

WELCOME

Essentials of Research Administration (ERA)



International Two Elective

June 16, 2015

Office of Sponsored Programs (OSP) International Session

Complex Budgeting

USAID – Burundi Budget

Jan 2015-Dec 2017 (rates reflective of Spring 2014)



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Salary

2015-2017, Location: Burundi, Bujumbura

COST	UNIT	YEAR 1				YEAR 2				YEAR 3				TOTAL
		LOE	UNIT #	UNIT \$	TOTAL	LOE	UNIT #	UNIT \$	TOTAL	LOE	UNIT #	UNIT \$	TOTAL	
A. SALARY														
MSU Personnel (Salaries, all AN)	Annual salary		Months				Months				Months			
MSU Program Director	\$105,000	0.10	12	\$10,500		0.10	12	\$10,815		0.10	12	\$11,139		\$32,454
MSU Chief of Party	\$134,060	1.00	12	\$134,060		1.00	12	\$138,082		1.00	12	\$142,224		\$414,366
Key Personnel 1	\$85,000	0.10	8	\$5,667		0.20	8	\$11,673		0.10	8	\$6,012		\$23,352
Key Personnel 2	\$82,000	0.10	6	\$4,100		0.10	6	\$4,223		0.10	6	\$4,350		\$12,673
Project Administrator	\$57,000	0.25	12	\$14,250		0.25	12	\$14,678		0.25	12	\$15,118		\$44,045
Graduate Assistant (1/2 time)	\$17,055	1.00	12	\$17,055		1.00	12	\$17,567		1.00	12	\$18,094		\$52,715
Graduate Assistant (1/2 time)	\$18,120	1.00	12	\$18,120		1.00	12	\$18,664		1.00	12	\$19,224		\$56,007
MSU STTA (Short Term Technical Assistance)			Days	Daily Rate			Days	Daily Rate			Days	Daily Rate		
Faculty 1 (AY)	\$71,600	1.00	9	\$381	\$3,428	1.00	26	\$392	\$10,199	1.00	8	\$404	\$3,232	\$16,859
Faculty 2 (AY)	\$87,650	1.00	6	\$466	\$2,797	1.00	15	\$480	\$7,203	1.00	22	\$495	\$10,882	\$20,882
Faculty 3 (AN)	\$99,000	1.00	22	\$432	\$9,511	1.00	10	\$445	\$4,453	1.00	0	\$459	\$0	\$13,964
TOTAL SALARY					\$219,488				\$237,556				\$230,274	\$687,318

Salary Costs

- Salary costs for MSU faculty and staff calculated using % or effort level (unless requested differently, e.g. “daily rate”)
- STTA (Short-term Technical Assistance) are normally doing work in the field; Salaries are based on a “daily rate”.
- Daily rates for MSU faculty and academic staff based on:
 - 188 days for AY appointments
 - 229 days for AN appointments
- Daily rates for MSU staff based on 260 days.



Daily Rate Memo Provided by OSP

CERTIFICATION OF WORK-DAY, WORK-WEEK, AND PAID ABSENCES

Solicitation:

Firm: Michigan State University

Section B.8

MSU faculty do not have a standard 8-hour per day/40-hour per week Work-Day or Work-Week. Therefore, faculty may work more or less hours each week. OMB Circular A-21 requires MSU to report faculty time on an after the fact "Level Effort" reporting system following the completion of each semester.

In this case, however, the following method is used for fixed price contracts requiring a fixed daily rate for faculty.

The unburdened Work-Year for Annual Year faculty appointments is 1,832 hours (229 days) which is equivalent to: 2,080 hours or 260 days – 22 vacation days – 9 holidays = **229 days**.

The unburdened Work-Year for Academic Year (9 months) faculty appointments is 1,504 hours (188 days) which is equivalent to: 1,560 hours or 195 days – 7 holidays = **188 days**.

The hours reflected above are provided for comparison purposes only. MSU does not maintain documentation of hours worked for its faculty and staff, with the exception of undergraduate students, but rather maintains documentation to support time expended on federal projects based on percentages of effort worked. This documentation is maintained in accordance with OMB Circular A-21, FAR 31.3.




Fringes

B. FRINGE BENEFITS AND ALLOWANCES

MSU Program Director	Percent	31.84%	\$10,500	\$3,343	32.20%	\$10,815	\$3,482	32.57%	\$11,139	\$3,628	\$10,454
MSU Chief of Party	Percent	28.14%	\$134,060	\$37,724	28.42%	\$138,082	\$39,243	28.71%	\$142,224	\$40,833	\$117,800
Key Personnel 1	Percent	34.71%	\$5,667	\$1,967	35.16%	\$11,673	\$4,104	35.61%	\$6,012	\$2,141	\$8,212
Key Personnel 2	Percent	35.26%	\$4,100	\$1,446	35.72%	\$4,223	\$1,508	36.20%	\$4,350	\$1,575	\$4,529
Project Administrator	Percent	42.11%	\$14,250	\$6,001	42.77%	\$14,678	\$6,278	43.45%	\$15,118	\$6,569	\$18,847
Graduate Assistant (Health Benefits)	Semester			\$2,881			\$3,111			\$3,360	\$9,353
Graduate Assistant (Health Benefits)	Semester			\$2,881			\$3,111			\$3,360	\$9,353
STTA Faculty 1	Percent	37.53%	\$3,428	\$1,286	38.06%	\$10,199	\$3,882	38.60%	\$3,232	\$1,248	\$6,416
STTA Faculty 2	Percent	34.26%	\$2,797	\$958	34.69%	\$7,203	\$2,499	35.13%	\$10,882	\$3,823	\$7,280
STTA Faculty 3	Percent	32.58%	\$9,511	\$3,099	32.96%	\$4,453	\$1,468	33.35%	\$0	\$0	\$4,566
TOTAL FRINGE BENEFITS				\$61,586			\$68,687			\$66,536	\$196,809
COP Cost of Living Allowance (3-person family)		20.00%	\$52,700	\$10,540	20.00%	\$52,700	\$10,540	20.00%	\$52,700	\$10,540	\$31,620
COP Post Allowance		25.00%	\$134,060	\$33,515	25.00%	\$138,082	\$34,520	25.00%	\$142,224	\$35,556	\$103,592
COP LQA (Living Quarters Allowance)				\$17,500			\$17,500			\$17,500	\$52,500
COP Temporary Quarters Allowance				\$2,000			\$0			\$0	\$2,000
COP Education Allowance (2nd grade, away from post)				\$57,150			\$57,150			\$57,150	\$171,450
COP Danger Pay		5.00%	\$134,060	\$6,703	5.00%	\$138,082	\$6,904	5.00%	\$142,224	\$7,111	\$20,718
STTA and MSU faculty Danger Pay		5.00%	\$36,003	\$1,800	5.00%	\$48,567	\$2,428	5.00%	\$35,615	\$1,781	\$6,009
TOTAL ALLOWANCES				\$129,208			\$129,043			\$129,638	\$387,889


DOS Website - Allowances

Allowances



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Allowances by Location

Country: BURUNDI
Rates Effective: 05/04/2014

Previous Rates:

Post Name	Cost of Living Allowance % of Spendable Income	Post (Hardship) Differential % of Basic Compensation	Transfer Zone (DSSR 242)	Footnote	Danger Pay % of Basic Compensation	Education Allowance	Living Quarters Allowance	Reporting Schedule
Bujumbura	20	25	3	View	5	View	View	View
Other	20	25	3	View	5	View	View	View

Basic Compensation (DSSR 040K)

[Spendable Income Table](#)

[Select by Location](#)

[Select by Allowance Type](#)

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Cost of Living Allowance (COLA)



Q: What is COLA?

COLA is designed to offset the higher overseas prices of non-housing goods and services. Overseas COLA is intended to equalize purchasing power so that expats can purchase the same level of goods and services overseas as they could if they were stationed in CONUS (Continental United States).

Spendable Income Table

ANNUAL SPENDABLE INCOME BY SALARY AND FAMILY SIZE
(EFFECTIVE 1-26-14)

Annual Base Salary	Number of Persons in Family					
	One	Two	Three	Four	Five	Six or More
139,000 and over	44200	49700	55300	58000	63600	66300
132,000 - 138,999	42200	47400	52700	55300	60600	63200
125,000 - 131,999	40900	46000	51100	53700	58800	61300
118,000 - 124,999	39500	44500	49400	51900	56800	59300
112,000 - 117,999	38200	43000	47800	50200	55000	57400
106,000 - 111,999	37000	41600	46200	48500	53100	55400
100,000 - 105,999	35700	40100	44600	46800	51300	53500
95,000 - 99,999	34500	38800	43100	45300	49600	51700
90,000 - 94,999	33400	37500	41700	43800	48000	50000
85,000 - 89,999	32200	36200	40200	42200	46200	48200
80,000 - 84,999	31000	34800	38700	40600	44500	46400
75,000 - 79,999	29800	33500	37200	39100	42800	44600
71,000 - 74,999	28600	32200	35800	37600	41200	43000
67,000 - 70,999	27600	31100	34500	36200	39700	41400
63,000 - 66,999	26600	29900	33200	34900	38200	39800
59,000 - 62,999	25400	28600	31800	33400	36600	38200
55,000 - 58,999	24400	27500	30500	32000	35100	36600
51,000 - 54,999	23300	26200	29100	30600	33500	34900
48,000 - 50,999	22300	25100	27900	29300	32100	33500
45,000 - 47,999	21400	24100	26800	28100	30800	32200
42,000 - 44,999	20600	23100	25700	27000	29600	30800
39,000 - 41,999	19700	22100	24600	25800	28300	29500
36,000 - 38,999	18800	21200	23500	24700	27000	28200
33,000 - 35,999	17900	20200	22400	23500	25800	26900
30,000 - 32,999	17000	19200	21300	22400	24500	25600
28,000 - 29,999	16200	18300	20300	21300	23300	24400
Under 28,000	15700	17600	19600	20600	22500	23500



Allowances

Post Differential/Hardship Differential Compensation

Allowances


Q: What is Hardship Differential Compensation?

Hardship differential is designed to provide additional compensation to employees for service at places in foreign areas where conditions of environment differ substantially from conditions of environment in the continental United States and warrant additional compensation as a recruitment and retention incentive.



Post Differential/Hardship Differential Compensation

Allowances



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Allowances by Location


Country: BURUNDI
Rates Effective: 05/04/2014

Previous Rates:

Post Name	Cost of Living Allowance % of Spendable Income	Post (Hardship) Differential % of Basic Compensation	Transfer Zone (DSSR 242)	Footnote	Danger Pay % of Basic Compensation	Education Allowance	Living Quarters Allowance	Reporting Schedule
Bujumbura	20	25	3	View	5	View	View	View
Other	20	25	3	View	5	View	View	View

Living Quarters Allowance


Allowances



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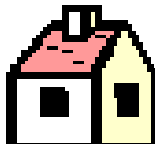
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Allowances by Location

Country: **BURUNDI**
 Rates Effective: **05/04/2014**

Previous Rates:

Post Name	Cost of Living Allowance % of Spensible Income	Post (Hardship) Differential % of Basic Compensation	Transfer Zone (DSSR 242)	Footnote	Danger Pay % of Basic Compensation	Education Allowance	Living Quarters Allowance	Reporting Schedule
Bujumbura	20	25	3	View	5	View	View	View
Other	20	25	3	View	5	View	View	View

Living Quarters Allowance


Q: What is Living Quarters Allowance?

Living quarters allowance (LQA), means a quarters allowance granted to an employee for the annual cost of suitable, adequate, living quarters for the employee and his/her family.



