

## **Federal Subrecipient Pre-Award Questionnaire**

When submitting this form to ODOE, please include your **entity's name** and the **federal program name** in the header of every page.

### **Business Assurances and Disclosures**

Please answer the following questions, providing more detail for every "yes" response as needed.

1. Is the Recipient, or any of the Recipient's principals<sup>1</sup>, under investigation for or charged with a covered offense<sup>2</sup>?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

---

---

---

2. Has the Recipient, or any of the Recipient's principals, been convicted of a covered offense in the last five years or had a civil judgment rendered against them for one of those offenses in that time period?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

---

---

---

3. Is the Recipient, or any of the Recipient's principals, under investigation for potential violation of U.S. export control laws and regulations, or has the proposed Subrecipient, or any of the Subrecipient's principals been convicted of any violations of U.S. export control laws and regulations?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

---

<sup>1</sup> For this form, "principal" means: (1) An officer, director, owner, partner, PI, or other person (as defined in 2 C.F.R. 180.95) within the Project Team with management or supervisory responsibilities related to this project and any resulting transaction; or (2) A consultant or other person, whether or not employed by the Recipient, Subrecipient, or their principals, or paid with Federal funds, who (a) is in a position to handle Federal funds, (b) is in a position to influence or control the use of those funds, or (c) occupies a technical or professional position capable of substantially influencing the development or outcome of an activity required to perform the transaction, including but not limited to, any Co-PIs.

<sup>2</sup> For this form, "covered offenses" include: (1) Commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public or private agreement or transaction; (2) Violation of Federal or State antitrust statutes, including those proscribing price fixing between competitors, allocation of customers between competitors, and bid rigging; (3) Commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, receiving stolen property, making false claims, or obstruction of justice; or (4) Commission of any other offense indicating a lack of business integrity or business honesty that seriously and directly affects the Recipient's present responsibility.

- 
- 
- 
4. Is the Recipient under investigation for potential violations of the Drug-Free Workplace Act of 1988, or has the proposed Subrecipient been convicted of any violations of the Drug-Free Workplace Act of 1988?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

- 
- 
- 
5. Is the Recipient, or any of the Recipient's principals, under investigation for research misconduct, or has the Recipient, or any of the Recipient's principals been convicted of research misconduct?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

- 
- 
- 
6. Has any Federal agency recommended or initiated proceedings against the Recipient, or any of the Recipient's principals for suspension or debarment, or is the Recipient, or any of the Recipient's principals debarred, suspended, publicly banned from doing business with the Federal government, or otherwise declared ineligible from receiving Federal contracts, subcontracts or financial assistance?

☐ YES ☐ NO

- a. If yes, please provide a detailed explanation.

---

---

---

### **Annual Audit**

As required by 2 CFR 200 Subpart F, non-federal entities that expend \$750,000<sup>3</sup> or more during the non-federal entity's fiscal year in federal awards must have a single or program-specific audit conducted. The subrecipient must comply with the annual independent audit requirements in 2 CFR 200.501. Please indicate whether your organization has had a single audit conducted.

☐ YES ☐ NO

If yes, please include a copy of the most recent audit as an attachment. If no, please provide an explanation as to why, including if your organization is not required to comply with the annual audit.

---

<sup>3</sup> \$1,000,000 or more for subrecipients who are party to a federal award made to ODOE on or after October 1, 2024. The lower threshold applies to all subawards through a federal award that was executed with ODOE prior to October 1, 2024, regardless if the subgrant agreement is executed on or after October 1, 2024.

---

---

---

### **Executive Compensation**

Please answer the following questions. If answers are “yes” to #1 and #2, please proceed to the question #3. If the answers are “no” you can disregard question #3.

