**Fixed-Price Agreement Closeout Checklist**

**For ALL Other Schools except School of Medicine**

(Award Range PXXXX - UXXXX)

***(Only fill out this form if residual balance is $50K or 25% or more of the funded amount, whichever less)***

***This checklist is in addition to the regular closeout checklist***

|  |  |  |  |
| --- | --- | --- | --- |
| **PRINCIPAL INVESTIGATOR** |  | | |
| **AWARD MANAGER** |  | | |
| **OSR CLOSEOUT ACCOUNTANT** |  | | |
| SPONSOR |  | AWARD END DATE |  |
| ORACLE AWARD |  | TOTAL FUNDED AMOUNT |  |
| SPO # |  | TOTAL PAYMENT RECEIVED |  |

#### ***OSR Research Accountant completes Section 1***

#### **SECTION 1**

#### **BUDGET VS. EXPENSE ANALYSIS (Section 1A): *OSR Accountant completes and sends to department administrator***

#### **Please fill out the Budget vs. Actual Expense information and provide justification for the variance.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Budget ($)** | **Actual Expense ($)** | **Variance ($)** | **Variance (%)** |
| **Salaries and Benefits:** |  |  |  |  |
| **PI Salary:** |  |  |  |  |
| **Travels:** |  |  |  |  |
| **Equipment:** |  |  |  |  |
| **Tuition:** |  |  |  |  |
| **Others:** |  |  |  |  |
| **Total:** |  |  |  |  |

**CONTRACT TERMS**

Reviewed terms of contract and verified any remaining earned balance is **not** required to be returned to the sponsor.

BI 235 report shows receipts = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### ***Department Administrator completes Section 2***

#### **SECTION 2**

#### **CONFIRMATION OF FUNDS, EXPENSES & COMMITMENTS**

Payments received agree with the expected payment amount based on the sponsor’s agreement

Reviewed salary expenses for the PI, verified the appropriate salary amount was charged

Commitments have been cleared

Expenses are complete and appropriately charged

### **IS THIS AN EARLY TERMINATION** YES / NO

If YES, then

The new end date is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A revised award notice has been issued by contract officer

**DELIVERABLES COMPLETION**

Have all sponsor’s requirements and deliverables been met? YES / NO

If YES, please indicate evidence of sponsor’s satisfaction of deliverables: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **REMAINING BALANCE**

Transfer balance minus appropriate indirect costs to an unrestricted award, Non-Sponsored PTA \_\_\_\_\_\_\_\_\_\_\_\_\_ (Please verify the non-sponsored PTA does not carry infrastructure charge if the sponsored PTA carries full F&A rate)

Total Remaining Balance \_\_\_\_\_\_\_\_\_\_\_\_ - F&A @ \_\_\_% \_\_\_\_\_\_\_\_\_\_\_\_ =\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Direct Balance to be transferred

(\*department can send request for a designated revenue award from Fund Accountant)

#### **Departmental justification if remaining balance is $50,000 or 25% or more of the funded amount, whichever is less:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Department Administrator Completed/Approved**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Department/School Compliance Officer Reviewed/Approved** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_