**Subawardee Risk and Responsibility Assessment (SRRA) – Snapshot Form**

All potential subawardees must have a current SRRA Snapshot (within the past 1 year) on file to be considered for a subaward. Based on the terms of the subaward, Pact may ask you to provide additional information as part of a full risk and responsibility assessment prior to award.

**General Information about Your Organization**

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| **Legal Name of Organization**  Click or tap here to enter text. | |
| **Organization Headquarters Address and website**  Click or tap here to enter text. | **Phone #**  Click or tap here to enter text. |
| **Email**  Click or tap here to enter text. |
| **Organization Type**  Choose an item. | **Number of Employees**  Click or tap here to enter text. |

**Organizational Governance and Legal Standing**

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| --- | --- | --- | --- |
| **Status of Board of Directors**  Choose an item. | **# of Board Members**  Click or tap here to enter text. | | **Date of Last Board Meeting**  Click or tap to enter a date. |
| **Name and email of Head of Organization**  Click or tap here to enter text. | **Name of CFO or Equivalent**  Click or tap here to enter text. | | **Name of Board Chairperson**  Click or tap here to enter text. |
| **Does any member of management have a relationship (spouse, child, sibling, parent) with a Pact or originating funder employee?**  Choose an item. If yes, click or tap here to explain. | | | |
| **Are you registered locally?**  Choose an item. If yes, click or tap here to enter the #. | | **Do you have a UEI #?**  Choose an item. If yes, click or tap here to enter the #. | |
| **Briefly describe any debarment or legal action directed towards your organization within the past 7 years, if applicable**  Click or tap here to enter text. | | | |

**Financial Information about Your Organization**

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| **Do you use accounting software?**  Choose an item. | | **For how many years are files maintained?**  Click or tap here to enter text. | | | | **Do you have and overhead rate?**  Choose an item. |
| **Have you received funding directly or indirectly as a subrecipient from the originating funder in the past 3 years?**  Choose an item. | | | | | | |
| **Indicate your annual revenue over the past 3 years in the boxes to the right** | **Year**  Click or tap here to enter text. | | **From Awards**  Click or tap here to enter text. | | **From Fees, Fundraising, Other Sources**  Click or tap here to enter text. | |
| **Year**  Click or tap here to enter text. | | **From Awards**  Click or tap here to enter text. | | **From Fees, Fundraising, Other Sources**  Click or tap here to enter text. | |
| **Year**  Click or tap here to enter text. | | **From Awards**  Click or tap here to enter text. | | **From Fees, Fundraising, Other Sources**  Click or tap here to enter text. | |
| **Number of Active Awards**  Click or tap here to enter text. | | | | **Average Award Value from the Past 3 Years**  Click or tap here to enter text. | | |
| **List any active awards that have a similar scope and location to the proposed work.**  Click or tap here to enter text. | | | | | | |
| **Organization Fiscal (accounting) year:** | | | | Click or tap here to enter text. | | |
| **Has the organization received $1M or more annually in USG funding for the past 3 years?**  Choose an item.  **If yes, please provide a copy of Single Audit reports for the past 3 years or confirm that audits are available in the Federal Audit Clearinghouse.** | | | | | | |

**References from Other Funders**

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| **Reference #1 Name, Organization, Contract Information, Award Amount**  Click or tap here to enter text. |
| **Reference #2 Name, Organization, Contract Information, Award Amount**  Click or tap here to enter text. |
| **Reference #3 Name, Organization, Contract Information, Award Amount**  Click or tap here to enter text. |

**Submission and Certification**

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| **Signature of Certifying Official from Subawardee** | | |
| **Name of Certifying Official from Subawardee**  Click or tap here to enter text. | **Title**  Click or tap here to enter text. | **Date**  Click or tap to enter a date. |

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| **For Pact Use Only** | | |
| **Signature of Pact Reviewer** | | |
| **Name of Pact Reviewer**  Click or tap here to enter text. | **Title**  Click or tap here to enter text. | **Date**  Click or tap to enter a date. |
| **Description of any findings and responses**  Click or tap here to enter text. | | |