

THE TEXAS A&M UNIVERSITY SYSTEM

Sponsored Research Services

SUBRECIPIENT COMMITMENT FORM

All subrecipients are required to complete this form and return it to the TAMUS Proposal Contact person listed below.

Subrecipi	ent Legal Nam	Alexandre Ricardo Pereira ne:	Schuler	
Subrecipi Investigat Name: Address:	Jose Geraldo A. Pacheco		Subrecipient Sponsored Programs Contact: Name: Address:	
	UFPE, Departamento Eng. Quimica		7 1001 0001	
City: Re	cife S	State: PE	City:	State:
Zip + 4:			Zip + 4:	
Phone:	55-81-212689	997	Phone:	
Fax:			Fax:	
Email:	jose.pacheco	@ufpe.br	Email:	
Subrecipi	ent Total Fund	s Requested:		
Subrecipi	ent Period of F Start: April 1		April 1 2017	
TAMUS F	Proposal Conta	act:	TAMUS F	Principal Investigator:
Name:	Heather Hen	ry	Name:	Mark Holtzapple
Phone:	979-845-6733		Phone:	
Email:	hhenry@tamus.edu		Email:	m-holtzapple@mail.che.tamu.edu
TAMUS Proposal Title: R		Renewable Gasoline from Wa	ste Biomass	
Prime Sponsor		Department of State, Global I	nnovation Initia	ative

Please include the following documents in the subrecipient proposal submission: **STATEMENT OF WORK** (required) BUDGET AND BUDGET JUSTIFICATION (if Grants.gov, 424R&R Subaward budget form required) SUBRECIPIENT COMMITMENT FORM (this form) completed and signed by subrecipient Authorized Organizational Representative (required) **OTHER** Facilities & Administrative Rates included in this proposal have been calculated based on: Our federally-negotiated F&A rates for this type of work, or a reduced F&A rate that we hereby agree to accept. (If this box is checked, please attach a copy of your F&A Rate Agreement) Other rates (please specify the basis on which the rate has been calculated in Section E below Fringe Benefits (FB) Rates included in this proposal have been calculated based on: Rates consistent with or lower than our federally-negotiated rates. (If this box is checked, please attach a copy of your FB Rate Agreement) Other Rates (Please specify the basis on which these rates have been calculated in Section E below SECTION C - SPECIAL REVIEW AND CERTIFICATIONS (check all that apply) **Human Subjects** Yes No 1. If Yes, copies of the IRB approval and approved "Informed Consent" form must be provided before any subrecipient agreement can be issued. Please return the IRB approval and Informed Consent form as an attachment to this form. If pending, please forward these documents to the Subrecipient Negotiator as soon as they become available. Please indicate the TAMUS Principal Investigator's name and subrecipient number for reference. Yes 2. Animal Subjects If Yes, a copy of the IACUC approval must be provided before any subrecipient agreement will be issued. Recombinant DNA and Transgenic Organisms Yes 3. If Yes, a copy of the Institutional Biosafety Committee (IBC) approval must be provided before the subrecipient agreement will be issued. Yes No 4. Cost -sharing Amount:

By signing below, the authorized official of the Subrecipient certifies, to the best of his/her knowledge and belief, that:

(Cost-sharing amounts if applicable, explanation of sources should be included in the subrecipient's budget. Please note that

5. Certification Regarding Lobbying

SECTION B - REQUIRED PROPOSAL DOCUMENTS

- 1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Subrecipient, 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 in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- 2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or intending 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 in connection with this Federal contract, grant, loan, or cooperative agreement, the Subrecipient shall complete and submit Standard Form -LLL, "Disclosure Form to Report Lobbying," to the The Texas A&M University System Office of Sponsored Research Services.

6. Debarment, Suspension, and Other Responsibility Matters

an annual verification of cost-share commitment will be required.)

- 1) Subrecipient certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Subrecipient certifies that it is not delinquent on any Federal debt.