Living Quarters Allowance – With Family


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Annual Living Quarters Allowance In U.S. Dollars (DSSR 130) With Family (WF) or Without Family (WOF)

BURUNDI: Bujumbura
Rates Effective: 05/04/2014

Previous Rates:

Family Status	Group2	Group3	Group4	Footnote
WF	17500	15900	14300	View
WOF	16700	14300	12700	

(Employees with more than one family member see [DSSR 135.4](#))

Temporary Quarters Subsistence Allowance


Q: What is Temporary Quarters Subsistence Allowance?

- Temporary quarters subsistence allowance means an allowance granted to an employee for the reasonable cost of temporary quarters, meals and laundry expenses incurred by the employee and/or family members:
 - a. for a period not to exceed 90 days after first arrival at a new post in a foreign area or a period ending with the occupation of residence (permanent) quarters, if earlier; or
 - b. for a period not to exceed 30 days immediately preceding final departure from the post subsequent to the necessary vacating of residence quarters.



Educational Allowance

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Country: **BURUNDI**

Rates Effective: **05/04/2014**

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Education Allowance In U.S. Dollars (DSSR 270)

BURUNDI: Bujumbura


Rates Effective: 05/04/2014

Previous Rates:

Grade	At Post	Away From Post	Footnote
K	1550	57150	N/A
1	1550	57150	N/A
2	1550	57150	N/A
3	1550	57150	N/A
4	1550	57150	N/A
5	1550	57150	N/A
6	2000	57150	N/A
7	2000	57150	N/A
8	2000	57150	N/A
9	2050	57150	N/A
10	2050	57150	N/A
11	2500	57150	N/A
12	2550	57150	N/A

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Danger Pay

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Other	20	25	3	View	5	View	View	View

Basic Compensation (DSSR 040K)

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Home Leave

Q: What is Home Leave?

The purpose of HOME LEAVE is to ensure that employees who live abroad for an extended period undergo reorientation and re-exposure in the United States on a regular basis.



Consultants

Consultants

Coffee Marketing Specialist	Pers Day	1.00	20	\$400	\$8,000	1.00	45	\$412	\$18,540	1.00	55	\$424	\$23,340	\$49,880
Value Chain Program Coordinator	Pers Day	1.00	15	\$350	\$5,250	1.00	42	\$361	\$15,141	1.00	30	\$371	\$11,139	\$31,530
Coffee Technical Specialist	Pers Day	1.00	40	\$425	\$17,000	1.00	36	\$438	\$15,759	1.00	25	\$451	\$11,272	\$44,031
Production and Processing	Pers Day	1.00	20	\$375	\$7,500	1.00	20	\$386	\$7,725	1.00	15	\$398	\$5,968	\$21,193
Exports food quality/safety Specialist	Pers Day	1.00	15	\$425	\$6,375	1.00	25	\$438	\$10,944	1.00	20	\$451	\$9,018	\$26,336
TOTAL CONSULTANTS					\$44,125				\$68,109				\$60,737	\$172,970

In 2015, the maximum daily rate is \$648.85 [excluding allowances \(post differential, danger pay, Post Allowance/Cost of Living Allowance - COLA\) and others](#) which depend on the posting.

Consultants – Daily Rates

Consultants

OMB Control No. 0412-0520; Expiration Date: 9/30/2004

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

1. Name (Last, First, Middle) _____ 2. Contractor's Name _____

3. Employee's Address (include ZIP code) _____ 4. Contract Number _____ 5. Position Under Contract _____

6. Proposed Salary _____ 7. Duration of Assignment _____

8. Telephone Number (include area code) _____ 9. Place of Birth _____ 10. Citizenship (If non-U.S. citizen, give visa status) _____

11. Names, Ages, and Relationship of Dependents to Accompany Individual to Country of Assignment _____

12. EDUCATION (include all college or university degrees)

NAME AND LOCATION OF INSTITUTION	MAJOR	DEGREE	DATE	LANGUAGE	Proficiency Speaking	Proficiency Reading
					2/S	2/R
					2/S	2/R
					2/S	2/R

13. LANGUAGE PROFICIENCY (see Instruction on Page 2)

14. EMPLOYMENT HISTORY

1. Give last three (3) years. List salaries separate for each year. Continue on separate sheet of paper if required to list all employment related to duties of proposed assignment.

2. Salary definition – basic periodic payment for services rendered. Exclude bonuses, profit-sharing arrangements, commissions, consultant fees, extra or overtime work payments, overseas differential or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (M/D/Y)		Annual Salary
		From	To	Dollars

15. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICES PERFORMED	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (M/D/Y)		Days at Rate	Daily Rate In Dollars
		From	To		

16. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee _____ Date _____

17. CONTRACTOR'S CERTIFICATION (To be signed by responsible representative of Contractor)

Contractor certifies in submitting this form that it has taken reasonable steps (in accordance with sound business practices) to verify the information contained in this form. Contractor understands that USAID may rely on the accuracy of such information in negotiating and reimbursing personnel under this contract. The making of certifications that are false, fictitious, or fraudulent, or that are based on inadequately verified information, may result in appropriate remedial action by USAID, taking into consideration all of the pertinent facts and circumstances, ranging from refund claims to criminal prosecution.

Signature of Contractor's Representative _____ Date _____



EBD

Travel

D. TRAVEL														
International Travel														
		# days # travelers				# days # travelers				# days travelers				
Airfare: US-BJM	Trip		3	\$1,500	\$4,500		2	\$1,545	\$3,090		2	\$1,591	\$3,183	\$10,773
Per diem (M&IE, lodging)	Days	15.00	3	\$187	\$8,415	15.00	2	\$187	\$5,610	15.00	2	\$187	\$5,610	\$19,635
Ground transportation / Airport parking	Trip		3	\$200	\$600		2	\$206	\$412		2	\$212	\$424	\$1,436
Visa	Trip		3	\$227	\$681		2	\$234	\$468		2	\$241	\$482	\$1,630
Medical	Trip		3	\$500	\$1,500		2	\$515	\$1,030		2	\$530	\$1,061	\$3,591
Other miscellaneous (communication, etc.)	Trip		3	\$100	\$300		2	\$103	\$206		2	\$106	\$212	\$718
DBA insurance *	Trip		2%	\$154,327	\$3,087		2%	\$164,793	\$3,296		2%	\$163,725	\$3,275	\$9,657
HTH insurance **	Days	15.00	**	\$1.29	\$58	15.00	**	\$1.29	\$39	15.00	**	\$1.29	\$39	\$135
http://www.rmi.msu.edu/insurance/international.html														
STTA Travel to Burundi														
		# days # travelers				# days # travelers				# days travelers				
Airfare: US-BJM	Trip		3	\$1,500	\$4,500		3	\$1,545	\$4,635		2	\$1,591	\$3,183	\$12,318
Per diem (M&IE, lodging)	Days	37.00	3	\$187	\$20,757	51.00	3	\$187	\$28,611	30.00	2	\$187	\$11,220	\$60,588
Ground transportation / Airport parking	Trip		3	\$200	\$600		3	\$206	\$618		2	\$212	\$424	\$1,642
Visa	Trip		3	\$227	\$681		3	\$234	\$701		2	\$241	\$482	\$1,864
Medical	Trip		3	\$500	\$1,500		3	\$515	\$1,545		2	\$530	\$1,061	\$4,106
Other miscellaneous (communication, etc.)	Trip		3	\$100	\$300		3	\$103	\$309		2	\$106	\$212	\$821
DBA insurance *	Trip		2%	15,736	\$315		2%	21,855	\$437		2%	14,114	\$282	\$1,034
HTH insurance **	Days	37.00	**	\$1.29	\$143	51.00	**	\$1.29	\$197	30.00	**	\$1.29	\$77	\$418
http://www.rmi.msu.edu/insurance/international.html														
Chief of Party														
Home Leave (after 18 months continuous service)					\$0		1	\$1,500.00	\$1,500				\$0	\$1,500
R&R (serve at post min two years unbroken by home leave)					\$0				\$0				\$0	\$0
TOTAL TRAVEL					\$47,936				\$52,704				\$31,226	\$131,867

Foreign Per Diem Rates By Location



The following website is available for any allowances and per diem expenses:

http://aoprals.state.gov/content.asp?content_id=184&menu_id=78

Per Diem Rates

The screenshot displays the U.S. Department of State website. The header includes the Department of State logo and the text "U.S. DEPARTMENT OF STATE" and "DIPLOMACY IN ACTION". A navigation bar contains links for SECRETARY CLINTON, MEDIA CENTER, TRAVEL, CAREERS, BUSINESS, and YOUTH & EDUCATION. Below this is a secondary navigation bar with categories: ABOUT STATE, POLICY ISSUES, COUNTRIES & REGIONS, ECONOMICS & ENERGY, ARMS CONTROL & SECURITY, DEMOCRACY & GLOBAL AFFAIRS, PUBLIC DIPLOMACY & PUBLIC AFFAIRS, and ASSISTANCE & DEVELOPMENT.

The main content area is titled "Per Diem Rates" and "Current and Prior Year Rates". It features three blue links: [Foreign Per Diem Rates by Location](#), [FTR Appendix B \(Breakdown of Meals/Incidentals\)](#), and [Excel Version of Foreign Per Diem Rates](#).

A paragraph explains that **Foreign Per Diem** rates are established monthly by the Office of Allowances as maximum U.S. dollar rates for reimbursement of government civilians traveling on official business in foreign areas. It notes that lodging and M&IE (Meals & Incidentals Expenses) are reported separately followed by a combined daily rate. The breakdown of rates by meals and incidentals is found in [Appendix B](#). For regulations pertaining to these rates, see the [Federal Travel Regulation \(FTR\)](#) established by the General Services Administration and implementing regulations established by Federal Agencies. (Foreign Affairs Agencies - see [Foreign Affairs Manual \(FAM\)](#) (Vol. 14); Defense Agencies - see Chapter 4 of the [JFTR](#), Vol. 1 for members of the uniformed services; see the JTR, Vol. 2 for civilians.)

The Bureau of Public Affairs of the Department of State offers a subscription service that permits individuals to receive notices when Foreign Travel Per Diem rates are updated.


The Chapter 925 Per Diem Supplement to the Standardized Regulations (Government Civilians, Foreign Areas) lists all foreign areas alphabetically. Where a country or island is listed it is intended to include all territory within the boundaries of that country or island including any off-shore islands in the same general vicinity. It will not include territories or possessions located elsewhere even though considered an integral part of the parent country or island. In such cases, no cost data pertinent to such territories and possessions were used in determining the established rates. When a political subdivision smaller than a country is named, such as states, provinces, departments, cities, towns, villages, etc., it will include the corporate limits of such political subdivision or the limits of territory within the normal boundary thereof if it is not incorporated. Any further clarification of the area covered by a specific listing is contained in associated footnotes which can be viewed by selecting Foreign Per Diems By Location.

