

1990

RATE AGREEMENT  
COLLEGES AND UNIVERSITIES

University of Arizona  
Babcock Building No. 3313  
Tucson, AZ 85721

DATE: May 18, 1989  
FILING REF.: The preced-  
ing Agreement was dated:

January 6, 1989

The rates approved in this Agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions contained in Section II.

SECTION I: RATES

<u>Type</u>	<u>Effective Period</u>		<u>Rate</u>	<u>Locations</u>	<u>Applicable To</u>
	<u>From</u>	<u>To</u>			
<u>INDIRECT COST RATES*</u>					
Predetermined	7/1/89	6/30/90	48.4%	On-Campus	Research
Predetermined	7/1/89	6/30/90	25.0%	Off-Campus	Research
Predetermined	7/1/89	6/30/90	55.5%	On-Campus	Instruction
Predetermined	7/1/89	6/30/90	34.2%	Off-Campus	Instruction
Predetermined	7/1/89	6/30/90	43.7%	On-Campus	Public Service
Predetermined	7/1/89	6/30/90	25.0%	Off-Campus	Public Service
Predetermined	7/1/90	6/30/91	49.0%	On-Campus	Research
Predetermined	7/1/90	6/30/91	25.0%	Off-Campus	Research
Predetermined	7/1/90	6/30/91	55.6%	On-Campus	Instruction
Predetermined	7/1/90	6/30/91	34.2%	Off-Campus	Instruction
Predetermined	7/1/90	6/30/91	43.6%	On-Campus	Public Service
Predetermined	7/1/90	6/30/91	25.0%	Off-Campus	Public Service

\*BASE: Total direct costs less expenditures for:

- 1) capital items (e.g. alterations, renovations and equipment);
- 2) that portion over \$25,000 of each sub-award with third parties and that portion over \$25,000 of each modification(s) to the sub-award which provides for additional work and increases funding;
- 3) hospitalization and other fees associated with patient care whether obtained from a related or third party;
- 4) rental/maintenance cost of off-campus space; and
- 5) tuition remission, and participant support costs (i.e. stipends, dependency allowances, scholarships and fellowships).

Treatment of Paid Absences

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are charged to Federal projects as part of the normal charge for salaries and wages. Separate charges for the cost of these absences are not made.

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### Treatment of Other Fringe Benefits

This organization uses a fringe benefit rate which is applied to salaries and wages for both budgeting and charging purposes for Federal projects. The following fringe benefits are included in the fringe benefit rate: FICA, Retirement, Worker's Compensation, Unemployment Compensation, Health, Accident, Life, and Disability Insurance (HALD), and Liability Insurance.

### Fringe Benefit Rates

The following fringe benefit rates will be fixed with carryforward for the period July 1, 1989 through June 30, 1990 and should be used for budgeting and claiming reimbursement of fringe benefits.

Faculty-Regular	18.3%
Faculty-Clinical	10.6%
Faculty-Ancillary	14.3%
Classified-Regular	23.2%
Classified-Temporary	11.7%
Student Employees	1.2%
Federal Employees	25.3%

Institution: University of Arizona

SECTION II: 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 institution were included in its indirect cost pool as finally accepted; such costs are legal obligations of the institution and are allowable under the governing cost principles; (2) The same costs that have been treated as indirect 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 institution which was used to establish the rates is not later found to be materially incomplete or inaccurate.

B. ACCOUNTING CHANGES: If a fixed or predetermined rate is in this Agreement, it is based on the accounting system purported by the institution 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 the 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 indirect 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-88, and should be applied to grants, contracts and other agreements covered by Office of Management and Budget Circular A-21, subject to any limitations in A above. The institution may provide copies of the Agreement to other Federal agencies to give them early notification of the Agreement.

E. SPECIAL REMARKS:

Off-Campus Definition and Application

The off-campus rate is applicable to those projects that are conducted in facilities not owned or operated by the University and/or where the operations and maintenance type costs are charged directly to a project. A project is considered off-campus if more than 50% of the project expenditures are related to the off-campus activity and University space is not available. If a project is judged to be off-campus, it shall be considered wholly off-campus. Separate on and off-campus rates will not be used for a single project.

BY THE INSTITUTION:

UNIVERSITY OF ARIZONA  
(INSTITUTION)

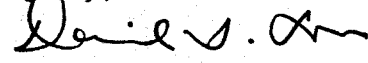
  
(Signature)

Bert G. Landau  
(Name)

Assoc Vice President for Finance &  
(Title) Controller

June 8, 1989  
(Date)

BY THE COGNIZANT AGENCY ON  
BEHALF OF THE FEDERAL GOVERNMENT:  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
(Agency)

  
(Signature)

David S. Low  
(Name)

Director, Division of Cost Allocation  
(Title)

MAY 18 1989  
(Date)

HHS Representative Jean Chui  
Telephone (415) 556-1704