

**COLLEGES AND UNIVERSITIES RATE AGREEMENT**

EIN:  
 ORGANIZATION:  
 Cankdeska Cikana Community College  
 P.O. Box 269  
 Fort Totten, ND 58335

DATE:11/17/2020  
 FILING REF.: The preceding  
 agreement was dated  
 10/13/2016

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: Facilities And Administrative Cost Rates**

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

EFFECTIVE PERIOD

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
PRED.	10/01/2020	09/30/2024	25.50	On-Campus	(1)
PRED.	10/01/2020	09/30/2024	9.70	On-Campus	(2)
PROV.	10/01/2024	Until Amended			Use same rates and conditions as those cited for fiscal year ending September 30, 2024.

(1) All programs except U.S. Dept. of Education programs specified in note (2).

(2) This rate is computed by the U.S. Dept. of Education and only applies to its Restricted Programs and Training Grants.

\*BASE

Direct salaries and wages excluding all fringe benefits.

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**SECTION II: SPECIAL REMARKS**

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TREATMENT OF FRINGE BENEFITS:

The fringe benefits are specifically identified to each employee and are charged individually as direct costs. The directly claimed fringe benefits 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.

DEFINITION OF EQUIPMENT

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds \$5,000.

The following fringe benefits are treated as direct costs:

FICA, WORKERS COMPENSATION, STATE UNEMPLOYMENT INSURANCE, HEALTH/LIFE INSURANCE, AND PENSION PLAN.

The indirect cost rate(s) has/have been negotiated in compliance with the applicable Administration for Children and Families Program Instructions for the Head Start program (ACYF-PI-HS-05-01 and ACYF-PI-HS-08-03). ACYF-PI-HS-08-03, dated 5/12/2008, specifically defines "compensation" and limited the cost of "compensation" charged to any federally funded program to zero for any staff whose "compensation" exceeded the rate payable for level II of the Executive Schedule. As of January 2019, the Executive Schedule Level II rate is \$192,300.

NEXT PROPOSAL DUE DATE

A proposal based on actual costs for fiscal year ending 09/30/23, will be due no later than 03/31/24.

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**SECTION III: GENERAL**

**A. LIMITATIONS:**

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

**B. ACCOUNTING CHANGES:**

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

**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 year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

**D. USE BY OTHER FEDERAL AGENCIES:**

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

**E. OTHER:**

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

BY THE INSTITUTION:

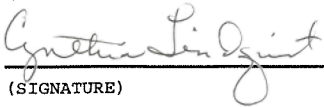
ON BEHALF OF THE FEDERAL GOVERNMENT:

Cankdeska Cikana Community College

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(INSTITUTION)

(AGENCY)



Arif M. Karim - <sup>S</sup> Digitally signed by Arif M. Karim -  
Date: 2020.11.19 10:59:32 -06'00'

(SIGNATURE)

(SIGNATURE)

Dr. Cynthia Lindquist

Arif Karim

(NAME)

(NAME)

President

Director, Cost Allocation Services

(TITLE)

(TITLE)

11/19/2020

11/17/2020

(DATE)

(DATE) 1805

HHS REPRESENTATIVE:

Karen Wong

Telephone:

(415) 437-7820