The left sidebar of the website contains a menu with the following items:

- Office of Allowances
 - Organization Chart
- Per Diem Rates
 - Foreign Per Diem Rates
 - Other Per Diem Rates
- Allowance Rates
 - Allowance Rates (Sec. 920)
 - Allowances By Location
 - Allowances By Type
 - Biweekly Updates
- Standardized Regulations (DSSR)
 - DSSR Table of Contents
 - Search the DSSR
- General Information
 - Contact Us
 - Frequently Asked Questions
 - Summary of Allowances
- Quarterly Report Indexes
 - Reports

Per Diem – Travel (Burundi)

Per Diem Rates



U.S. DEPARTMENT OF STATE

DIPLOMACY IN ACTION

[SECRETARY KERRY](#)
[MEDIA CENTER](#)
[TRAVEL](#)
[CAREERS](#)
[BUSINESS](#)
[YOUTH & EDUCATION](#)

[MyStateDepartment](#)

[ABOUT STATE](#)
[POLICY ISSUES](#)
[COUNTRIES & REGIONS](#)
[ECONOMICS, ENERGY & ENVIRONMENT](#)
[ARMS CONTROL & INTERNATIONAL SECURITY](#)
[CIVILIAN SECURITY & DEMOCRACY](#)
[PUBLIC DIPLOMACY & PUBLIC AFFAIRS](#)
[ASSISTANCE & DEVELOPMENT](#)

Office of Allowances

- Organization Chart

Per Diem Rates

- Foreign Per Diem Rates
- Other Per Diem Rates

Allowance Rates

- Allowance Rates (Sec. 920)
- Allowances By Location
- Allowances By Type
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Standardized Regulations (DSSR)

- DSSR Table of Contents
- Search the DSSR

General Information


- Contact Us
- Effects of Administrative Furlough
- Frequently Asked Questions
- Summary of Allowances

Quarterly Report Indexes

- Reports

Select by Location

Select by Allowance Type

Printer Friendly 

Foreign Per Diem Rates In U.S. Dollars

Country: BURUNDI

Publication Date: 05/01/2014

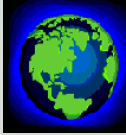
Previous Rates:

Country Name	Post Name	Season Begin	Season End	Maximum Lodging Rate	M & IE Rate	Maximum Per Diem Rate	Footnote	Effective Date
BURUNDI	Bujumbura	01/01	12/31	120	67	187	View	07/01/2011
BURUNDI	Other	01/01	12/31	120	67	187	View	07/01/2011

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[Archive](#)



DBA Insurance

Covers the Risk for International Contractors

What is it?

Established in 1941, the primary goal of the Defense Base Act was to cover workers on military base outside the United States. Within time, the Act was amended and today, almost any contract with an agency of the U.S. government, for work outside the U.S., whether military in nature or not, will likely require Defense Base Act coverage.

DBA provides benefits in the event that civilian contractors are injured, killed, or kidnapped in the course of their work for US government agencies such as the various branches of the Department of Defense (DOD), U.S. Agency for International Development, (USAID), or the State Department.

Failure to obtain DBA insurance carries stiff penalties, and it may result in fines and possible loss of contract.

MSU's DBA insurance carrier used is Rutherford at <http://www.rutherford.com/>

For the purpose of this budget 2% is used per applicable payroll cost.

HTH Insurance

<http://www.hthtravelinsurance.com>

HTH Travel Insurance

Travel Alerts | Healthy Travel | Contact Us

Toll Free: **888.243.2358** Outside U.S.: **610.254.8769**

Quote & Buy

Products

Global Health & Safety

Agents

Member Login ▶



Travel Health Insurance

Travel medical & accident protection, offering pre-existing condition coverage, evacuation insurance: plans up to \$1,000,000 in medical benefits are available. If you're planning to travel for 6 months or less, this is the plan for you.

LEARN MORE ▶

QUOTE ▶

SELECT YOUR

Travel Health Insurance Plan

Travel

Expatriate

Student

Protection

Single Trip
Health Insurance

Long Term International
Medical Insurance

International Student
Health Insurance

Trip Cancellation,
Protection & More

Travel Health Insurance

Worldwide Insurance Services (WIS) offers a variety of travel medical insurance across the U.S. under the **HTH Worldwide** and **GeoBlue** brands.

HTH Worldwide **GeoBlue**

When you Get A Quote, you will see travel health insurance products uniformly high in quality with the brand available in your area.

We offer a wide selection of travel health insurance plans that include coverage for hospital care, surgery, office visits, prescription drugs and medical evacuation.

Travel the world with confidence knowing that you have convenient access to our community of trusted English-speaking physicians in more than 180 countries.

Find the plan that is
Right For You

GET A QUOTE

Travel Health Insurance Testimonials



Frequent world travelers, Robert and Margaret, recount Robert's accident and how his medical care was handled.

No matter where you roam, use our convenient downloadable apps to find carefully-selected local healthcare resources.



MSU – International Travel

<http://rmi.msu.edu/insurance/international.html>

Outbound International Travel

- Students participating in a MSU Study Abroad Program through the Office of Study Abroad (OSA) are automatically enrolled in HTH Worldwide Insurance. For additional information, review the OSA website at http://studyabroad.isp.msu.edu/studenthandbk/predeparture_health/health_insurance.html.
- For all other non-Office of Study Abroad individuals traveling on an approved MSU travel authorization, following are the required steps for departments to take in order to put coverage into effect: (1) complete a pre-trip travel authorization for each non-study abroad international traveler and (2) register the trip in the International Travelers Abroad Database at http://www.isp.msu.edu/travel/travelers_database.htm. The coverage for any one trip is limited to a maximum of 180 days.
- The HTH Worldwide insurance product for non-study abroad international travelers is called "GeoBlue Traveler". For more information regarding the coverage, access the GeoBlue website at www.geo-blue.com and click on "Register" (the MSU Group Access Code is: QHG9999MSUBT). This step will enable travelers to print their ID card in advance, have access to the policy, review HTH's large network of global medical providers, look at claim procedures and become familiar with the online and mobile tools available to them.
- If travelers would like to purchase separate travel coverage at their own expense for an accompanying spouse or dependents that are not traveling on an approved MSU travel authorization, they can obtain a quote through HTH Worldwide at www.hthtravelinsurance.com or by calling 1-888-243-2358.

Inbound Travel to the United States

- This coverage is available for a fee to all individuals traveling to the United States on an approved MSU travel authorization. To enroll participants, a University department must complete a [roster](#) and provide a university account number. Both need to be submitted to the Risk Management and Insurance Department via email to riskmgmt@msu.edu. Risk Management staff will facilitate the enrollment with HTH and provide an ID card to the department. The premium is \$64.95 per calendar month. For more information regarding the coverage, please review the [brochure](#).

If you have any questions regarding either the inbound or outbound coverage, contact the Risk Management and Insurance Department via email at riskmgmt@msu.edu or by phone at 517-355-5022 ext. 0.

Subcontractors

Subcontractors

Subcontractor 1	Services	\$35,000	\$35,000	\$35,000	\$105,000
Subcontractor 2	Services	\$100,000	\$50,000	\$0	\$150,000
Subcontractor 3	Services	\$0	\$75,000	\$65,000	\$140,000
Subcontractor 4	Services	\$0	\$50,000	\$50,000	\$100,000
TOTAL SUBCONTRACTS		\$135,000	\$210,000	\$150,000	\$495,000

Required Partner Information

- **Subrecipient**
 - Budget and Budget Justification
 - Scope of Work
 - Subrecipient Commitment Form:
<https://www.cga.msu.edu/PL/Portal/DocumentViewer.aspx?cga=aQBkAD0AMgA2ADAA>
 - Audited Financial Statements
 - NICRA (if applicable)
- **Consultant (*Vendor*)**
 - Cost of service-reasonable rate of pay for similar type of services



Contractor (§ 200.330 Uniform Guidance)



Subrecipient

- Provides the goods and services within normal business operations
- Provides similar goods or services to many different purchasers
- Normally operates in a competitive environment
- Provides goods or services that are ancillary to the operation of the Federal program
- Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons
- Relationship via MSU Professional Service Contract

Subrecipient (§ 200.330 Uniform Guidance)

- Determines who is eligible to receive what Federal assistance
- Has its performance measured in relation to whether objectives of a Federal program were met
- Has responsibility for programmatic decision making
- Is responsible for adherence to applicable Federal program requirements specified in the Federal award
- In accordance with its agreement, uses the Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity
- Relationship via subaward or subcontract



Foreign Subcontractor Considerations PI's and Department's Responsibilities

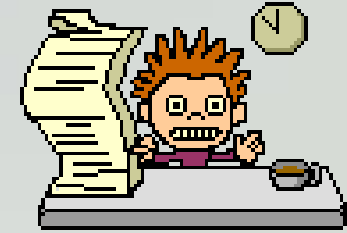
- Does the foreign subcontractor have the necessary infrastructure in place to manage the subcontract?
- How much experience does the foreign subcontractor have with research contracts?
- Can you work with this subcontractor?
 - **SAM (System for Award Management):**
<https://www.sam.gov/portal/public/SAM/>
 - **Office of Foreign Assets Control – OFAC SDN (Specially Designated Nationals) List – US citizens and permanent residents prohibited from doing business**
<http://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx>
- Are there tax restrictions associated with this partner?
- Do you have someone familiar with the restrictions, laws, unique rules and challenges of that country?



F&A Rates for International Partners

- Federal agencies require a NICRA in order to receive F&A (some exceptions such as NIH – 8%)
- What if our int'l partner does not have a NICRA?
 - **Federal projects**
 - Indirect costs allowed - 10% of MTDC, per § 200.414 Uniform Guidance
 - Or:*
 - Charge expenses as direct costs
 - **Non-Federal projects**
 - Published rate on all externally-funded projects
 - Letter from the CFO attesting to the rate and that it is charged to all external funding
 - Or maximum indirect costs of 10% of MTDC can be applied, per § 200.414 Uniform Guidance

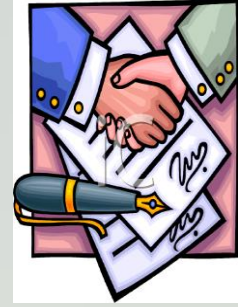
Subaward Setup



Subrecipient

- OSP issues international subawards (a few exceptions)
- OSP reviews SAM-System for Award Management
<https://www.sam.gov/portal/public/SAM/>
or Visual Compliance (software purchased by MSU)
- Information needed prior to issuing subaward:
 - Subrecipient Commitment Form
 - Final budget and SOW
 - Current audited financial statements
 - Partner contact information
 - W-8BEN form
<http://www.ctrl.msu.edu/download/forms/ex77h.pdf>
 - DUNS number for federal funding
- Fixed price vs. cost-reimbursable (new guidelines according to Uniform Guidance)
- Terms of advance payments; approval from Chair if over 25% of the total obligated budget amount

Fixed Price Subaward



Fixed Price Subaward

- § 200.45 Accountability is based on performance and results (Goal of the Guidance is to tie performance to defined milestone)
- § 200.332 Federal Awards can only issue Fixed Price Subawards that do not exceed the Simplified Acquisition Threshold (currently \$150K)
- Prior Approval is required before issuing a subaward
- § 200.201 (b) Payments tied to PERFORMANCE/RESULTS
- Fixed Price CANNOT be used when cost sharing is involved
- Non-Federal Entity MUST CERTIFY IN WRITING
 - a) Project Completed or Level of Effort Expended
 - b) Award Amount adjusted if project not completed or proper effort expended

Contract and Subcontract Hurdles

- Subcontract is issued in a foreign currency
- Subcontractor requests that the subcontract be written in English and the language of their country
- Documents written in a foreign language
 - Sources: ISP, foreign language departments on campus, professional agencies
 - Requirements: Credentials/documentation used to support qualifications and experience in the language; all translated documents must be certified as to truth and accuracy by the translator
- Subcontractor requires an advance payment to begin work



