### **COLLEGES AND UNIVERSITIES RATE AGREEMENT**

EIN: 1135562309A1

ORGANIZATION:

New York University School of Medicine

1 Park Avenue - 11th Floor

New York, NY 10016

Date: 08/16/2023

FILING REF.: The preceding

agreement was dated

09/19/2022

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 T\	PES: FIXE	D FINAL	) FINAL PROV. (PROVISIONAL)		PRED. (PREDETERMINED)	
	EFFECTIVE I	PERIOD				
TYPE	FROM	<u>TO</u>	RATE(%)	LOCATION	APPLICABLE TO	
PRED.	09/01/2022	08/31/20	69.50	On-Site	Research (1)	
PRED.	09/01/2022	08/31/20	23 40.00	On-Site	Other Sponsored Activities	
PRED.	09/01/2023	08/31/20	25 41.00	On-Site	Other Sponsored Activities	
PRED.	09/01/2022	08/31/20	38.00	VA Hospital 5	Research	
PRED.	09/01/2022	08/31/20	26.00	Off-Site	Research & OSA	
PROV.	09/01/2025	Until Ame	nded		Use same rates and conditions as those cited for fiscal year ending August 31, 2025.	

### \*BASE

Total direct costs excluding capital expenditures (buildings, individual items of equipment; alterations and renovations), that portion of each subaward in excess of \$25,000; hospitalization and other fees associated with patient care whether the services are obtained from an owned, related or third party hospital or other medical facility; rental/maintenance of off-site activities; student tuition remission and student support costs (e.g., student aid, stipends, dependency allowances, scholarships, fellowships).

<sup>(1)</sup> See Special Remarks #3.

ORGANIZATION: New York University School of Medicine

AGREEMENT DATE: 08/16/2023

# **SECTION I: FRINGE BENEFIT RATES\*\***

<b>TYPE</b>	<u>FROM</u>	TO	<u>RATE(%)</u>	<b>LOCATION</b>	APPLICABLE TO
FIXED	9/1/2022	8/31/2023	32.80	All	All Employees
FIXED	9/1/2023	8/31/2024	34.20	All	All Employees
PROV.	9/1/2024	Until Amended	34.20	All	All Employees

## \*\* DESCRIPTION OF FRINGE BENEFITS RATE BASE:

Salaries and wages.

## **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 fringe benefit costs below are reimbursed to the grantee through the direct fringe benefit rate: Pension, FICA, Hospitalization Plans, Major Medical, Health Insurance, Dental, Prescription Drugs Plan-FPO, Workmen's Compensation, Employee Health Service, Faculty Retirement Costs, D1199 Training Funds, Group Life Insurance, NYS Unemployment, NYS Disability, Long Term Disability, Tuition Remission (Employee only), Union Welfare, Human Resources-Emp. Benefits and Hospitalization-Self Insurance (1P/OP).
- 2. Effective 09/01/2020, 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.
- 3. For all activities performed in facilities not owned by the organization and to which rent is directly allocated to the project, the off-site rate will apply. Grants or contracts will not be subject to more than one indirect cost rate. If more than 50% of a project is performed off-site, the off-site rate will apply to the entire project.
- 4. This rate is applicable to grants and contracts awarded to NYU Grossman School of Medicine for F&A costs for the performance of work activity at the Manhattan VA Medical Center VA NY Harbor Health Care System located at 423 east 23rd Street New York, NY.
- 5. The next fringe benefit rate proposal based on fiscal year ending 08/31/2023 actual costs is due by 02/28/2024.
- 6. The next F&A cost rate proposal based on fiscal year ending 08/31/2024 actual costs is due by 02/28/2025.
- 7. This rate agreement updates fringe benefit rates only.

ORGANIZATION: New York University School of Medicine

AGREEMENT DATE: 08/16/2023

### 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 indirect cost pool 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 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 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 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 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 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:

If any Federal contract, grant or other agreement is reimbursing indirect 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 indirect costs allocable to these programs.

BY THE INSTITUTION:	ON BEHALF OF THE GOVERNMENT:
New York University School of Medicine	DEPARTMENT OF HEALTH AND HUMAN SERVICES
(INSTITUTION)	(AGENCY) Darryl W. Mayes - 5 DN: C-US, o-US. Government, ou-HHS, ou-PSC, ou-People, 09.2342,19200300.100.1.1=2000131669, cn=DarlyW. Mayes - 5 Date: 2023.10.27 09.81641 - 0-1000
(SIGNATURE)	(SIGNATURE)
Daniel Widawsky	Darryl W. Mayes
(NAME)	(NAME)
(TITLE)	Deputy Director, Cost Allocation Services (TITLE)
(IIIE)	(TITLE)
(DATE) 1) 1 2023	<u>08/16/2023</u> (DATE)
	HHS REPRESENTATIVE: Ryan McCarthy
	TELEPHONE: (212) 264-2069