

**REQUEST FOR INDIRECT COST WAIVER**

I. Project Director: \_\_\_\_\_  
Department: \_\_\_\_\_  
Project Title: \_\_\_\_\_  
Project Sponsor: \_\_\_\_\_  
Project Period: \_\_\_\_\_

II. Fiscal Agent (check one):             RF             UBFS

- III.     Yes     No    1. The Sponsor has imposed a limit on the funds it will award in support of the proposed project.
- Yes     No    2. The Sponsor has required either a scope of work or a level of effort results in total costs in excess of the support which the Sponsor will award.
- Yes     No    3. University units which will conduct the proposed project will contribute to the total University subsidy.
- Yes     No    4. Extra service compensation will be paid to the Project Director or other member of the project staff.
- Yes     No    5. Salary budgeted for the Project Director will be paid to an IFR account.
6. Briefly describe below the University, School/Faculty, or Departmental interest(s) that will be served by conducting the proposed project without fully recovering the institutional indirect costs which will be incurred in conducting the project. (Use continuation pages if needed.)

5. Budget Summary

	<u>FULL RECOVERY</u>	<u>PARTIAL RECOVERY</u>	
	<u>SPONSOR</u>	<u>SPONSOR</u>	<u>UB</u>
A. SALARIES	_____	_____	_____
B. FRINGE BENEFITS	_____	_____	_____
C. TRAVEL	_____	_____	_____
D. SUPPLIES	_____	_____	_____
E. CONSULTANTS	_____	_____	_____
F. EQUIPMENT	_____	_____	_____
G. OTHER DIRECT	_____	_____	_____
H. TOTAL DIRECT COSTS	_____	_____	_____
I. INDIRECT COST BASE	_____		_____
J. INDIRECT COSTS			
1. FULL: ___ OF I.	A. _____		C. _____
2. PARTIAL: ___ OF H.		B. _____	
K. TOTAL PROJECT COSTS	_____	_____	_____
L. INDIRECT COSTS TO BE WAIVED, J1A - J2B:		<div style="border: 1px solid black; width: 100px; height: 15px;"></div>	
M. IFR salary requested:	_____		

6. Department/Faculty/School Endorsement

Performance of the proposed project without fully recovering the indirect cost which it will incur will be in the best interest of the Faculty/School. In addition to waived indirect costs, the project will be subsidized with School/Faculty and/or Department resources as indicated in the proposed budget.

\_\_\_\_\_, Chair  
 (Signature) \_\_\_\_\_ Date \_\_\_\_\_

Department of : \_\_\_\_\_

\_\_\_\_\_, Dean  
 (Signature) \_\_\_\_\_ Date \_\_\_\_\_

School/Faculty of: \_\_\_\_\_

## **INSTRUCTIONS FOR COMPLETING REQUEST FOR INDIRECT/F&A COST WAIVER**

**A minimum of ten (10) working days should be allowed for processing of Requests for Indirect/F&A Cost Waiver. Questions about completing the Request or about the review process should be addressed to the cognizant Grant and Contract Administrator.**

### Section I

Provide the name and Department of the Project Director, the title of the proposed project, the sponsor to which the proposal is to be submitted and the period for which the waiver is requested.

### Section II

Indicate whether the fiscal agent for the proposed project will be the Research Foundation (RF) or UB Foundation Services, Inc. (UBFS).

### Section III

- 1.- 3. Circle Yes (Y) or No (N) for each item as appropriate for the circumstances which pertain to the project for which the waiver is requested.
4. Briefly state the institutional interest served by conducting the proposed project without fully recovering the institutional costs incurred in conducting the project.
5. A - G Complete the budget summary by entering the totals for each category of cost. Under "FULL RECOVERY", enter the cost category totals as the budget would be submitted to the Sponsor if a waiver could not be requested. Under "PARTIAL RECOVERY - SPONSOR", enter the cost category totals corresponding to the budget which will be submitted to the Sponsor if the waiver is approved. In the "UB" column, list the cash and/or in-kind support to be provided to the project from departmental and/or decanal resources.
5. H "TOTAL DIRECT COSTS" (TDC) is the sum of A through G.
5. I The "INDIRECT COST BASE" is calculated differently for different sponsors.  
For
  - a) sponsors that specify a unique indirect/F&A cost base (e.g., salaries and wages only), use the base specified by the sponsor;

- b) federally sponsored projects (including federal flow-through), it is the sum of all direct costs except equipment, patient care, alterations or renovation, rental and/or maintenance of off-campus sites, tuition remission, and student support costs.
- b) nonfederal sponsors, it is the sum of A - G.

5. J Indirect Cost for

- a) "FULL RECOVERY" (J1A) is calculated by multiplying the Indirect Cost Base (line I) in the FULL RECOVERY column by the applicable full indirect/F&A cost rate (J1). For projects to be administered through UBFS, this rate includes the applicable indirect/F&A cost rate, plus the 10% UBFS administrative fee
- b) "PARTIAL RECOVERY-SPONSOR" (J2B) is calculated by multiplying line H (Total Direct Costs) in the PARTIAL RECOVERY-SPONSOR column, by the requested rate (J2).
- c.) "PARTIAL RECOVERY-UB" (J1C) is calculated by multiplying the Indirect Cost Base (line I) in PARTIAL RECOVERY-UB column times applicable full rate (J1).

5. K "TOTAL PROJECT COSTS" is the sum of Total Direct Costs (line H) plus Indirect Costs (line J).

5. L "TOTAL INDIRECT COSTS TO BE WAIVED" is calculated by subtracting partial indirect cost recovery (J2B) from full indirect cost recovery (J1A).

5. M Indicate amount from line 5.A that represents IFB salary.

- 6. Forward the completed Request and a copy of the proposal to the cognizant chairperson(s) and dean(s) for review and endorsement. Requests endorsed by the dean(s) are to be forwarded to the appropriate Grant and Contract Administrator, Sponsored Programs Administration, Suite 211 UB Commons. SPA will arrange for further review.