS</b>	

**Approvals**

Notes/Comments

Principal Investigator

Business and Fiscal Affairs

Dean

Provost/Academic Affairs

Vice President of Research & Sponsored Programs








TUSKEGEE UNIVERSITY

OFFICE OF FINANCE

TO: Deans  
Department Heads  
Director, Office of Sponsored Programs

FROM: Dexter Odom   
Vice President for Business Affairs/CFO

DATE: March 16, 2023

SUBJECT: FRINGE BENEFITS RATE INCREASED TO 25%

Effective March 16, 2023, Fringe Benefits calculations used in proposals are based on the following University's Rates:

<u>Benefit Type:</u>	<u>Current Rate:</u>
Medicare	1.45%
OASI	6.20%
TIAA Retirement	3.00%
Unemployment Compensation	0.50%
Half Tuition Benefits	0.28%
Health Insurance	13.19%
Disability Insurance	0.26%
Life Insurance	<u>0.12%</u>
Total	25.00%

cc: Debriena Gardner  
Assistant VP of Budget and Planning

Moroline Washington  
Director of Grants and Contracts

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 1630288878A1  
 ORGANIZATION:  
 Tuskegee University  
 116 Kresge Center  
 Tuskegee, AL 36088-

DATE:09/26/2017  
 FILING REF.: The preceding  
 agreement was dated  
 05/28/2013

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.

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**SECTION I: Facilities And Administrative Cost Rates**

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RATE TYPES:		FIXED	FINAL	PROV. (PROVISIONAL)	PRED. (PREDETERMINED)
<u>EFFECTIVE PERIOD</u>					
<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
PRED.	07/01/2016	06/30/2020	47.00	On-Campus	Organized Research
PRED.	07/01/2016	06/30/2020	23.20	Off-Campus	Organized Research
PRED.	07/01/2016	06/30/2020	60.30	On-Campus	Instruction
PRED.	07/01/2016	06/30/2020	26.00	Off-Campus	Instruction
PRED.	07/01/2016	06/30/2020	27.40	On-Campus	Other Sponsored Activities
PRED.	07/01/2016	06/30/2020	22.70	Off-Campus	Other Sponsored Activities
PROV.	07/01/2020	Until Amended			Use same rates and conditions as those cited for fiscal year ending June 30, 2020.

\*BASE

ORGANIZATION: Tuskegee University

AGREEMENT DATE: 9/26/2017

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Modified total direct costs, consisting of all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

ORGANIZATION: Tuskegee University

AGREEMENT DATE: 9/26/2017

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SECTION II: SPECIAL REMARKS

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TREATMENT OF FRINGE BENEFITS:

The fringe benefits are specifically identified to each employee and are charged individually as direct costs. The directly claimed fringe benefits are listed below.

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.

OFF-CAMPUS DEFINITION: For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s) the off-campus rate will apply. Grants or contracts will not be subject to more than one F&A cost rate. If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.

Fringe Benefits include: FICA, Retirement and Unemployment Compensation. However, Group Insurance and Workers' Compensation applicable to all employees are included in the indirect cost pool.

Equipment means an article of nonexpendable tangible personal property having a useful life of more than one year and an acquisition cost of \$1,500 or more per unit.

The four year extension of the indirect cost rate was granted in accordance with 2 CFR §200.414 (g).

\*A proposal for fiscal year ending 06/30/2019 is due in our office by 12/31/2019.\*

ORGANIZATION: Tuskegee University

AGREEMENT DATE: 9/26/2017

**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:

Tuskegee University

(INSTITUTION)

*Sharon T. Burnett*

(SIGNATURE)

*Sharon T. Burnett*

(NAME)

*CFO*

(TITLE)

*9/29/17*

(DATE)

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

*Darryl W. Mayes -S*  
Digitally signed by Darryl W. Mayes -S  
DN: cn=Darryl W. Mayes -S, ou=HHS, ou=PSC,  
ou=People, ou=2342.15200303.F00.1.1=2000131609,  
ou=Darryl W. Mayes -S  
Date: 2017.09.29 09:42:12 -0500

(SIGNATURE)