In-Country Office

F. IN-COUNTRY OFFICE														
In-country office director	Month		12	\$2,000	\$24,000		12	\$2,060	\$24,720		12	\$2,122	\$25,462	\$74,182
13th month payment	Month		1	\$2,000	\$2,000		1	\$2,060	\$2,060		1	\$2,122	\$2,122	\$6,182
Severance payment	Month				\$0				\$0		1	\$2,122	\$2,122	\$2,122
In-country staff (5 employees)	Month	5.00	12	\$950	\$57,000	5.00	12	\$979	\$58,710	5.00	12	\$1,008	\$60,471	\$176,181
13th month payment	Month	5.00	1	\$950	\$4,750	5.00	1	\$979	\$4,893	5.00	1	\$1,008	\$5,039	\$14,682
Severance payment	Month		1		\$0		1		\$0	5.00	1	\$1,008	\$5,039	\$5,039
Space rental	Month		12	\$1,000	\$12,000		12	\$1,030	\$12,360		12	\$1,061	\$12,731	\$37,091
Telephone/fax	Month		12	\$150	\$1,800		12	\$155	\$1,854		12	\$159	\$1,910	\$5,564
Express mail service	Month		12	\$100	\$1,200		12	\$103	\$1,236		12	\$106	\$1,273	\$3,709
Photocopy (monthly)	Month		12	\$50	\$600		12	\$52	\$618		12	\$53	\$637	\$1,855
Misc office supplies including detergents)	Month		12	\$75	\$900		12	\$77	\$927		12	\$80	\$955	\$2,782
Vehicle purchase (2 @ \$35,000 ea)	One-time		2	\$35,000	\$70,000				\$0			\$0	\$0	\$70,000
Foreign auto physical damage insurance	Annual		2	\$2,500	\$5,000		2	\$2,575	\$5,150		2	\$2,652	\$5,305	\$15,455
Office computers, printers, fax machine	One-time			\$15,000	\$15,000			\$3,000	\$3,000			\$0	\$0	\$18,000
In-country consultants	Month		12	\$1,200	\$14,400		12	\$5,000	\$60,000		12	\$3,000	\$36,000	\$110,400
In-country fieldwork (per diems, lodging)	Month		12	\$1,000	\$12,000		12	\$2,500	\$30,000		12	\$1,500	\$18,000	\$60,000
					\$0				\$0				\$0	\$0
TOTAL IN-COUNTRY OFFICE					\$220,650				\$205,528				\$177,065	\$603,242

In-Country Office

In - Country

- **Personnel**
 - **Know Labor Laws**
 - 13th month payment (add'l month allowed by law in many developing countries) - employment for full year
 - Severance pay (payment when an employment contract ends, not just when someone is let go prior to their contract ending)
- **Space**
 - Rental agreements must be approved by the Office of Land Management prior to signature by an authorized MSU official



In-Country Office



- **Communication**
- **Equipment**
 - Discuss vehicle usage with Risk Management
 - Insurance fees included in budget (foreign auto physical damage insurance)
- **Supplies**
- **In-country consultants**
 - Hired and paid thru imprest account
- **In-country fieldwork**
 - Per diems and lodging cannot exceed allowable rate and must follow MSU policy unless exceptions given by funder



Other Costs

G. OTHER DIRECT COSTS														
<u>Home Office</u>														
Communications	Month	12	\$200	\$2,400	12	\$206	\$2,472	12	\$212	\$2,546.16	\$7,418			
Wire transfer fees (imprest account payments)	Month	12	\$50	\$600	12	\$52	\$618	12	\$53	\$637	\$1,855			
Express mail service	Month	12	\$100	\$1,200	12	\$103	\$1,236	12	\$106	\$1,273	\$3,709			
Photocopy (monthly)	Month	12	\$50	\$600	12	\$52	\$618	12	\$53	\$637	\$1,855			
											\$0			
<u>Chief of Party expenses</u>														
											\$0			
Shipping household goods				\$7,000						\$7,000	\$14,000			
Storage of belongings				\$1,500			\$1,500			\$1,500	\$4,500			
GA tuition		1.00	2	\$11,770	\$23,540	1.00	2	\$12,241	\$24,482	1.00	2	\$12,730	\$25,461	\$73,482
TOTAL OTHER DIRECT COSTS				\$36,840			\$30,926			\$39,053	\$106,819			
H. DIRECT COSTS				894,834			1,002,552			884,529	2,781,914			
I. INDIRECT COSTS														
Negotiated Indirect Cost Rate (NICRA) (26%)	Percent	26%	716,294	186,236	26%	818,070	212,698	26%	709,068	184,358	583,292			
J. TOTALS				1,081,070			1,215,250			1,068,886	3,365,206			

Questions?

Mission Completed!



Questions?



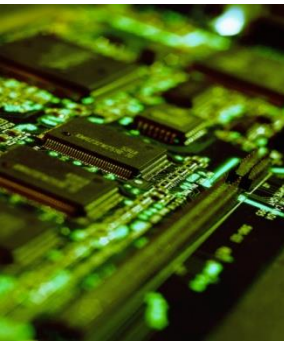
Export Control and Trade Sanctions: An Overview

Lorraine J. Hudson
Director of Research Facilitation and Dissemination
June 16, 2015



Presentation Overview

- What is an export?
- What are export controls?
- What are trade sanctions?
- What is EAR? ITAR? OFAC? FCPA?
- The MSU process – who, what, when, where and why?



What constitutes an export?

Any release of controlled technology, data, software or other item to a foreign national. Such release is **deemed** to be an export to the home country or countries of the foreign national, ***even if the person is currently residing in the United States.*** This rule does not apply to persons lawfully admitted for ***permanent residence*** in the United States.

(Hint: A restaurant conversation that transfers controlled information to a foreign national constitutes an export.)



What are export controls?

Export controls are federal laws that regulate the export of:

- technology and data relating to ***military applications*** listed on the U.S. Munitions List (**ITAR**) – enforcement agency - **Department of State**

http://www.pmddtc.state.gov/regulations_laws/documents/official_itar/2013/ITAR_Part_121.pdf

AND

- “***dual use***” technologies relating to items listed on the Commerce Control List (**EAR**) – enforcement agency – **Department of Commerce**

<https://www.bis.doc.gov/index.php/regulations/export-administration-regulations-ear>



What are trade sanctions?

- The Office of Foreign Assets Control ("OFAC") of the **U.S. Dept. of the Treasury** enforces economic and trade sanctions based on ***foreign policy, economic and national security goals***. OFAC blocks interaction with terrorists, international narcotics traffickers and weapons violators, among others, as well as denying dealings with certain foreign entities.

(Partial list of sanctioned countries: Balkans, Cuba, Iran, North Korea, Sudan, Syria, Zimbabwe)



Why is it important to be aware of these laws?

Violations of EC&TS can result in personal and institutional liability and criminal penalties:

- **individual** and/or **institutional** fines and/or
- **individual** incarceration
- **Shows due diligence regarding compliance**



Applicability

These laws apply to **all research activities** whether or not there is a specific citation to the regulations in the grant or contract award document governing the project, and ***whether or not the project is grant-funded.***

These laws also apply to export-controlled information or technology shared with MSU by personnel outside the university (such as items or data shared via a **material transfer or confidential disclosure agreement**).



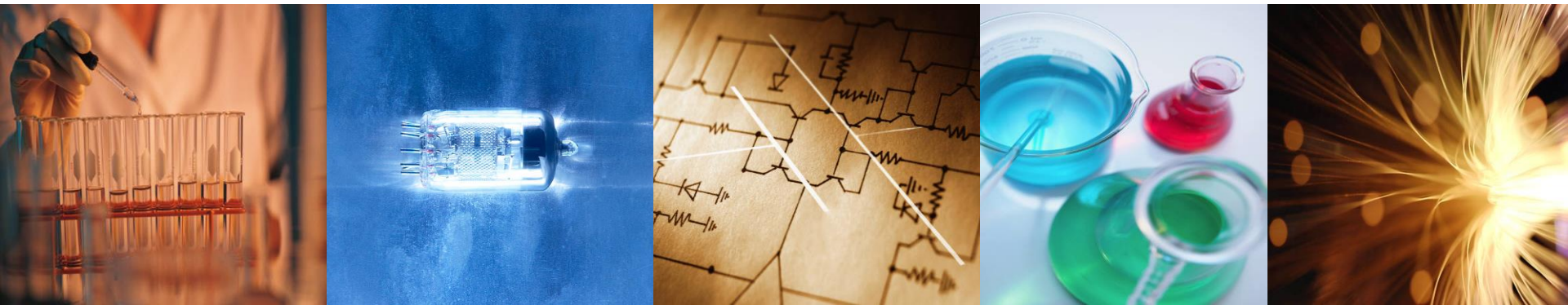
Licenses?

- In certain situations, the university may elect to apply for a license for export but:
 - They take time (months)
 - They can be expensive
 - They can be turned down



Fundamental Research

Fundamental research is basic or applied research at an accredited institution of higher learning **in the U.S.** where the resulting information is not restricted in the form or content of its release to the public and is ordinarily ***published and shared broadly in the scientific community.***



Publication & Fundamental Research

The fundamental research exclusion does not in general extend to the for-profit sector (export controls sometimes flow down to a university as a subcontractor when the for profit, as prime contractor, is required to accept the controls).

The fundamental research exclusion does not extend to research performed outside the University even if the research is fundamental at MSU.



So ... What does it all mean?

The Export Control and Open Research Review Worksheet (ECORRW) helps EC&TS determine whether or not a project is controlled, what publication or citizenship restrictions apply, what equipment is intended for use abroad, and what follow-up actions must be taken to comply with U.S. law and regulation and MSU policy.

<https://osp.msu.edu/PL/Portal/DocumentViewer.aspx?cga=aQBkAD0AMQA2ADQA>



Export Control Worksheet

- May be found at: <http://forms.exportcontrols.msu.edu>
- May be filled out at the **proposal stage** or the **award stage**.
- Helps ECTS determine the nature of the project, if it is controlled, what special conditions may apply to work abroad.
- Unit initiates the form, PI signs, dean/associate dean/chair signs (unit preference), forward to Office of Sponsored Projects.
- OSP signs on contract terms, forwards to ECTS for review and signature.



Some other thoughts

- Be cautious about faculty and staff travelling overseas with laptops (a “clean” laptop is best).
- Faculty must be aware of and comply with:
 - **Rules for export of cash** -
https://help.cbp.gov/app/answers/detail/a_id/195/~/_currency-%2F-monetary-instruments---amount-that-can-be-brought-into-or-leave-the
 - **The Federal Corrupt Practices Act (FCPA)** -
<http://www.justice.gov/criminal/fraud/fcpa/>
- The FBI has published suggestions for safe overseas computing: <http://www.fbi.gov/about-us/investigate/counterintelligence/business-travel-brochure>



- Federal regulations require sign-off for EC considerations on visa applications.
- Like the ECORRW, the Export Control Worksheet for MSU sponsored visas may be initiated and routed electronically. Please visit <http://forms.exportcontrols.msu.edu> to access the online form.



Resources to help you

- MSU has a site license to “Visual Compliance” - searchable listings of items on the ITAR and EAR lists and restricted parties (please contact ECTS for an ID).
- MSU has a site license to online export control training through CITI (access information may be found at <http://exportcontrols.msu.edu/training>).



Contact Export Control and Trade Sanctions at:

- Phone: (517) 432-4499
- Email: export@msu.edu
- Website: <http://exportcontrols.msu.edu>
- Address: 249 Administration Building



Thank you!
(Questions?)



Accounting

*Susan McKay, mckaysg@msu.edu
Ethel Hatton, hattonet@msu.edu*



Professional Services Payments

What is needed to make a professional services payment for services provided outside the U.S.?

