Program Support Center Financial Management Service Divison of Cost Allocation



DEPARTMENT OF HEALTH & HUMAN SERVICES

Room 732 1301 Young Street Dallas, TX 75202 PHONE: (214) 767-3261 FAX: (214) 767-3264

May 14, 2013

Ms. Natalie Krawitz Vice President for Finance and Administration University of Missouri – Columbia 215 University Hall Columbia, MO 65211

The original and one copy of a facilities and administrative cost and fringe benefit Rate Agreement are enclosed. This Agreement reflects an understanding reached between your organization and a member of my staff concerning the rate(s) that may be used to support your claim for facilities and administrative costs on grants and contracts with the Federal Government.

Please have the original signed by an authorized representative of your organization and fax it to me, retaining a copy for your files. Our fax number is (214) 767-3264. We will reproduce and distribute the Agreement to the appropriate awarding organizations of the Federal Government for their use.

The Fixed Fringe Benefit cost rate(s) for the fiscal year ending June 30, 2013 are based on actual costs for the fiscal year ended June 30, 2011. They included the following under-recovered (-) or over-recovered (+) costs:

Medical School Employees: All Other Employees: (\$488,607) Under recovery amount (\$1,771,789) Under recovery amount

The fixed rate(s) for fiscal year ended June 30, 2011 is considered final.

The Fixed Fringe Benefit cost rate(s) for the fiscal year ending June 30, 2014 are based on actual costs for the fiscal year ended June 30, 2012. They included the following under-recovered (-) or over-recovered (+) costs:

Medical School Employees: All Other Employees: \$487,337 Over recovery amount (\$1,911,448) Under recovery amount

The fixed rate(s) for fiscal year ended June 30, 2012 is considered final.

Ms. N. Krawitz May 14, 2013 Page 2 of 2

A Fringe Benefit cost proposal, together with supporting information and the certified audit financial statement, is required each year. Thus, your next Fringe Benefit cost proposal based on actual costs for the fiscal year ending June 30, 2013 is due in our office by December 31, 2013. Your next Facilities and Administrative cost rate proposal based on actual costs for the fiscal year ending June 30, 2015 is due in our office by December 31, 2015.

Since this is an integral part of the negotiation agreement, please note your acceptance by signing in the space provided below of this letter.

Thank you for your cooperation.

Sincerely,

Arif Karin Director

Division of Cost Allocation

Enclosures

<u>ACCEPTANCE</u>

University of Missouri - Columbia

Institution

Signature

Natalie "Nikki" Krawitz

Name

Vice President for Finance & Admin

Title

5/31/2013

Date

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 1436003859B4

ORGANIZATION:

University of Missouri - Columbia

215 University Hall

Columbia, MO 65211-3020

DATE:05/14/2013

FILING REF : The preceding

agreement was dated

07/23/2012

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:	INDIRECT FIXED	COST RATES	PROV.	(PROVISIONAL)	PREĎ.	(PREDETERMINED)

EFFECTIVE PERIOD

			RATE(%) LOCATION	APPLICABLE TO
TYPE PRED.	<u>FROM</u> 07/01/2009	<u>TO</u> 06/30/2012	51.50 On Campus	Organized Research
PRED.	07/01/2009 07/01/2009	06/30/2012 06/30/2012	48.00 On Campus 30.00 On Campus	Instruction Other Spon. Act.
PRED.	07/01/2009 07/01/2012	06/30/2012 06/30/2013	26.00 Off Campus 51.50 On Campus	All Programs Organized Research
PRED.	07/01/2013	06/30/2016	53.50 On Campus	Organized Research
PRED. PRED.	07/01/2012 07/01/2012	06/30/2016 06/30/2016	48.00 On Campus 30.00 On Campus	Instruction Other Spon. Act.
PRED.	07/01/2012 07/01/2016	06/30/2016 Until Amended	26.00 Off Campus "Use same rates and conditions as cited for FYE 6/30/16."	All Programs

ORGANIZATION: University of Missouri - Columbia

AGREEMENT DATE: 5/14/2013

Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first \$25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, student tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of \$25,000.