*Darryl W. Mayes*

(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

9/26/2017

(DATE) 6896

HHS REPRESENTATIVE: *Lucy Siow*

Telephone: *(301) 492-4855*

## How to register a Grants.gov account for workspace

1. Click the Register link in the top-right corner of the Grants.gov banner.
2. Click the Get Registered Now button on the Register page.
3. Complete the Contact Information and Account Details. All fields with a red asterisk (\*) are required.
  - Email Address: When entering an email address, please keep in mind that all correspondence with Grants.gov will be sent to that email address.
  - Username: Enter a username to log in to Grants.gov. It may only contain alphanumeric characters, question marks, periods, dashes, underscores, and the @ symbol. Your username cannot contain a space, nor can it only include numbers. Select a username you will remember.
  - Password: The password you choose must contain at least eight (8) characters including at least one (1) uppercase letter (A-Z); at least one (1) lowercase letter (a-z); at least one (1) number (0-9); and at least one (1) special character (e.g. ! @ # \$ % ^ & \*). Do not write down your account information.
  - Secret Question/Answer: Enter a question only you would be able to answer and will be able to remember in the future. Do not write down your account information.
4. Select whether to subscribe or unsubscribe from Grants.gov Communications. The Alerts are important messages about time-sensitive or major system changes. The Newsletter features training, system enhancement updates, and other resources to help the federal grants community.
5. Click Continue.
6. Click Send Temporary Code. A message from Grants.gov will be sent to your email account with the temporary code. This Temporary Code will be active for 96 hours only.
7. Enter the code into the Temporary Code field and click Continue.
8. Add an Organization Applicant Profile.
  - Complete the Grants.gov account registration process.
  - Under the How would you like to proceed? heading, select the Add Organization Applicant Profile.
  - Enter the TU DUNS Number: 128214178. UEI Number: U9JCYEXFEEU4
  - Create a profile name that will distinguish this organization profile from any other profiles you may have within your Grants.gov account.
  - Enter your job title for this organization in the Job Title.
  - Click the Save button to complete the profile creation process.
9. OSP staff will be notified of your registration and will add the Manage Workspace Role to your account



To submit proposals to the National Science Foundation (NSF) and conduct other award-related activities using NSF systems, you must have an NSF ID. You may only have one NSF ID. This ID is a unique numerical identifier assigned to users by NSF through the registration process outlined below. The NSF ID is yours for you to use no matter your affiliation(s) in the future. Follow the step-by-step process to create a new NSF account.

### Step 1: Confirm you do not have an existing NSF account

- Access the [NSF ID Lookup](#) page to search for an existing NSF account.
- If you forgot your password for an established NSF account, [click here](#) to retrieve it. Note that your email address can only be associated with one NSF account (i.e., only one NSF ID per person).
- If you do have an existing NSF account and you know your password, you can edit your account profile information by selecting the “**My Profile**” option located on the top right of [Research.gov](#) homepage after signing in. [Click here](#) for detailed information on “**My Profile**” functions.
- If you do not have an existing NSF account, proceed to Step 2.



Figure 1

### Step 2: Access the Account Registration page

- Open [Research.gov](#)
- Click “**Register**” located at the top of the screen. (Figure 1)

Figure 2

### Step 3: Create a new NSF account

- Input the requested account registration information. (Figure 2)

**Important Note:** Your primary email address will be used for NSF account notifications including password resets. Please make sure you have ongoing access to this email account (e.g., a Gmail address). It is critical that you have continued access to this email account, even if you were to ever change organizations.

- Check the box to confirm that you are at least 13 years of age. (Figure 2)
- Click “**Save & Preview.**” (Figure 2)
- Verify that your account registration information is correct on the Preview Account Registration screen. (Figure 3)
- If you need to update your account registration information, select the “**Edit**” button to return to the previous screen.
- Check the box to confirm you are not a robot and click “**Submit.**” (Figure 3)
- You will receive an Account Registration Confirmation on the screen. (Figure 4)
- Check the primary email account that you just used for two messages: one containing your new NSF ID and another containing your temporary password.
- Click “**Sign In**” on [Research.gov](#) and enter your new NSF ID and temporary password. (Figure 1)
- Follow the instructions to change your temporary password.
- You have successfully registered for a new NSF account!

Figure 3

### Step 4: Add a new organization role

- Now that you have an NSF account, you can add organizational roles to your account profile. [Click here](#) for detailed instructions.

Figure 4

**Important Note:** Reviewers, GRFP Applicants, and GRFP Fellows will not add an organizational role. GRFP-specific Account Management training resources including guides and FAQs are available [here](#).