West Virginia Department of Health and Human Resources

Instructions for Completion of the Subrecipient (Grantee) Information Form
(As Referenced within the Addendum to the DHHR Grant Agreement)

Both the Federal Funding Accountability and Transparency Act and the American Recovery and Reinvestment Act address the primary recipient’s (DHHR) requirements to report information on the subawards it makes to subrecipient (Grantee) organizations. To ensure completeness and consistency in accounting for the funds received and subawarded by the DHHR to its Grantees, the DHHR has developed a standardized form in which Grantees shall be required to complete and submit to the DHHR during the negotiation (pre-award) stage of the grant cycle. The DHHR will not process the Grant Agreement or commit any of the funds related thereto until the Grantee submits a signed copy of the Subrecipient (Grantee) Information Form.

Please note that completion of this form requires that the Grantee organization to first obtain a valid Dun & Bradstreet Data Universal Numbering System, also known as a DUNS number, and then register with the System for Award Management (SAM) database. In order to obtain a DUNS number or for further information the Grantee may contact Dun and Bradstreet at 1-866-705-5711 or via the internet at http://fedgov.dnb.com/webform/. After obtaining a valid DUNS number, the Grantee organization may then register with SAM. However, prior to beginning the registration process with SAM the Grantee should gather a few other important items. These items include the organization’s Tax Identification Number (TIN) and Taxpayer Name used in Federal tax matters, statistical information about your organization, and the Electronic Funds Transfer (EFT) Information for payment of invoices. Renew and revalidate your registration every six months to avoid delays in processing grant agreements and to ensure that SAM is up to date and in sync with changes that may have been made to DUNS and IRS information. For further information, please review the System for Award Management User’s Guide. To obtain the SAM User’s Guide and to begin the online registration with SAM, please access the SAM homepage at https://www.sam.gov/portal/public/SAM.

The Subrecipient (Grantee) Information Form is divided into six separate sections as further described below:

1. **Subrecipient (Grantee) Legal Name:** Enter the legal name of the Grantee organization as recorded within the System for Award Management (SAM) database.

2. **Subrecipient (Grantee) DBA Name:** Enter the doing-business-as (DBA) name of the Grantee organization as registered in the SAM database or Dun and Bradstreet.

3. **Subrecipient (Grantee) 9-Digit DUNS Number:** Enter the 9-digit Data Universal Numbering System (DUNS) number or “the System for Award Management plus 4 extended” DUNS number.

4. **Subrecipient (Grantee) Physical Location:** Enter the Grantee organization’s physical location (street address, city, state, zip code +4, and county) as listed in the SAM database. If unsure of the full (+4) zip code for Grantee Physical Location, please review the following website from the United States Postal Service: http://zip4.usps.com/zip4/.

5. **Subrecipient (Grantee) Type:** Select the primary category from the list that best corresponds with the Grantee organization type (this must correspond with the “business type” field from the System for Award Management and the “organization type” on file with the West Virginia Secretary of State).

Grantee organizations are strongly encouraged to check the West Virginia Secretary of State’s website (www.sos.wv.gov) and click the link for “Business Organization/Entity Search” to ensure proper registration. Grantee organizations must stay current with annual report filings and fees to the West Virginia Secretary of State. The DHHR will not award grant funds to an organization if it is discovered that the organization’s registration has been suspended or revoked by the West Virginia Secretary of State.

6. **Subrecipient (Grantee) Primary Place of Performance:** Enter the physical location (city, state, zip code +4, and county) where the program being funded under this specific Grant Agreement will primarily be performed. Please note this cannot be a Post Office Box and could be a different location than the physical location referenced above for box number two. If unsure of the full (+4) zip code for Grantee Primary Place of Performance, please review the following website from the United States Postal Service: http://zip4.usps.com/zip4/.

7. **Subrecipient (Grantee) Highly Compensated Officers (if applicable):** Enter the Names and Total Compensation of the five most highly compensated officers of the Grantee Organization. “Total Compensation” refers to the cash and noncash dollar value earned by the officers during the Grantee’s fiscal year. For further information regarding how to calculate the total compensation please see 17 CFR 229.402(c)(2). Please note that this requirement is only applicable if the Grantee organization in its preceding fiscal year meets all of the following criteria:
   a. Eighty percent or more of its annual gross revenues in Federal awards
   b. $25,000,000 or more in annual gross revenues from Federal awards
   c. The public does not have access to information about the compensation of senior executives of the Grantee organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d) or section 6104 of the Internal Revenue Code of 1986 [26 USC §6104].