- W-8BEN (individuals) or W-8BENE (entities) to identify foreign status
- Vendor – attach the W-8 form to the vendor e-doc
- NRAPSC – if not on a contract through CGA
- Payment via wire is recommended – please do not send a check overseas



Form **W-8BEN**

(Rev. February 2014)

Department of the Treasury
Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.
► Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.
► Give this form to the withholding agent or payor. Do not send to the IRS.

OMB No. 1545-1021

Do NOT use this form if:

- You are NOT an Individual **W-8BEN-E**
- You are a U.S. citizen or other U.S. person, including a resident alien Individual **W-9**
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) **W-8ECI**
- You are a beneficial owner who is receiving compensation for personal services performed in the United States **8233 or W-4**
- A person acting as an intermediary **W-BIMY**

Instead, use Form:

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner	2 Country of citizenship
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.	
City or town, state or province. Include postal code where appropriate.	Country
4 Mailing address (if different from above)	
City or town, state or province. Include postal code where appropriate.	Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)	6 Foreign tax identifying number (see instructions)
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
 - The person named on line 1 of this form is not a U.S. person,
 - The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
 - The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
 - For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.
- Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.

Sign Here ▶

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date (MM-DD-YYYY)

Print name of signer

Capacity in which acting (if form is not signed by beneficial owner)

**Certificate of Status of Beneficial Owner for
United States Tax Withholding and Reporting (Entities)**

▶ For use by entities. Individuals must use Form W-8BEN. ▶ Section references are to the Internal Revenue Code.
▶ Information about Form W-8BEN-E and its separate instructions is at www.irs.gov/formw8bena.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

Do NOT use this form for:

- U.S. entity or U.S. citizen or resident **W-9**
- A foreign individual **W-8BEN (Individual)**
- A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the U.S. (unless claiming treaty benefits) **W-BECI**
- A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions) **W-BIMY**
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (unless claiming treaty benefits) (see instructions) **W-BECI or W-8EXP**
- Any person acting as an intermediary **W-BIMY**

Instead use Form:

Part I Identification of Beneficial Owner

1 Name of organization that is the beneficial owner	2 Country of incorporation or organization
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3 Name of disregarded entity receiving the payment (if applicable)

4 Chapter 3 Status (entity type) (Must check one box only):

<input type="checkbox"/> Simple trust	<input type="checkbox"/> Grantor trust	<input type="checkbox"/> Corporation	<input type="checkbox"/> Disregarded entity	<input type="checkbox"/> Partnership
<input type="checkbox"/> Central Bank of Issue	<input type="checkbox"/> Tax-exempt organization	<input type="checkbox"/> Complex trust	<input type="checkbox"/> Estate	<input type="checkbox"/> Government
<input type="checkbox"/> Private foundation				

If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes" complete Part III. Yes No

5 Chapter 4 Status (FATCA status) (Must check one box only unless otherwise indicated). (See instructions for details and complete the certification below for the entity's applicable status).

<input type="checkbox"/> Nonparticipating FFI (including a limited FFI or an FFI related to a Reporting IGA FFI other than a registered deemed-compliant FFI or participating FFI). <input type="checkbox"/> Participating FFI. <input type="checkbox"/> Reporting Model 1 FFI. <input type="checkbox"/> Reporting Model 2 FFI. <input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI or sponsored FFI that has not obtained a GIIN). <input type="checkbox"/> Sponsored FFI that has not obtained a GIIN. Complete Part IV. <input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V. <input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI. <input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII. <input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII. <input type="checkbox"/> Certified deemed-compliant investment advisors and investment managers. Complete Part IX. <input type="checkbox"/> Owner-documented FFI. Complete Part X. <input type="checkbox"/> Restricted distributor. Complete Part XI.	<input type="checkbox"/> Nonreporting IGA FFI (including an FFI treated as a registered deemed-compliant FFI under an applicable Model 2 IGA). Complete Part XII. <input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII. <input type="checkbox"/> International organization. Complete Part XIV. <input type="checkbox"/> Exempt retirement plans. Complete Part XV. <input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI. <input type="checkbox"/> Territory financial institution. Complete Part XVII. <input type="checkbox"/> Nonfinancial group entity. Complete Part XVIII. <input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX. <input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX. <input type="checkbox"/> 501(c) organization. Complete Part XXI. <input type="checkbox"/> Nonprofit organization. Complete Part XXII. <input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII. <input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV. <input type="checkbox"/> Active NFFE. Complete Part XXV. <input type="checkbox"/> Passive NFFE. Complete Part XXVI. <input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII. <input type="checkbox"/> Direct reporting NFFE. <input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.
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6 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address** (other than a registered address).

City or town, state or province. Include postal code where appropriate.	Country
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7 Mailing address (if different from above)

City or town, state or province. Include postal code where appropriate.	Country
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8 U.S. taxpayer identification number (TIN), if required	9a <input type="checkbox"/> GIIN	b <input type="checkbox"/> Foreign TIN	10 Reference number(s) (see instructions)
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Part II Disregarded Entity or Branch Receiving Payment. (Complete only if disregarded entity or branch of an FFI in a country other than the FFI's country of residence.)

- 11 Chapter 4 Status (FATCA status) of disregarded entity or branch receiving payment
- Limited Branch. Reporting Model 1 FFI. U.S. Branch.
- Participating FFI. Reporting Model 2 FFI.
- 12 Address of disregarded entity or branch (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address).

City or town, state or province. Include postal code where appropriate.

Country

- 13 GIIN (if any)

Part III Claim of Tax Treaty Benefits (if applicable). (For chapter 3 purposes only)

- 14 I certify that (check all that apply):
- a The beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.
- b The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits (see instructions).
- c The beneficial owner is claiming treaty benefits for dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation and meets qualified resident status (see instructions).
- 15 **Special rates and conditions** (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 14a above to claim a _____ % rate of withholding on (specify type of income): _____ . Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part IV Sponsored FFI That Has Not Obtained a GIIN

- 16 Name of sponsoring entity: _____
- 17 **Check whichever box applies.**
- I certify that the entity identified in Part I:
- is an FFI solely because it is an investment entity;
 - is not a QI, WP, or WT; **and**
 - has agreed with the entity identified above (that is not a nonparticipating FFI) to act as the sponsoring entity for this entity.
- I certify that the entity identified in Part I:
- is a controlled foreign corporation as defined in section 957(a);
 - is not a QI, WP, or WT;
 - is wholly owned, directly or indirectly, by the U.S. financial institution identified above that agrees to act as the sponsoring entity for this entity; **and**
 - shares a common electronic account system with the sponsoring entity (identified above) that enables the sponsoring entity to identify all account holders and payees of the entity and to access all account and customer information maintained by the entity including, but not limited to, customer identification information, customer documentation, account balance, and all payments made to account holders or payees.

Part V Certified Deemed-Compliant Nonregistering Local Bank

- 18 I certify that the FFI identified in Part I:
- operates and is licensed solely as a bank or credit union (or similar cooperative credit organization operated without profit) in its country of incorporation or organization;
 - engages primarily in the business of receiving deposits from and making loans to, with respect to a bank, retail customers unrelated to such bank and, with respect to a credit union or similar cooperative credit organization, members, provided that no member has a greater than five percent interest in such credit union or cooperative credit organization;
 - does not solicit account holders outside its country of organization;
 - has no fixed place of business outside such country (for this purpose, a fixed place of business does not include a location that is not advertised to the public and from which the FFI performs solely administrative support functions);
 - has no more than \$175 million in assets on its balance sheet and, if it is a member of an expanded affiliated group, the group has no more than \$500 million in total assets on its consolidated or combined balance sheets; **and**
 - does not have any member of its expanded affiliated group that is a foreign financial institution, other than a foreign financial institution that is incorporated or organized in the same country as the FFI identified in Part I and that meets the requirements set forth in this Part V.

Part VI Certified Deemed-Compliant FFI with Only Low-Value Accounts

- 19 I certify that the FFI identified in Part I:
- Is not engaged primarily in the business of investing, reinvesting, or trading in securities, partnership interests, commodities, notional principal contracts, insurance or annuity contracts, or any interest (including a futures or forward contract or option) in such security, partnership interest, commodity, notional principal contract, insurance contract or annuity contract;
 - No financial account maintained by the FFI or any member of its expanded affiliated group, if any, has a balance or value in excess of \$50,000 (as determined after applying applicable account aggregation rules); and
 - Neither the FFI nor the entire expanded affiliated group, if any, of the FFI, have more than \$50 million in assets on its consolidated or combined balance sheet as of the end of its most recent accounting year.

Part VII Certified Deemed-Compliant Sponsored, Closely Held Investment Vehicle

- 20 Name of sponsoring entity: _____
- 21 I certify that the entity identified in Part I:
- Is an FFI solely because it is an investment entity described in §1.1471-5(e)(4);
 - Is not a QI, WP, or WT;
 - Has a contractual relationship with the above identified sponsoring entity that agrees to fulfill all due diligence, withholding, and reporting responsibilities of a participating FFI on behalf of this entity; and
 - Twenty or fewer individuals own all of the debt and equity interests in the entity (disregarding debt interests owned by U.S. financial institutions, participating FFIs, registered deemed-compliant FFIs, and certified deemed-compliant FFIs and equity interests owned by an entity if that entity owns 100 percent of the equity interests in the FFI and is itself a sponsored FFI).

Part VIII Certified Deemed-Compliant Limited Life Debt Investment Entity

- 22 I certify that the entity identified in Part I:
- Was in existence as of January 17, 2013;
 - Issued all classes of its debt or equity interests to investors on or before January 17, 2013, pursuant to a trust indenture or similar agreement; and
 - Is certified deemed-compliant because it satisfies the requirements to be treated as a limited life debt investment entity (such as the restrictions with respect to its assets and other requirements under § 1.1471-5(f)(2)(iv)).

Part IX Certified Deemed-Compliant Investment Advisors and Investment Managers

- 23 I certify that the entity identified in Part I:
- Is a financial institution solely because it is an investment entity described in §1.1471-5(e)(4)(i)(A); and
 - Does not maintain financial accounts.

Part X Owner-Documented FFI

Note. This status only applies if the U.S. financial institution or participating FFI to which this form is given has agreed that it will treat the FFI as an owner-documented FFI (see instructions for eligibility requirements). In addition, the FFI must make the certifications below.

- 24a (All owner-documented FFIs check here) I certify that the FFI identified in Part I:
- Does not act as an intermediary;
 - Does not accept deposits in the ordinary course of a banking or similar business;
 - Does not hold, as a substantial portion of its business, financial assets for the account of others;
 - Is not an insurance company (or the holding company of an insurance company) that issues or is obligated to make payments with respect to a financial account;
 - Is not owned by or in an expanded affiliated group with an entity that accepts deposits in the ordinary course of a banking or similar business, holds, as a substantial portion of its business, financial assets for the account of others, or is an insurance company (or the holding company of an insurance company) that issues or is obligated to make payments with respect to a financial account; and
 - Does not maintain a financial account for any nonparticipating FFI.

Part X Owner-Documented FFI (continued)

Check box 24b or 24c, whichever applies.

