

1301 Young Street
Dallas, TX 75202
PHONE: (214) 767-3261
FAX: (214) 767-3264

February 20, 2013

Ms. Elahe N. Russell
Director
Louisiana State University
204 Thomas Boyd Hall
Baton Rouge, LA 70803-2901

Dear Ms. Russell:

forwarded to you for your signature. This Agreement is between your organization and a member of my staff concerning the ED rates that may be used to recover these indirect costs on grants and contracts with the Federal Government.

Please have the Agreement signed by an authorized representative of your organization and fax or email to me, retaining the copy for your files. Our fax number is (214) 767-3264 and email address is Denise.Shirlee@nsc.hhs.gov. We will reproduce and distribute the Agreement to the appropriate agencies.

In addition, the Final Fringe Benefit Statement for the fiscal year ending June 30, 2013 is attached.

recovered (+) amounts are listed below:

		2011/2013	2012/2014
Main Campus	Over/Under	(1,099,159)	(8,104,000)
NSC Center Non-Federal Employees	Over/Under recovery	(3,071,351)	(8,704,055)
Graduate Assistants - Tuition Remission	Over/Under recovery	-\$0-	-\$0-
Graduate Assistants	Over/Under recovery	\$0	\$0

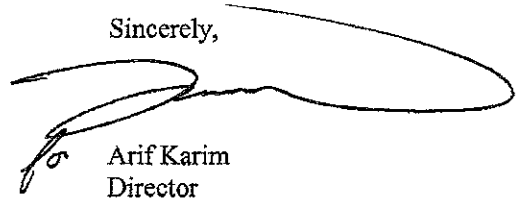
The Fringe Benefit Statement for fiscal years ending June 30, 2013 and 2012 is attached.

A Fringe Benefit cost proposal, together with supporting information and the certified audit financial statement is required each year. The Fringe Benefit Statement for the fiscal year ending June 30, 2013 is due in our office by December 31, 2013.

Since this is an integral part of the Negotiation Agreement, please note your acceptance by signing in the space provided below.

Thank you for your cooperation.

Sincerely,



Arif Karim
Director
Division of Cost Allocation

Enclosures

Louisiana State University

(Institution)

Robert Kuhn

(Signature)

Robert Kuhn

(Name)

Interim Vice Chancellor for Finance
and Administrative Services and CFO

(Title)

3/4/13

(Date)

FIN: 172600094031

07/10/2013

Baton Rouge, LA 70803-2701

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: INDIRECT COST RATES

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

EFFECTIVE PERIOD

PRED. 07/01/2009 - 06/30/2013 49.00 On Campus Organized

PRED. 07/01/2009 - 06/30/2013 36.00 Off Campus Organized

PRED. 07/01/2009 - 06/30/2013 49.00 On Campus Organized

PRED. 07/01/2009 - 06/30/2013 36.00 Off Campus Organized

				Programs
PRED.	07/01/2009	06/30/2013	49.00 On Campus	Instruction
PRED.	07/01/2009	06/30/2013	36.00 On Campus	Other Sponsored Activities

PROV.	07/01/2013	Until Amended	Use same rates and	
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conditions

as those cited for FYE 06/30/2013

*BASE

to the first \$25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, student tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of \$25,000.

(1) Includes all Bannington Biomedical Research Center Projects.

ORGANIZATION: Louisiana State University

SECTION 1: FRINGE BENEFIT RATES**

TYPE	FROM	TO	RATE(%)	LOCATION	APPLICABLE TO
FIXED	7/1/2012	6/30/2013	16.00	Main Campus	Main Campus
FIXED	7/1/2012	6/30/2013	31.00	AG Center	Federal Employees
FIXED	7/1/2012	6/30/2013	26.00	All	Graduate Assistants - Tuition Remission
FIXED	7/1/2013	6/30/2014	38.00	Main Campus	Main Campus Employees
FIXED	7/1/2013	6/30/2014	32.00	AG Center	Federal Employees
FIXED	7/1/2013	6/30/2014	40.00	AG Center	Non-Federal Employees
FIXED	7/1/2013	6/30/2014	32.00	All	Graduate Remission

amended

and conditions as those cited for fiscal year ending June 30, 2014.

** DESCRIPTION OF FRINGE BENEFITS RATE BASE:
Salaries and wages.

ORGANIZATION: Louisiana State University

SECTION II. SPECIAL REMARKS

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. The fringe benefits included in the rate(s) are listed below.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

OFF-CAMPUS DEFINITION: For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s).

ORGANIZATION: Louisiana State University

ACQUISITION DATE: 8/00/2010

Equipment means an article or homogeneous tangible personal

acquisition cost of \$5,000 or more per unit.

FRINGE BENEFITS:

Main Campus-
Group Medical & Life Insurance
Medicare Contribution
La. State Retirement System

Teachers' Retirement System
Unemployment Compensation
Workers' Compensation

Sabbatical Leave

Optional Retirement Plan

Social Security

LA Deferred Comp 457 Plan

LA School Employees Retirement System
Graduate Assistant Tuition Exemption Program
Graduate Assistant Health Insurance

Group Medical & Life Insurance

Medicare Contribution

Unemployment Compensation

Workers' Compensation

Social Security

Termination Pay

Sabbatical Leave

Graduate Assistant Tuition Exemption Program

Graduate Assistant Health Insurance

Non-Federal Employees:

LA State Retirement System

TIAA-CREF Matching Retirement

Teachers' Retirement

Optional Retirement Plan

Federal Employees:

Federal Civil Service Retirement

AGREEMENT DATE: 2/20/2013

SECTION III: GENERAL

A. LIMITATIONS:

The rates in this Agreement are subject to the following conditions: (1) Only costs incurred by the organization which was used to establish the rates is not later found to be essentially incomplete or inaccurate by the Government.

B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system supported by the organization to be in effect during the Agreement. Changes to the method of accounting for costs which affect the amount of reimbursement payable from the Government are not limited to changes in the charging of a particular type of cost from foundation and related activities.

C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate; when the actual costs for this period are determined, an adjustment will be made to a rate of a future period.

E. OTHER:

If any Federal contract, grant or other agreement is included in this Agreement...

Louisiana State University
(INSTITUTION)
Robert Kuhn
(SIGNATURE)
Robert Kuhn
(NAME)
Interim Vice Chancellor for Finance
and Administrative Services and CFO
(TITLE)
3/4/13
(DATE)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
(AGENCY)
[Signature]
(SIGNATURE)
Arif Karim
(NAME)
Director, Division of Cost Allocation
(TITLE)
2/20/2013
(DATE) 0022

HHS REPRESENTATIVE: Denise Shirlee
Telephone: (214) 767-3261