# COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 1030179440

DATE:01/19/2018

ORGANIZATION:

FILING REF.: The preceding

agreement was dated

University of Vermont University Financial Services

05/23/2017

352 Waterman Bldq.

85 South Prospect Street Burlington, VT 05405-0160

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 COST RATES

RATE TYPES:

FIXED FINAL

PROV. (PROVISIONAL) PRED. (PREDETERMINED)

# EFFECTIVE PERIOD

TYPE	FROM	TO	RATE(%) LOCATION	APPLICABLE TO
PRED.	07/01/2017	06/30/2021	56.00 On-Campus	Research
PRED.	07/01/2017	06/30/2021	28.00 Off-Campus A	Research
PRED.	07/01/2017	06/30/2021	26.00 Off-Campus B	Research
PRED.	07/01/2017	06/30/2021	33.00 On-Campus	V-CHIP
PRED.	07/01/2017	06/30/2021	26.00 Off-Campus	V-CHIP
PRED.	07/01/2017	06/30/2021	53.00 On-Campus	Exp Station
PRED.	07/01/2017	06/30/2021	16.00 Off-Campus	Exp Station
PRED.	07/01/2017	06/30/2021	38.00 On-Campus	Public Service
PRED.	07/01/2017	06/30/2021	26.00 Off-Campus	Public Service
PRED.	07/01/2017	06/30/2021	25.70 On-Campus	Ext Service
PRED.	07/01/2017	06/30/2021	16.00 Off-Campus	Ext Service
PRED.	07/01/2017	06/30/2021	63.00 On-Campus	Instruction
PRED.	07/01/2017	06/30/2021	26.00 Off-Campus	Instruction

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RATE(%) LOCATION APPLICABLE TO FROM TO TYPE Use same rates 07/01/2021 Until PROV. and conditions Amended as those cited for fiscal year ending June 30, 2021.

## \*BASE

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.

<sup>(</sup>A) Off-Campus Burlington

<sup>(</sup>B) Off-Campus outside Burlington

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SECTION I: FRINGE BENEFIT RATES**					
TYPE	FROM	TO	RATE (%) LOCATION	APPLICABLE TO	
FIXED	7/1/2017	6/30/2018	44.20 All	Regular Employees	
FIXED	7/1/2017	6/30/2018	37.10 All	Ext.Serv.Emplo yee	
FIXED	7/1/2017	6/30/2018	22.60 All	UVM Medical Group	
FIXED	7/1/2017	6/30/2018	12.00 All	Graduate Students	
FIXED	7/1/2017	6/30/2018	10.40 All	Temporary Employees	
FIXED	7/1/2017	6/30/2018	7.70 All	Student Employees	
PROV.	7/1/2018	Until amended	44.20 All	Regular Employees	
PROV.	7/1/2018	Until amended	37.10.All	Ext.Serv.Emplo yee	
PROV.	7/1/2018	Until amended	22.60 All	UVM Medical Group	
PROV.	7/1/2018	Until amended	12.00 All	Graduate Students	
PROV.	7/1/2018	Until amended	10.40 All	Temporary Employees	
PROV.	7/1/2018	Until amended	7.70 All	Student Employees	

<sup>\*\*</sup> DESCRIPTION OF FRINGE BENEFITS RATE BASE:

Salaries and wages.

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#### 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. The fringe benefits included in the rate(s) 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.

<sup>1.</sup> Treatment of Fringe Benefits: The fringe benefit costs listed below are reimbursed to the grantee through the direct fringe benefit rates: FICA, Workmen's Compensation, Unemployment Compensation, Group Life Insurance, Health and Dental Plans, Pensions, Retirement, Early Retirement, Group Disability Insurance, Tuition Remission (Employee only), Administrations and Employee Assistance Program, Sabbaticals and Staff Development.

<sup>2.</sup> Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds \$5,000.

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3. The Instruction Rate is applicable to the Title IV-E Child Welfare Training Partnership. There are two components to this partnership. The first is a degree granting program leading to either a Bachelors or Masters Degree in Social Work. The second component is a Title IV-E training program which involves curriculum development and provides training to state employees and potential foster and adoptive parents.

4. Due to the eligibility of Affordable Care Act Coverage for Temporary Employees, separate FB rates for Temporary Employees and Student Employees were submitted to fix rates effective 07/01/15 - 06/30/16. In previous proposals, these two rates were consolidated under the "Students" Rate. Since the base for the previous "Students" fixed rate primarily consisted of expenses pertaining to Temporary Employees, the CarryForward was used in computing this rate only.

Your next F&A rate proposal based on actual costs for the fiscal year ending 06/30/2020 is due in our office by 12/31/2020.

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## 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 principles; (2) The same 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. <u>ACCOUNTING CHANGES:</u>

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:

BY THE INSTITUTION:

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.

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

University of Vermont University Financial Services

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Distractly W. Distractly signed by Darryt W. Mayes -5
Distractly S. Government, ou=HHS, ou=PSC, ou=People, 0.9.2342.19200300.100.1.1=2000131669, cn=Darryt W. Mayes -5
Date: 2018.01.25 07-55:22-05'00'

(SIGNATURE)

Darryl W. Mayes
(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

1/19/2018
(DATE) 7190

HHS REPRESENTATIVE: Michael Leonard

Telephone: (212) 264-2069