- b I certify that the FFI identified in Part I:
- Has provided, or will provide, an FFI owner reporting statement that contains:
 - The name, address, TIN (if any), chapter 4 status, and type of documentation provided (if required) of every individual and specified U.S. person that owns a direct or indirect equity interest in the owner-documented FFI (looking through all entities other than specified U.S. persons);
 - The name, address, TIN (if any), chapter 4 status, and type of documentation provided (if required) of every individual and specified U.S. person that owns a debt interest in the owner-documented FFI (including any indirect debt interest, which includes debt interests in any entity that directly or indirectly owns the payee or any direct or indirect equity interest in a debt holder of the payee) that constitutes a financial account in excess of \$50,000 (disregarding all such debt interests owned by participating FFIs, registered deemed-compliant FFIs, certified deemed-compliant FFIs, excepted NFFEs, exempt beneficial owners, or U.S. persons other than specified U.S. persons); **and**
 - Any additional information the withholding agent requests in order to fulfill its obligations with respect to the entity.
- c I certify that the FFI identified in Part I has provided, or will provide, an auditor's letter, signed within four years of the date of payment, from an independent accounting firm or legal representative with a location in the United States stating that the firm or representative has reviewed the FFI's documentation with respect to all of its owners and debt holders identified in §1.1471-3(d)(6)(iv)(A)(2), and that the FFI meets all the requirements to be an owner-documented FFI. The FFI identified in Part I has also provided, or will provide, an FFI owner reporting statement of its owners that are specified U.S. persons and Form(s) W-9, with applicable waivers.

Check box 24d if applicable.

- d I certify that the entity identified in line 1 is a trust that does not have any contingent beneficiaries or designated classes with unidentified beneficiaries.

Part XI Restricted Distributor25a (All restricted distributors check here) I certify that the entity identified in Part I:

- Operates as a distributor with respect to debt or equity interests of the restricted fund with respect to which this form is furnished;
- Provides investment services to at least 30 customers unrelated to each other and less than half of its customers are related to each other;
- Is required to perform AML due diligence procedures under the anti-money laundering laws of its country of organization (which is an FATF-compliant jurisdiction);
- Operates solely in its country of incorporation or organization, has no fixed place of business outside of that country, and has the same country of incorporation or organization as all members of its affiliated group, if any;
- Does not solicit customers outside its country of incorporation or organization;
- Has no more than \$175 million in total assets under management and no more than \$7 million in gross revenue on its income statement for the most recent accounting year;
- Is not a member of an expanded affiliated group that has more than \$500 million in total assets under management or more than \$20 million in gross revenue for its most recent accounting year on a combined or consolidated income statement; **and**
- Does not distribute any debt or securities of the restricted fund to specified U.S. persons, passive NFFEs with one or more substantial U.S. owners, or nonparticipating FFIs.

Check box 25b or 25c, whichever applies.

I further certify that with respect to all sales of debt or equity interests in the restricted fund with respect to which this form is furnished that are made after December 31, 2011, the entity identified in Part I:

- b Has been bound by a distribution agreement that contained a general prohibition on the sale of debt or securities to U.S. entities and U.S. resident individuals and is currently bound by a distribution agreement that contains a prohibition of the sale of debt or securities to any specified U.S. person, passive NFFE with one or more substantial U.S. owners, or nonparticipating FFI.
- c Is currently bound by a distribution agreement that contains a prohibition on the sale of debt or securities to any specified U.S. person, passive NFFE with one or more substantial U.S. owners, or nonparticipating FFI and, for all sales made prior to the time that such a restriction was included in its distribution agreement, has reviewed all accounts related to such sales in accordance with the procedures identified in §1.1471-4(c) applicable to preexisting accounts and has redeemed or retired any, or caused the restricted fund to transfer the securities to a distributor that is a participating FFI or reporting Model 1 FFI securities which were sold to specified U.S. persons, passive NFFEs with one or more substantial U.S. owners, or nonparticipating FFIs.

Part XII Nonreporting IGA FFI26 I certify that the entity identified in Part I:

- Meets the requirements to be considered a nonreporting financial institution pursuant to an applicable IGA between the United States and _____;
- Is treated as a _____ under the provisions of the applicable IGA (see instructions); **and**
- If you are an FFI treated as a registered deemed-compliant FFI under an applicable Model 2 IGA, provide your GIIN: _____

Part XIII Foreign Government, Government of a U.S. Possession, or Foreign Central Bank of Issue

- 27 I certify that the entity identified in Part I is the beneficial owner of the payment and is not engaged in commercial financial activities of a type engaged in by an insurance company, custodial institution, or depository institution with respect to the payments, accounts, or obligations for which this form is submitted (except as permitted in §1.1471-6(h)(2)).

Part XIV International Organization

Check box 28a or 28b, whichever applies.

- 28a I certify that the entity identified in Part I is an international organization described in section 7701(a)(18).
- b I certify that the entity identified in Part I:
- is comprised primarily of foreign governments;
 - is recognized as an intergovernmental or supranational organization under a foreign law similar to the International Organizations Immunities Act;
 - The benefit of the entity's income does not inure to any private person;
 - is the beneficial owner of the payment and is not engaged in commercial financial activities of a type engaged in by an insurance company, custodial institution, or depository institution with respect to the payments, accounts, or obligations for which this form is submitted (except as permitted in §1.1471-6(h)(2)).

Part XV Exempt Retirement Plans

Check box 29a, b, c, d, e, or f, whichever applies.

- 29a I certify that the entity identified in Part I:
- is established in a country with which the United States has an income tax treaty in force (see Part III if claiming treaty benefits);
 - is operated principally to administer or provide pension or retirement benefits; **and**
 - is entitled to treaty benefits on income that the fund derives from U.S. sources (or would be entitled to benefits if it derived any such income) as a resident of the other country which satisfies any applicable limitation on benefits requirement.
- b I certify that the entity identified in Part I:
- is organized for the provision of retirement, disability, or death benefits (or any combination thereof) to beneficiaries that are former employees of one or more employers in consideration for services rendered;
 - No single beneficiary has a right to more than 5% of the FFI's assets;
 - is subject to government regulation and provides annual information reporting about its beneficiaries to the relevant tax authorities in the country in which the fund is established or operated; **and**
 - is generally exempt from tax on investment income under the laws of the country in which it is established or operates due to its status as a retirement or pension plan;
 - Receives at least 50% of its total contributions from sponsoring employers (disregarding transfers of assets from other plans described in this part, retirement and pension accounts described in an applicable Model 1 or Model 2 IGA, other retirement funds described in an applicable Model 1 or Model 2 IGA, or accounts described in §1.1471-5(b)(2)(i)(A));
 - Either does not permit or penalizes distributions or withdrawals made before the occurrence of specified events related to retirement, disability, or death (except rollover distributions to accounts described in §1.1471-5(b)(2)(i)(A) (referring to retirement and pension accounts), to retirement and pension accounts described in an applicable Model 1 or Model 2 IGA, or to other retirement funds described in this part or in an applicable Model 1 or Model 2 IGA); **or**
 - Limits contributions by employees to the fund by reference to earned income of the employee or may not exceed \$50,000 annually.
- c I certify that the entity identified in Part I:
- is organized for the provision of retirement, disability, or death benefits (or any combination thereof) to beneficiaries that are former employees of one or more employers in consideration for services rendered;
 - Has fewer than 50 participants;
 - is sponsored by one or more employers each of which is not an investment entity or passive NFFE;
 - Employee and employer contributions to the fund (disregarding transfers of assets from other plans described in this part, retirement and pension accounts described in an applicable Model 1 or Model 2 IGA, or accounts described in §1.1471-5(b)(2)(i)(A)) are limited by reference to earned income and compensation of the employee, respectively;
 - Participants that are not residents of the country in which the fund is established or operated are not entitled to more than 20 percent of the fund's assets; **and**
 - is subject to government regulation and provides annual information reporting about its beneficiaries to the relevant tax authorities in the country in which the fund is established or operates.
- d I certify that the entity identified in Part I is formed pursuant to a pension plan that would meet the requirements of section 401(a), other than the requirement that the plan be funded by a trust created or organized in the United States.
- e I certify that the entity identified in Part I is established exclusively to earn income for the benefit of one or more retirement funds described in this part or in an applicable Model 1 or Model 2 IGA, accounts described in §1.1471-5(b)(2)(i)(A) (referring to retirement and pension accounts), or retirement and pension accounts described in an applicable Model 1 or Model 2 IGA.

Part XV Exempt Retirement Plans (Continued)I certify that the entity identified in Part I:

- is established and sponsored by a foreign government, international organization, central bank of issue, or government of a U.S. possession (each as defined in §1.1471-6) or an exempt beneficial owner described in an applicable Model 1 or Model 2 IGA to provide retirement, disability, or death benefits to beneficiaries or participants that are current or former employees of the sponsor (or persons designated by such employees); or
- is established and sponsored by a foreign government, international organization, central bank of issue, or government of a U.S. possession (each as defined in §1.1471-6) or an exempt beneficial owner described in an applicable Model 1 or Model 2 IGA to provide retirement, disability, or death benefits to beneficiaries or participants that are not current or former employees of such sponsor, but are in consideration of personal services performed for the sponsor.

Part XVI Entity Wholly Owned by Exempt Beneficial Owners30 I certify that the entity identified in Part I:

- is an FFI solely because it is an investment entity;
- Each direct holder of an equity interest in the investment entity is an exempt beneficial owner described in §1.1471-6 or in an applicable Model 1 or Model 2 IGA;
- Each direct holder of a debt interest in the investment entity is either a depository institution (with respect to a loan made to such entity) or an exempt beneficial owner described in §1.1471-6 or an applicable Model 1 or Model 2 IGA.
- Has provided an owner reporting statement that contains the name, address, TIN (if any), chapter 4 status, and a description of the type of documentation provided to the withholding agent for every person that owns a debt interest constituting a financial account or direct equity interest in the entity; and
- Has provided documentation establishing that every owner of the entity is an entity described in §1.1471-6(b), (c), (d), (e), (f) and/or (g) without regard to whether such owners are beneficial owners.

Part XVII Territory Financial Institution31 I certify that the entity identified in Part I is a financial institution (other than an investment entity) that is incorporated or organized under the laws of a possession of the United States.**Part XVIII Excepted Nonfinancial Group Entity**32 I certify that the entity identified in Part I:

- is a holding company, treasury center, or captive finance company and substantially all of the entity's activities are functions described in §1.1471-5(e)(5)(i)(C) through (E);
- is a member of a nonfinancial group described in §1.1471-5(e)(5)(i)(B);
- is not a depository or custodial institution (other than for members of the entity's expanded affiliated group); and
- Does not function (or hold itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle with an investment strategy to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

Part XIX Excepted Nonfinancial Start-Up Company33 I certify that the entity identified in Part I:

- Was formed on (or, in the case of a new line of business, the date of board resolution approving the new line of business) _____ (date must be less than 24 months prior to date of payment);
- is not yet operating a business and has no prior operating history or is investing capital in assets with the intent to operate a new line of business other than that of a financial institution or passive NFFE;
- is investing capital into assets with the intent to operate a business other than that of a financial institution; and
- Does not function (or hold itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

Part XX Excepted Nonfinancial Entity in Liquidation or Bankruptcy34 I certify that the entity identified in Part I:

- Filed a plan of liquidation, filed a plan of reorganization, or filed for bankruptcy on _____;
- During the past 5 years has not been engaged in business as a financial institution or acted as a passive NFFE;
- is either liquidating or emerging from a reorganization or bankruptcy with the intent to continue or recommence operations as a nonfinancial entity; and
- Has, or will provide, documentary evidence such as a bankruptcy filing or other public documentation that supports its claim if it remains in bankruptcy or liquidation for more than three years.

Part XXI 501(c) Organization35 I certify that the entity identified in Part I is a 501(c) organization that:

- Has been issued a determination letter from the IRS that is currently in effect concluding that the payee is a section 501(c) organization that is dated _____; or
- Has provided a copy of an opinion from U.S. counsel certifying that the payee is a section 501(c) organization (without regard to whether the payee is a foreign private foundation).