1. In the preceding fiscal year, has your organization received:
  - a. 80 percent or more of the Recipient’s annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); **and**
  - b. \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards)?  
☐YES ☐NO
  
2. Does the public have access to information about the compensation of your executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation information filings at <https://www.sec.gov/answers/execomp.htm>)?  
☐YES ☐NO
  
3. If answered “yes” to both #1 and #2, please provide the names and total compensation of each of your entity’s five most highly compensated executives for your preceding completed fiscal year.
  - a. Name: \_\_\_\_\_ Total Compensation \_\_\_\_\_
  - b. Name: \_\_\_\_\_ Total Compensation \_\_\_\_\_
  - c. Name: \_\_\_\_\_ Total Compensation \_\_\_\_\_
  - d. Name: \_\_\_\_\_ Total Compensation \_\_\_\_\_
  - e. Name: \_\_\_\_\_ Total Compensation \_\_\_\_\_

### **Risk Assessment**

Please answer the following questions as part of ODOE’s risk assessment when managing federal funding, as required under 2 CFR 200.

1. What type of accounting system do you use?  
☐automated ☐manual ☐a combination
2. Has your organization previously received a direct federal award or subaward in the last ten years?  
☐YES ☐NO
  - a. If yes, did you adhere to all terms and conditions of prior grant awards?  
☐YES ☐NO

3. Do you have adequate and qualified staff to comply with the terms of a performance agreement with ODOE including the federal provisions?  
☐YES ☐NO
4. Do you have prior experience with similar programs?  
☐YES ☐NO
5. Do you maintain policies, including procedures for assuring compliance with the terms of the performance agreement?  
☐YES ☐NO
6. Do you have an accounting system that will allow you to completely and accurately track the receipt and disbursements of funds related to the performance agreement?  
☐YES ☐NO
7. For the personnel positions listed in the project budget justification, do you have a system in place that will account for 100% of each employee's time?  
☐YES ☐NO
8. Did your key staff members attend the required federal training and meetings during prior grant awards?  
☐YES ☐NO
9. Did your key staff members respond to requests timely during prior grant awards?  
☐YES ☐NO
10. Did you have one or more audit findings in your last audit related to federal funding, regarding program non-compliance?  
☐YES ☐NO
11. Did you have one or more audit findings in your last audit related to federal funding regarding significant internal control deficiency?  
☐YES ☐NO
12. Were you audited by the federal government in the prior year(s)?  
☐YES ☐NO
  - a. If yes, did the audit result in one or more audit findings?  
☐YES ☐NO
13. Do you have new or substantially changed systems or software packages, i.e. accounting, payroll, reporting, technology, administration?  
☐YES ☐NO
14. Have you had significant turnover in personnel, i.e. business, grant management, program?  
☐YES ☐NO
15. Do you have external risks to grant compliance including: economic conditions, political conditions, regulatory changes & unreliable information?  
☐YES ☐NO
16. Have you lost any licenses or accreditations to operate your programs?  
☐YES ☐NO
17. Do you have significant new activities, products, or services?  
☐YES ☐NO
18. Has your organization experienced recent organizational restructuring?

☐YES ☐NO

19. Were performance reports submitted timely for prior grant awards?

☐YES ☐NO

20. Was reasonable progress made towards performance goals for prior grant awards?

☐YES ☐NO

21. Were financial reports submitted timely for prior grant awards?

☐YES ☐NO

22. Were financial reports accurate for prior grant awards?

☐YES ☐NO

23. Did you stay on budget in prior years?

☐YES ☐NO

### **Certification**

I, the Authorized Official named below, represent by my signature that I am authorized to certify this information on behalf of the subrecipient. I certify under penalty of perjury that the information contained in this form is true, accurate and complete. I understand that false, fictitious, or fraudulent information, misrepresentations, half-truths, or omissions of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims or others. (18 U.S.C. §§ 1001 and 287, and 31 U.S.C. 3729-.730 and 3801-.3812). I further understand and agree that (1) the statements and representations made herein are material to ODOE's funding decisions, and (2) I have a responsibility to update the disclosures during the period of performance of the award should circumstances change which impact the responses provided above.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date