## COLLEGE OF ARTS AND SCIENCES **AWARD NOTICE CHECKLIST:** 1. Review completed ACF (Award Checklist Form) and CAS (Cost Accounting Standard Disclosure Form if Federal Award), and submit with your approval to Sponsored Programs, grntmgmt@louisville.edu and cc: Roberta Brock roberta.brock@louisville.edu along with any compliance approvals, i.e IRB approval 2. When Budget has been loaded and you receive the UBM-13 - review all information for accuracy (see UBM-13 Checklist.) 3. REPLY to the Award Summary notification email, that you approve the budget loaded. Until you respond and all compliance approvals are submitted to SPA, your grant funds will not be available for spending. 4. Revise your PCF to include names and signatures of all personnel on original PCF "TBN." Additional Note: Any change in personnel from the original PCF requires a signed PCF signature page for each individual to be submitted to SPA, this includes GRAs, Lab Personnel and Post Docs. For hourly undergraduates paid from your grant, a a signed PCF is not required, HOWEVER, a list of undergraduate names and ids identifying them as committing effort on your grant needs to be sent to SPA and updated as it changes. 5 Review your sponsor's guidelines for reporting deadlines, and record on your calendar as a reminder. 6. Revise your AWP (Annual Work Plan) to include this new grant

The revised AWP should be done within the same week that the grant budget is loaded

	NEW GRANT AWARDS CHECKLIST. You will need the signed PCF and the Actual Award Notice from the sponsor. IF you are not receiving these from SPA, contact Roberta Brock to begin receiving all that involve your department. PRINT UBM-13A	7/1/2017
Find these numbers on Sample UBM-13A	REMINDER: ASK QUESTIONS IF YOU DO NOT UNDERSTAND.  Diane Penrod, Jon Schmidt, Cary Chernov A&S Research Office - Roberta Brock, Grant Mgmt.  Specialist, Gail Wilmes, Grant Mgmt. Accountant - SPA	Checked
1	Check to see if there is a Cost Share speed type and Chartfield speed type. Verify Dept ID# for both. Find out what the Cost Share budget entails, details found on PCF, detailed budgets and sponsor's award notice. PCF # will be the same as the grant numbers.	
2	Check PI Name and Award Dept ID for accuracy, it should be the same as the Dept ID in # 1, and the name of your department should be the PI's (Principal Investigator's) home department	
3	Verify that the PIRIF speed types, names and individual % collaboration are correct based on the signed PCF. Total has to be 100% for all individuals named.	
4	Verify Begin Date and End Date from the Sponsor's Award Notice.	
5	Verify Department (s) RIF Speed type(s) are correct for Department RIF(s).	
6	Verify F&A percentage is keyed into this position on the UBM-13A form or F&A will not calculate, and verify that it is the correct F&A % from the PCF and Sponsor Award Summary.	
7	Check that Sponsor's Budget and Cost Share Budget are loaded accurately, based on Sponsor Award Notice and PI's instructions to SPGA.	
RECONS	Reconcile grants monthly. Check that all expenses are accurate and allowable. Check the monthly F&A calculation. Compare Cash balances and A/R balances from previous month to ensure that Sponsor invoicing is being done in a timely manner (Use UBM-14 to check.) Make sure Direct budgets and Indirect budgets are <b>NOT</b> overspent, check Category balances each month during reconciliation. Communicate with PI. Reconciler and PI must sign and date reconcilation each month.	
CLOSING	Watch category balances so that overspending does not occur. All expenses must have occurred prior to end date of grant. It is best to get all expenses posted within 30 days of the end date of the grant. Make sure all Cost Share entries have occurred, including transferring of funds for each Fiscal Year that Cost Share is committed. Check that all invoicing is completed to the sponsor following the guidelines of the sponsor's award notices. Watch for sponsor payments, if they do not occur within 30 days of Final Financial Report being submitted to sponsor, contact your SPFA accountant to resolve. If no deficit in either Direct or Indirects, Cash and A/R have zero balances, contact your SPFA accountant to close and deactivate grant.	

CONFIDENTIALITY NOTICE - The information provided in these reports is of a confidential nature and should be used for the sole purpose of tracking and reconciling programs, projects/grants, and assets in your specific area of responsibility at the University. Misuse of this information or the inappropriate distribution of confidential data can result in sanctions, ranging from reprimand to dismissal, by the University.

responsibility at the University. Misures result in sanction	ns, ranging from rep	orimand to dismi	ssal, by the Univer	sity.	
UBM-13A SAMPLE	AWARD SUMMARY for internal University use only			Data Date: 8/12/2013 Page 1 of 2	
	re Speedtype: CS08 <sup>o</sup> d Speedtype: GB08 <sup>o</sup>		4000102 4000102		
PI Name:	2				
Award Dept ID: 2824000102 A&S Ps	sychology		3		
Award Sponsor: National Institutes of F	Health	Individual RIF	: Speedtype PI/C	Co-PI Name % Collab	
Sponsor Reference #: 4R37HD029957-	-17		R5281	100.00	
Flowthrough Sponsor:					
Title: Early Development with Williams	or Down Syndrome				
	ALC: A CONTRACTOR OF THE PARTY				
	07/31/2014	-			
Award Type: Grant Purpose: I	Research				
Field of Science: G1 CFDA Num	nber: 93.865		5		
Allow Overdraft: Project Amount	to Date: 2,269,651.	14	5		
F&A Type: OR-ON F&A Base ID: MTI	DC F&A %: 48.00	Department	: <u>RIF</u> : <u>SpeedType</u> <u>Proje</u>	ct Department % Collab	
			AND DESCRIPTION OF THE PROPERTY OF	Psychology 100.00	
Location: BELKNAP Belknap Campus				, =, =, =, =, =, =, =, =, =, =, =, =, =,	
Budget Period 1	6	1 · · · · · · · · · · · · · · · · · · ·			
Category		Sponsor	<b>Cost Share</b>		
FACADM		229,074.14	0.00		
FRINGE	7	59,504.00	4,699.00		
SALARY SUPL		290,594.00 91,432.00	16,488.00		
TRAVEL		32,404.00	0.00		
TUITIO		3,304.00	0.00		
E	Budget Period Total:	706,312.14	21,187.00		
Budget Period 2					
Category		Sponsor	Cost Share		
FACADM		122,365.00	0.00		
FRINGE		33,164.00	1,387.00	-	
SALARY TRAVEL		216,764.00 5,000.00	15,763.00 0.00	EACH YEAR's Awards	
	Budget Period Total:	377,293.00	17,150.00	Needs to be	
Budget Period 3			.,	Verified with Sponsor	
Category		Sponsor	Cost Share	Award Notice.	
FACADM		121,141.00	0.00	1	
FRINGE		26,605.00	3,225.00	-	
SALARY	D	225,776.00	16,453.00		
	Budget Period Total:	373,522.00	19,678.00		
Budget Period 4			Cost Charre	1/	
Category		Sponsor	Cost Share	Va.	
FACADM		121,710.00	0.00		

38,354.00

3,800.00

**FRINGE**