7.		2011 Public Health Service (PHS) Regulations: Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought (42 C.F.R. Part 50, Subpart F) Please note that this is a required certification at the time of the proposal and if this is not provided by the subrecipient they will not be included on the prime proposal.								
		If the proposed PHS application is awarded, the subrecipient agrees to: (check one of the two boxes below).								
[Enter into a subrecipient agreement with TAMU System Member that includes TAMUS regulations (see: 15.01.03 _Financial Conflict of Interest in Research, which applies the requirement to all sponsored research) and citation to federal law (42 C.F.R. Part 50, Subpart F) or;								
[Enter into a subrecipient agreement with TAMUS that certifies subrecipient's policy complies with federal law (42 C.F.R. Part 50, Subpart F). NOTE: All subrecipient applicants for PHS funds must be in compliance at the time of the application submission.								
8.	Conflict of Interest Not applicable because this project is not research (Do not check box if this is a Texas A&M Agr Extension project – Conflict of interest procedures apply to all such projects)									
		1) Mandatory for all TAMUS PHS sponsored research projects								
		Subrecipient hereby certifies that it has an active and enforced conflict of interest policy that complies with applicable federal law. Subrecipient also certifies that, to the best of the Institution's knowledge, (1) all financial disclosures have been made related to the activities that may be funded by or through a resulting agreement, and required by its conflict of interest policy; and, (2) all identified conflicts of interest have or will have been satisfactorily managed, reduced or eliminated in accordance with Subrecipient's conflict of interest policy prior to the expenditures of and funds under any resultant agreement.								
		Subrecipient does not have an active and/or enforced conflict of interest policy and agrees to implement a policy policy that complies with applicable federal law.								
		☐ Subrecipient does not have an active and/or enforced conflict of interest policy and will comply with the Texas A&M System Policy 15.01.03 Financial Conflict of Interest in Research.								
		2) For NSF								
		Subrecipient certifies it is in compliance with the requirement to maintain a written and enforced policy on conflict of interest and complies with Chapter IV.A of the NSF award and Administration guide January 2011.								
9.		esponsible Conduct in Research (RCR) (applicable to NSF and NIH)								
		☐ Not applicable, as this project is not funded by NSF or NIH.								
		Not applicable, non-educational institution								
		By checking this box, Subrecipient certifies, if applicable, that it maintains an Institutional Plan to meet NSF's Educational Requirements for the Responsible Conduct of Research, as required under the "America COMPETES Act" PUBLIC LAW 110-69-August 9, 2007. Subrecipient certifies that it has a training program in place and will train all undergraduate and graduate students and postdocs in accordance with NSF's RCR training requirements.								
		By checking this box, Subrecipient certifies, if applicable, that for NIH Grants for Training and Fellowship awards, that Subrecipient will monitor and maintain records for the individual training plans as proposed by Subrecipient, in accordance with NIH's RCR training requirements.								
SEC	ΙT	ON D – INSTITUTIONAL INFORMATION AND AUDIT INFORMATION								
1.		DUNS Number of Subrecipient receiving award:								
2.		EIN of Subrecipient receiving award:								
3.		Congressional Districts (list one or more):								
A-13	3 /	Audit Status Does the Subrecipient receive an annual audit in accordance with OMB Circular A-133? YES NO								
	Ħ	"Yes": Has the audit been completed for the most recent fiscal year?YESNO Were any audit findings reported?YESNO (If "Yes," explain in Section F, Comments, below.)								

	If "No":	Does the Subrecipient receive overall feder	ral funding of at least \$500,000 per year? YES NO						
		Is the Subrecipient a:							
	Non-profit entity expending less than \$500,000 per year in Federal or Sub-Federal funds annuallyFor-profit entity that expends Federal or Sub-Federal funds and has a DCAA audited rates								
For-profit entity that does not expend Federal funds or have annual audits Foreign entity									
		If a for-profit entity, is the Subrecipient a:							
		Small business Large business							
		•							
	Audit		A-133 audit, OSRS may require the entity to complete an estionnaire, and may require a limited scope audit, before a						
Conta	act infor	mation for audit questions:							
Jose F	Pacheco	55-81-21268997	jose.pacheco@ufpe.br						
Name	;	Phone	Email						
OFOT	ION E	FEATA DEDOCTING							
SECT	ION E –	FFATA REPORTING							
1.	Perfo	rmance site same as address above?	<u> </u>						
	If No,	list performance site address							
2.	revenu		ubrecipient must be reported if: More than 80% of annual gross and those revenues are greater than \$25M annually; compensation porting to the SEC.						
		pt from reporting compensation? proceed with filling out the top 5 paid offi							
	Office	r 1 Name:							
		r 1 Compensation:							
	Office	r 2 Name:							
		r 2 Compensation:							
	Office	r 3 Name:							
		r 3 Compensation:							
	Office	r 4 Name:							
		r 4 Compensation:							
	Office	r 5 Name:							
		r 5 Compensation:							
		o componication.							

If "Yes": Please submit a copy of your institution's most recent audit report, or the Internet URL link to a complete copy.

SECTION G - APPROVED FOR SUBRECIPIENT

The information, certifications, and representations above have been read, signed, and made by an Authorized Organizational Representative of the Subrecipient Organization named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency policies in regard to a subrecipient agreement and are prepared to establish the necessary inter-institutional agreements consistent with those policies.

Any work begun and/or expenses incurred prior to execution of a subrecipient agreement are at the Subrecipient's own risk.

Signature of Subrecipient's Authorized Organizational Representative	Address		
Name and Title of Authorized Institutional Representative	City, State, Zip+4		
Date	Phone		
Fax	E-mail address		