

ORIGINAL

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 1160743209A1

DATE: 03/17/2011

ORGANIZATION:

FILING REF.: The preceding agreement was dated 03/01/2010

University of Rochester
206 Wallis Hall RC Box 270026
Rochester, NY 14620-

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

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
PRED.	07/01/2010	06/30/2011	53.00	On-Campus	Research
PRED.	07/01/2011	06/30/2012	54.50	On-Campus	Research
PRED.	07/01/2010	06/30/2012	26.60	Off-Campus	Research
PRED.	07/01/2010	06/30/2012	33.50	On-Campus	Oth. Spons. Act.
PRED.	07/01/2010	06/30/2012	24.80	Off-Campus	Oth. Spons. Act.
PROV.	07/01/2012	Until Amended			Use the same rates and conditions as those cited for the fiscal year ending June 30, 2012.

*BASE

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 Rochester

AGREEMENT DATE: 03/17/2011

SECTION I: FRINGE BENEFIT RATES**

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FIXED	7/1/2010	6/30/2011	27.70	All A, B	F/T Fac. Senior Adm
FIXED	7/1/2010	6/30/2011	32.00	All B	Prof Adm & Sup&Secr
FIXED	7/1/2010	6/30/2011	10.80	All	Visit Fac & TAR
FIXED	7/1/2010	6/30/2011	23.60	All	PD, Int&Res, Ins tr&Fel
FIXED	7/1/2010	6/30/2011	49.90	All B	Union-1199 Barg Unit
FIXED	7/1/2010	6/30/2011	12.90	All	Summer Compensation
FIXED	7/1/2011	6/30/2012	29.20	All A, B	F/T Fac. Senior Adm
FIXED	7/1/2011	6/30/2012	34.30	All B	Prof Adm & Sup&Secr
FIXED	7/1/2011	6/30/2012	10.50	All	Visit Fac & TAR
FIXED	7/1/2011	6/30/2012	24.20	All	PD, Int&Res, Ins tr&Fel
FIXED	7/1/2011	6/30/2012	54.40	All B	Union-1199 Barg Unit
FIXED	7/1/2011	6/30/2012	11.20	All	Summer Compensation
PROV.	7/1/2012	Until amended	28.20	All A, B	F/T Fac. Senior Adm
PROV.	7/1/2012	Until amended	33.20	All B	Prof Adm & Sup&Secr
PROV.	7/1/2012	Until amended	10.40	All	Visit Fac & TAR
PROV.	7/1/2012	Until amended	25.10	All	PD, Int&Res, Ins tr&Fel
PROV.	7/1/2012	Until amended	55.20	All B	Union-1199 barg Unit

PROV.	7/1/2012	Until amended	12.60 All	Summer Compensation
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** DESCRIPTION OF FRINGE BENEFITS RATE BASE:

- (A) See Special Remarks - 4, 5
- (B) See Special Remarks - 6

ORGANIZATION: University of Rochester

AGREEMENT DATE: 03/17/2011

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.

1. The rates in this Agreement have been negotiated to reflect the administrative cap provisions of the revisions to OMB Circular A-21 published by the Office of Management and Budget on May 8, 1996. No rate affecting the institution's fiscal period beginning on or after October 1, 1991 contains total administrative cost components in excess of that 26 percent cap.

2. Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$1,000 or more per unit.

3. The Off-Site rate applies when the preponderance of the effort occurs Off-Campus for a continuous period of more than thirty (30) days.

100,800

4. Institution has a decreasing rate structure for salaries above \$206,000 on file in their office which is not published as part of this agreement. The approved rate structure list can be accessed at: <http://www.rochester.edu/ORPA/PropInfo/fy10bene.htm>

vs

fy11 bene.htm

5. The fringe benefit costs listed below are reimbursed to the grantee through the direct fringe benefit rate:
Pension/Annuities, Health and Dental Insurance, Disability Insurance, Tuition Aid/Reimbursement (see Item 6), Travel Insurance, Social Security Taxes (FICA), Separation/Vacation Pay, Workers Compensation, Other Compensation, Faculty Early Retirement, Employees Assistance Program, Retirees Health/Dental Coverage, Staff Benefits Admin, Life Insurance, Family Care Program, NURHCE Union Benefits, Extended Sick Pay, Occupational Health, Env. Health and Safety, and Leave of Absence.

6. Effective 7/1/99, Tuition Support for dependents of University of Rochester employees is no longer an allowable fringe benefit expense and is not included in the approved rates.

ORGANIZATION: University of Rochester

AGREEMENT DATE: 03/17/2011

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 purposed 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 Office of Management and Budget Circular A-21 Circular, and should be applied to grants, contracts and other agreements covered by this Circular, 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:

University of Rochester

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

Holly G. Crawford

Holly G. Crawford

Asst. V.P. Budgets & Planning

3/23/11

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

(SIGNATURE)

Robert J. Aaronson

(NAME)

Director, Northeastern Field Office

(TITLE)

3/17/2011

(DATE) 0943

HHS REPRESENTATIVE:

Michael Leonard

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