Part XXII Non-Profit Organization

- 36 I certify that the entity identified in Part I is a non-profit organization that meets the following requirements:
- The entity is established and maintained in its country of residence exclusively for religious, charitable, scientific, artistic, cultural or educational purposes;
 - The entity is exempt from income tax in its country of residence;
 - The entity has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
 - Neither the applicable laws of the entity's country of residence nor the entity's formation documents permit any income or assets of the entity to be distributed to, or applied for the benefit of, a private person or non-charitable entity other than pursuant to the conduct of the entity's charitable activities or as payment of reasonable compensation for services rendered or payment representing the fair market value of property which the entity has purchased; **and**
 - The applicable laws of the entity's country of residence or the entity's formation documents require that, upon the entity's liquidation or dissolution, all of its assets be distributed to an entity that is a foreign government, an integral part of a foreign government, a controlled entity of a foreign government, or another organization that is described in this Part XXII or escheats to the government of the entity's country of residence or any political subdivision thereof.

Part XXIII Publicly Traded NFFE or NFFE Affiliate of a Publicly Traded Corporation

Check box 37a or 37b, whichever applies.

- 37a I certify that:
- The entity identified in Part I is a foreign corporation that is not a financial institution; **and**
 - The stock of such corporation is regularly traded on one or more established securities markets, including _____ (name one securities exchange upon which the stock is regularly traded).
- b I certify that:
- The entity identified in Part I is a foreign corporation that is not a financial institution;
 - The entity identified in Part I is a member of the same expanded affiliated group as an entity the stock of which is regularly traded on an established securities market;
 - The name of the entity, the stock of which is regularly traded on an established securities market, is _____; **and**
 - The name of the securities market on which the stock is regularly traded is _____.

Part XXIV Excepted Territory NFFE

- 38 I certify that:
- The entity identified in Part I is an entity that is organized in a possession of the United States;
 - The entity identified in Part I:
 - Does not accept deposits in the ordinary course of a banking or similar business,
 - Does not hold, as a substantial portion of its business, financial assets for the account of others, or
 - Is not an insurance company (or the holding company of an insurance company) that issues or is obligated to make payments with respect to a financial account; **and**
 - All of the owners of the entity identified in Part I are bona fide residents of the possession in which the NFFE is organized or incorporated.

Part XXV Active NFFE

- 39 I certify that:
- The entity identified in Part I is a foreign entity that is not a financial institution;
 - Less than 50% of such entity's gross income for the preceding calendar year is passive income; **and**
 - Less than 50% of the assets held by such entity are assets that produce or are held for the production of passive income (calculated as a weighted average of the percentage of passive assets measured quarterly) (see instructions for the definition of passive income).

Part XXVI Passive NFFE

- 40a I certify that the entity identified in Part I is a foreign entity that is not a financial institution (other than an investment entity organized in a possession of the United States) and is not certifying its status as a publicly traded NFFE (or affiliate), excepted territory NFFE, active NFFE, direct reporting NFFE, or sponsored direct reporting NFFE.

Check box 40b or 40c, whichever applies.

- b I further certify that the entity identified in Part I has no substantial U.S. owners, or
- c I further certify that the entity identified in Part I has provided the name, address, and TIN of each substantial U.S. owner of the NFFE in Part XXX.

Part XXVII Excepted Inter-Affiliate FFI

- 41 I certify that the entity identified in Part I:
- Is a member of an expanded affiliated group;
 - Does not maintain financial accounts (other than accounts maintained for members of its expanded affiliated group);
 - Does not make withholdable payments to any person other than to members of its expanded affiliated group that are not limited FFIs or limited branches;
 - Does not hold an account (other than a depository account in the country in which the entity is operating to pay for expenses) with or receive payments from any withholding agent other than a member of its expanded affiliated group; **and**
 - Has not agreed to report under §1.1471-4(d)(2)(i)(C) or otherwise act as an agent for chapter 4 purposes on behalf of any financial institution, including a member of its expanded affiliated group.

Nonresident Alien Professional Services Contract

(This Contract form should be completed before work commences.)

For more information on NRA Payments, please refer to section 77 of the Manual of Business Procedures.

Michigan State University (referred to in the contract as the University) enters into a binding agreement with:

Business Name/Authorized Contractor:		Do not post Social Security or Tax ID numbers to this Contract.	
Individual Name or Primary Business Partner:		E-Mail:	Phone:
Address:		City:	Country of Citizenship:
State or Province:		Postal Code:	Country of Residence:
Total Amount for Services:	MSU Account Number	Rate of Pay: (hourly, daily or other)	Visa Type: (if applicable)
Begin Date:	End Date:	Description of Services: <i>(engagements greater than \$15,000 need sole source documentation)</i>	
Location Where Services Will Be Provided: <i>(including country)</i>			
Begin Date:	End Date:	Description of Services: <i>(engagements greater than \$15,000 need sole source documentation)</i>	
Location Where Services Will Be Provided: <i>(including country)</i>			
Total Amount for Expenses:		Nature of Expenses:	
<input type="checkbox"/> Paid through MSU Travel Office		Department's Responsibility to Support Services:	

Nonresident Alien Professional Services Contract

CONDITIONS AND ROUTING PROCEDURE:

1. **INDEPENDENT CONTRACTOR.** The Contractor will act as an independent contractor under this Contract, and neither the Contractor nor any employee or agent of the Contractor is an employee of the University due to this Contract. The Contractor will provide the services and achieve the results specified by the University free from the direction or control of the University as to means and methods of performance.
2. **NONRESIDENT ALIEN.** If the Contractor is a nonresident alien performing services in the United States or its territories, the Contractor agrees that proof of visa status (I-94 form, copy of visa and passport) documenting authorization to receive payment for work performed along with a U.S. tax ID number will be provided to the University prior to payment by the University.
3. **ACCESS TO RECORDS.** The Contractor shall maintain reasonable records, including evidence that the services actually were performed and the identity of all individuals paid for such services, and shall allow access to those records by the University, any sponsor, the State of Michigan, or the Comptroller General of the United States or their authorized representatives.
4. **OWNERSHIP OF WORK PRODUCTS.** Any discovery, patent, copyright, invention, work papers, software, software applications, written materials, publications, data, information, by-product or end-product arising as a direct result of the performance of this Contract shall be the sole property of the University. The University hereby grants to Contractor a non-exclusive royalty-free right and license to use for the Contractor's internal non-commercial research and development activities all unpublished data, know-how, materials and unpatented inventions or discoveries arising from this contract.
5. **TERMINATION.** Either the University or the Contractor may terminate its obligations under this Contract by giving the other party prior written notice of such termination, specifying the intended date of termination; provided, however, that upon request from the University, the Contractor shall continue performance until the University can find a replacement contractor or for an additional thirty (30) days after the specified termination date, whichever is the shorter time period. Upon termination, an equitable settlement shall be made for actual costs incurred by the Contractor up to the date of termination.
6. **UNIVERSITY EMPLOYEES.** The Contractor will not hire any employee of the University to perform any services covered by this agreement without prior written approval from the Office of the Provost for academic employees or from the Assistant Vice President for Human Resources for nonacademic employees.
7. **CONFIDENTIAL INFORMATION.** The Contractor shall not publish or otherwise disclose, except to the University and except matters of public record, any information or data obtained in the course of performance of this Contract from private individuals, organizations, or public agencies, in a publication by which the information or data furnished by any particular person or establishment can be identified, except with the written consent of such person or establishment.
8. **ACKNOWLEDGMENT OF SPONSORSHIP.** The Contractor agrees that in any publication acknowledgment shall be made of sponsorship by the University and/or other sponsor by use of the following statement: "This work was performed under the sponsorship of THE BOARD OF TRUSTEES OF MICHIGAN STATE UNIVERSITY and (insert any other sponsor). This work does not necessarily represent the views of the University or the sponsoring agency." If the publication is copyrighted, the statement, "Reproduction of this article, with the customary credit to the source, is permitted." shall be added. With the exception of acknowledging sponsorship of research, the name of the University may not be used in publications, news releases, advertising, speeches, technical papers, photographs, and other releases of information regarding this Contract or data developed under this Contract without written approval of the University.
9. **CONFLICT OF INTEREST.** The Contractor affirms that to the best of his/her knowledge there exists no actual or potential conflict between Contractor's family, business, or financial interests and his/her services under this Contract, and in the event of change in either his/her private interests or services under this Contract, he/she will inform the University regarding possible conflict of interest which may arise as a result of such change.
10. **TOTAL AGREEMENT.** This Contract contains the entire agreement between the parties superseding any prior or concurrent agreements as to the services being provided, and no oral or written terms or conditions which are not contained in this Contract shall be binding. This Contract may not be changed except by mutual agreement of the parties reduced to writing and signed.
11. **ASSIGNMENT/TRANSFER/SUBCONTRACTING.** The Contractor shall not assign, transfer, subcontract, or otherwise give to or impose on any other party any obligation or right of the Contractor under this Contract, without the prior written consent of the University.
12. **INDEMNIFICATION.** The Contractor shall indemnify, defend and hold the University harmless from any charge, fine, penalty, or judgment arising out of, or in any way resulting from, the Contractor's performance under this Contract, and should the University be required to make payments or incur costs of defense (including reasonable attorney fees) for any such reason, the Contractor shall fully reimburse the University. The obligations of the Contractor under this paragraph 12 shall survive any termination of this Contract or completion of the Contractor's performance under this Contract.

CONTRACTOR ACCEPTANCE:

I agree to the terms above and on the first page of this Contract. The amount of the charges for services under this Contract does not exceed my normal and customary rate. I am not a current University employee or enrolled as an MSU student.

Contractor Signature:

Date:

Nonresident Alien Professional Services Contract

MSU Department Name:		
Contact Name:	Phone:	E-Mail:
Department Address:		
Michigan State University Acceptance: The service to be provided is necessary, the cost for the service is reasonable, and the service cannot now be provided by current University employees. The department has retained documentation of the reasonableness of the cost and the selection process employed to secure the most qualified contractor available for contracts of \$15,000 or less. Sole source documentation is attached for all contracts greater than \$15,000.		
Department Authorized Signature:		Date:
Contracts and Grants Approval: <i>(if applicable)</i>		Date:
Dean, Vice President or Designate Signature: <i>(if greater than \$10,000)</i>		Date:
Purchasing Signature: <i>(if greater than \$15,000)</i>		Date:

The Contract form should be completed, including signatures, before work commences.

Procedure for signature requirements on contract:

1. Contractor and authorized signer for the account to be charged.
2. Contract and Grant Administration if charging an RC account.
3. Dean, Vice President or Designate if the contract is greater than \$10,000.
4. Purchasing Department approval is required if the contract is greater than \$15,000.

Please refer to Section 77 of the Manual of Business Procedures for specific procedures on determining independent contractor status and processing payments. Please contact Accounting (517-355-5000) with any questions.

Complete this section when processing payments for partial performance of services

	Current Payment (A)	Prior Payment(s) B	Total Payments (A + B)
Personal Services	\$ _____	_____	\$ _____
Expenses	_____	_____	_____
Total	\$ _____	_____	\$ _____

This is a Renewal Yes No

IMPREST ADVANCES

Imprest advances are issued for on-going research projects, generally for large dollar amounts, that must be sustained and replenished for the duration of the grant and/or project. Imprest advances should be a minimum of \$20,000, and have a time span of at least four months. Chair or dean approval is required in order to issue an Imprest advance. Requests must also be routed to the Contract and Grant Administration office for their approval. The due date should be within 1-2 months after the end date of the grant.