ORGANIZATION: University of Missouri - Columbia

AGREEMENT DATE: 5/14/2013

	I: FRINGE BEN	EFIT RATES**		
SECTION	I: FRINGE BEI		RATE(%) LOCATION	APPLICABLE TO
<u>TYPE</u> FIXED	<u>FROM</u> 7/1/2012	<u>TO</u> 6/30/2013	22.00 All	Med Sch Employees
FIXED	7/1/2012	6/30/2013	23.00 All	All Oth Employees
FIXED	7/1/2013	6/30/2014	21.60 All	Med Sch Employees
FIXED	7/1/2013	6/30/2014	26.30 All	All Oth Employees
PROV.	7/1/2014	Until amended	"Use same rates and conditions cited for F 6/30/14."	

^{**} DESCRIPTION OF FRINGE BENEFITS RATE BASE: Salaries and wages.

ORGANIZATION: University of Missouri - Columbia

AGREEMENT DATE: 5/14/2013

SECTION II: SPECIAL REMARKS

TREATMENT OF FRINGE BENEFITS:

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. FICA is specifically identified to each employee and is charged individually as direct costs. The fringe benefits included in the rate(s) are listed in the Special Remarks Section of this agreement.

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. Actual costs will be apportioned between oncampus and off-campus components. Each portion will bear the appropriate rate.

FRINGE BENEFITS:

Disability Insurance Worker's Compensation Life Insurance Unemployment Insurance Health Insurance Dental Insurance Retirement Tuition Remission Wellness Program

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.

GANIZATION: University of Missouri -	
REEMENT DATE: 5/14/2013	
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SECTION III: GENERAL	
SECTION III: GENERAL	
. LIMITATIONS: he rates in this Agreement are subject to any statutory or admining the rates in this Agreement only to the extent that funds are averaged or other agreement only to the extent that funds are averaged or other agreement only costs incurred by the organization closes as finally accepted: such costs are legal obligations of the costs as finally accepted; such costs are legal obligations of the principles; (2) The same costs that have been accorded consistent principles; (3) Similar types of costs have been accorded consistent costs; (3) Similar types of costs have been accorded consistent the egganization which was used to establish the rates is not late the egganization which was used to establish the rate (5) would be subjected and government. In such situations the rate(5) would be subjected.	he expanization and are discussed and claimed as direct jes and administrative costs are not claimed as direct jes and administrative costs are not claimed as direct jes and (4) The information provided by the
	to in effect during the Agreement
B. ACCOUNTING CHANGES: This Agreement is based on the accounting system purported by the period. Changes to the method of accounting for costs which affice this Agreement require prior approval of the authorized representable Agreement require prior approval of a particular type are not limited to, changes in the charging of a particular type are not limited to, changes in the charging of a particular type are not limited to, changes in the charging of a particular type are not limited to, changes in the charging of a particular type are not limited to, changes in the charging of a particular type are not limited to, changes in the charging of a particular type.	e of coac trom tacilities and comme
Fallume to obtain app	e of the coace for the period covered by the rate. When the
Failure to obtain approval may wester in Sold to based on an estimat C. FIXED RATES: If a fixed rate is in this Agreement, it is based on an estimat accual costs for this period are determined, an adjustment will accual costs for this period are determined to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs used to establish the fixed rather difference between the costs of the	
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the difference becween the costs used to be accordance with the rates in this Agreement were approved in accordance with the rates in this Agreement were approved in accordance with the rates in this Agreement were approved to the Agreement A above. The organization may provide copies of the Agreement A above. The organization may provide copies of the Agreement and the costs of the C	
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of the Agreement. E. OTHER: If any Federal contract, grant or other agreement is reimbursithe approved rate(s) in this Agreement, the organization shoulthe approved rate(s) to the appropriate base to identify apply the approved rate(s) to the appropriate base to identify	ing facilities and administrate to the afforted programs, and (2) and (1) credit such costs to the afforted programs, and (2) the proper amount of facilities and administrative costs of the proper amount of facilities and administrative costs of the proper amount of facilities and administrative costs.
allocable to these programs.	ON BEHALF OF THE FEDERAL GOVERNMENT:
BY THE INSTITUTION:	DEPARTMENT OF HEALTH AND HUMAN SERVICES
University of Missouri - Columbia	
(INSTITUTION), A	(AGENCY)
Ratalie Kraus	(SIGNATULE)
(SIGNATURE)	
Natalie "Nikli" Krawitz	Arif Karim (NAME)
(NAME)	Director, Division of Cost Allocation
Vice President for Finance: Admin	(%ITLE)
5/31/2013	5/14/2013
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Telephone:

HHS REPRESENTATIVE:

Theodore Foster

(214) 767-3261