While the project is ongoing, receipts are processed on a Disbursement Voucher (DV) using Payment Reason R – Replenish Open Ended Cash Advances. The Accounting Office will set up a SP vendor to be used for the advance (format: Cash Advance – Custodian Name). This will generate a check back to the advance holder (the DV can also be completed to send a wire).

When the project has concluded, receipts are processed on a Distribution of Income and Expense (DI) document. The account number in the “From” section of the DI should be XZ052171, and the object code should be 6173. The “To” section of the DI should contain the appropriate accounts and object codes to charge for the expenses. The DI document reduces the outstanding amount of the advance per the receipts (the total of the DI must match the total of the receipts). Any cash remaining should be taken to the Cashier’s Office and deposited against the open advance (the advance number is needed by the Cashier’s Office in order to properly credit the advance).

It is common for the advance holder to set up at least three bank accounts: a US bank account into which the MSU checks will be deposited; and two accounts in the country where business will be conducted (US currency and foreign currency). Funds are transferred from the US account to the foreign accounts by the advance holder as needed. All accounts should be set up in the name of the advance holder (not in MSU’s name), and be non-interest bearing.

NOTE: The IRS has reporting requirements for those that have signature authority on a foreign bank account. See [Publication 4261](#) . There are also reporting requirements for the University if a foreign bank account is opened to conduct University business. Please notify the Financial & Cost Analysis department (email epowers@ctrl.msu.edu, or phone 355-5029) about any foreign accounts.




MICHIGAN STATE
UNIVERSITY

TO: Lee Hunter, Manager
Controller's Office/Accounting
360 Administration Building

VIA: 
James Kells, Chair – Dept Plant Soil and Microbial Sciences
Plant Soil Science Building

VIA: 
Evonne Pedawit
Contracts and Grants Administration
301 Administration Building

FROM: 
Sieglinde Snapp
Professor
Dept Plant Soil and Microbial Sciences
490 Plant Soil Sci Building

DATE: July 19, 2012

SUBJECT: Request for a petty cash advance for Dr. Regis Chikowo in support of research project "Transforming Key Production Systems: Maize Mixed East and Southern Africa", account RC101390.



DEPARTMENT OF
**PLANT, SOIL &
MICROBIAL
SCIENCES**

Michigan State University
Plant & Soil
Sciences Building
East Lansing, MI
48824-1325
FAX: 517/432-2242

1. This memo is to request a petty cash advance for Dr. Regis Chikowo in the amount of \$27,300. Dr. Chikowo is a postdoctoral research associate in the department of Plant, Soil and Microbial Sciences, MSU ID #108512, working in Malawi and Zimbabwe on the above described research project, supported by RC101390. Dr. Chikowo is appointed through May 31, 2013.
2. Dr. Chikowo is the new MSU in-country coordinator for this research program. It is anticipated that in-country expenses for this project will be paid from this imprest account through September 30, 2012, thus this petty cash advance will have an anticipated end date of October 31, 2012.

MICHIGAN STATE
UNIVERSITY

- It is anticipated that this advance will provide adequate funds to cover expenditures, contract payments, reimbursements and banking process, including conversion of U.S. dollars to local currency.

Anticipated operational costs are included in the imprest budget shown below.

Please send the promissory note to me at snapp@msu.edu when the petty cash advance is approved. I will forward to Dr. Chikowo for his signature, and return it when signed.

Thank you for your kind consideration and assistance in this matter. If any questions arise, please contact me at 517 282 5644 or by email.

Budget for Transforming Key Production Systems: Maize Mixed East and Southern Africa " account RC101390 operations in Zimbabwe and Malawi

Budget Item	July 15-Aug 30	September	Total
Local contract personnel	1000	3000	4000
Travel	3000	2000	5000
Transport (vehicle)		8000	8000
Supplies and communication	1000	2000	3000
Workshop	2000	4000	6000
Admin. Bank fee Univ Zimb	350	950	1300
Total			27300



DEPARTMENT OF
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48824-1325
FAX: 517/432-2242

International Employment Options



Chris Bargerstock
chrisb@msu.edu

Immigration Basics

- ◆ Nonimmigrant Status – remain temporarily in US and has foreign residence abroad
- ◆ Lawful Permanent Resident (LPR) – international who intends to remain in the US permanently
- ◆ US citizenship

Nonimmigrant Visa Status

- ◆ Generally require sponsorship by employer or school
- ◆ Enter US for specific reason: visit, study, work
- ◆ Time period in US is limited
- ◆ Spouse and minor child granted derivative status, usually no employment some exceptions: J-2 and E-3
- ◆ Generally requires intent to return home after stay in US

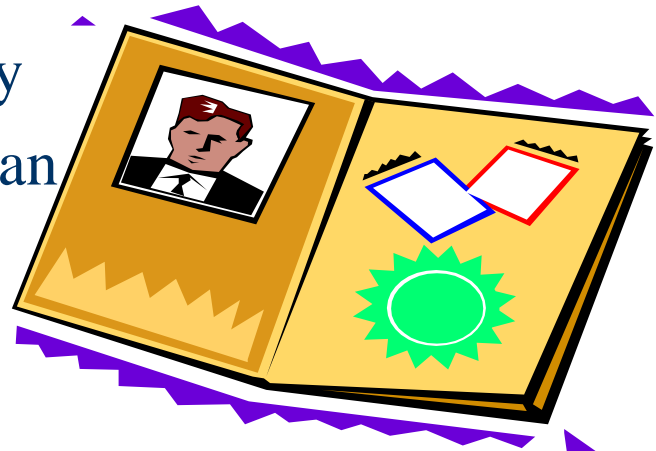
Visa Status vs. Visa Stamp

- ◆ Visa stamp in a student/scholars passport is like a KEY . . . it is only for entry. It is OK for a student/scholar visa stamp to expire while in the US. Visa stamp does not determine status, but effects ability to travel and to reenter US.

VISA STATUS: receive when

International enters the US legally

VISA STAMP: seal in passport can only be obtained outside the US at US Consulate/Embassy



Common Nonimmigrant Classifications at MSU

- ◆ B-1/WB Visitor – Business
- ◆ B-2/WT Visitor – Travel
- ◆ H-1B Worker for Specialty Occupations
- ◆ O-1 Extraordinary in: Science/Art/Business/Education/Athletics
- ◆ TN – Trade NAFTA
- ◆ F-1 Student
- ◆ J-1 Student
- ◆ J-1 Short Term Scholar
- ◆ J-1 Prof/Researcher
- ◆ E-3 Australian workers

B-1 Visitor for Business

- ◆ Nonimmigrant intent
- ◆ Unabandoned foreign residence
- ◆ Specific duration in US
- ◆ Adequate funds
- ◆ Documentation of purpose of visit
- ◆ Not employment
- ◆ 9-5-6 rule:
- ◆ “usual academic activity” can be paid honoraria and expenses for a period of 9 days or less at any single institution. Limit 5 institutions within a six month period.

F-1 Student Employment

- ◆ Enrolled full-time
- ◆ On campus 20hrs/wk
- ◆ 20+hrs when class is not in session
- ◆ Off-campus:
- ◆ Economic hardship
- ◆ Curricular practical training (CPT): proof endorsed I-20
- ◆ Optional practical Training (OPT): related to academic field; must have EAD; 12 mo. max
- ◆ STEM OPT: 17 month

J Exchange Visitor Categories

- ◆ J-1 Student: degree or non-degree
- ◆ J-1 Professor/Researcher: 5 year max.
- ◆ J-1 Short term scholar: 6 months max.
- ◆ Engaged in defined activities
- ◆ Scholars are here to teach and perform research; incidental coursework only
- ◆ No “in” country change of category (eg. from scholar to student)

J-1 Student Employment

- ◆ Enrolled full-time
- ◆ On campus 20 hrs/wk
- ◆ 20+ hrs when class is not in session
- ◆ Off-campus due to unforeseen economic hardship
- ◆ 18 months Academic Training
- ◆ 36 months Academic Training for Postdocs
- ◆ Must have job offer
- ◆ OISS approves, no need for DHS authorization

J-1 scholar

Advantages

- ◆ Quick processing (new J web applications with start date 6-8 weeks into future)
- ◆ Less paperwork but still need export control form to proceed

Disadvantages

- ◆ 2 year home rule will apply to some based on the skills list and those with US or home govt. funding
- ◆ J-1/J-2's are required by law to carry health insurance including repatriation & medical evacuation coverage.

TN Professional

- ◆ Must be a citizen of Canada or Mexico
- ◆ Employer must provide proof of employment to apply
- ◆ Entering US to perform professional services from the profession list
- ◆ To perform professional services: require Bachelor or Licenciatura degree in field
- ◆ Can request TN up to 3 years

E-3 employee

- ◆ Australian Citizens only 10,500 per year
- ◆ Specialty occupation
- ◆ Requires Labor Condition Application including actual wage, internal notice and prevailing wage.
- ◆ Obtain E visa stamp at at US consulate abroad and then enter for status

H-1B General Criteria

- ◆ Employment based visa status
- ◆ Employer specific: employer is sponsor, international is beneficiary
- ◆ Specialty occupation
- ◆ Position must require a bachelor's degree or higher in a specific field
- ◆ Employee must have a bachelor's degree or higher in a specific field

H-1B Parameters

- ◆ Each individual is limited to 6 aggregate years
- ◆ Maximum petition at one time is 3 years
- ◆ Must meet the prevailing wage
- ◆ Job-site specific (city)
- ◆ Processing Time: 3-4 months (15 days if premium processing utilized for extra \$1225 filing fee)
- ◆ Regular Costs: \$825 for USCIS filing fees
- ◆ Return Transportation Costs
- ◆ Export Control Form required

O-1 Extraordinary Ability

- ◆ Fields of science, education, & business
- ◆ Requires employer sponsorship
- ◆ Initially 3 years with extensions
- ◆ Obtained in lieu of H-1 when individual is subject to 2 year rule
- ◆ Substantial documentation & letter from “peer group”
- ◆ Export Control Form required

Issues to Consider

- ◆ MSU A/ZPID & ID card-every student has APID and every scholar obtains ZPID; need access to lab, housing, etc.
- ◆ I-9 for employees including student employees before work begins, complete Section 1.
- ◆ Social Security Card; strict rules who can obtain and what they need; OISS can be resource and for F & J, OISS needs to provide SSN letter.

Issues to Consider

- ◆ Driver's license: OISS has some info.
- ◆ Health Insurance: Benefits: 353-4434 or studentinsurance@hr.msu.edu or OISS
- ◆ University Benefits (9 months eligibility)
- ◆ Tenure track – H-1 Only
- ◆ Housing: depts should assist int'l to secure housing especially for J-1s
- ◆ Travel Issues: on MSU's program contact OISS or contact program sponsor

Legal Permanent Residence (LPR)

A U.S. alien immigrant is commonly referred to:

Immigrant

permanent resident

lawful/legal permanent resident

green card holder



Legal Permanent Residency (LPR)

Most common options utilized at MSU:

- ◆ Outstanding Professor/Researcher – no labor certification needed
- ◆ PERM “Special Handling” – teachers only
- ◆ PERM Labor Certification – standard

Family-based:(MSU does not process)

- ◆ Marriage based LPR
- ◆ Diversity lottery

Office for International Students and Scholars (OISS)

- International Center, 427 N Shaw,
Room 105
- 517-353-1720 (phone)
- 517-355-4657 (fax)
- oiss@msu.edu (email)
- www.oiss.msu.edu (website)

THANK YOU FOR ATTENDING



**Materials Posted on the SPROUT site:
<https://sprout.vprgs.msu.edu/training/electives/>**