COLLEGES AND UNIVERSITIES RATE AGREEMENT

BIN: 1716003252A3

ORGANIZATION:
University of Arkansas
316 Administration Building
Fayetteville, AR 72701

DATE: 03/24/2014

FILING REF.: The preceding agreement was dated 07/26/2013

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

<table>
<thead>
<tr>
<th>RATE TYPES:</th>
<th>FIXED</th>
<th>FINAL</th>
<th>PROV. (PROVISIONAL)</th>
<th>PRED. (PREDETERMINED)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TYPE</th>
<th>FROM</th>
<th>TO</th>
<th>RATE(%) LOCATION</th>
<th>APPLICABLE TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRED.</td>
<td>07/01/2013</td>
<td>06/30/2014</td>
<td>46.00 On Campus.</td>
<td>Organized Research</td>
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<tr>
<td>PRED.</td>
<td>07/01/2014</td>
<td>06/30/2015</td>
<td>46.50 On Campus</td>
<td>Organized Research</td>
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<td>06/30/2017</td>
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<td>Instruction</td>
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<td>Other Sponsored Activities</td>
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<td>06/30/2017</td>
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<td>42.00 On Campus</td>
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<td>31.00 On Campus</td>
<td>Coop Ext. Service</td>
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<td>06/30/2017</td>
<td>26.00 Off Campus</td>
<td>All Programs</td>
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</table>
ORGANIZATION: University of Arkansas
AGREEMENT DATE: 3/24/2014

<table>
<thead>
<tr>
<th>TYPE</th>
<th>FROM</th>
<th>TO</th>
<th>RATE(%)</th>
<th>LOCATION</th>
<th>APPLICABLE TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROV.</td>
<td>07/01/2017</td>
<td>Until Amended</td>
<td>Use same rates and conditions as those cited for fiscal year ending June 30, 2017.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*BASE*

Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up 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.
ORGANIZATION: University of Arkansas
AGREEMENT DATE: 3/24/2014

SECTION I: FRINGE BENEFIT RATES**

<table>
<thead>
<tr>
<th>TYPE</th>
<th>FROM</th>
<th>TO</th>
<th>RATE(%) LOCATION</th>
<th>APPLICABLE TO</th>
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<tbody>
<tr>
<td>FIXED</td>
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<td>6/30/2014</td>
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<td>FIXED</td>
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<td>Group #3</td>
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<td>15.00 All</td>
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<td>6/30/2015</td>
<td>31.20 All</td>
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<td>7/1/2014</td>
<td>6/30/2015</td>
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<td>CES Group #2</td>
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</table>

PROV.  7/1/2015  Until amended

Use same rates and conditions as those cited for fiscal year ending June 30, 2015.

** DESCRIPTION OF FRINGE BENEFITS RATE BASE:
Salaries and wages.
ORGANIZATION: University of Arkansas
AGREEMENT DATE: 3/24/2014

SECTION II: SPECIAL REMARKS

TREATMENT OF FRINGE BENEFITS:

The fringe benefits are charged using the rates listed in the Fringe Benefits section of this agreement. The fringe benefits included in the rates 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) the off-campus rate will apply. Grants or contracts will not be subject to more than one F&A cost rate. If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.

Equipment Definition –
Through fiscal year ended 6/30/2012, equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost of $2,500 or more per unit. Effective 7/01/2012, the acquisition cost of equipment as defined above, is $5,000 or more per unit.

FRINGE BENEFITS:

PICA
Retirement
Worker's Compensation
Life Insurance
Unemployment Insurance
Health Insurance
Tuition Remission
Dental Insurance
Long Term Disability
Employee Assistance Program
Termination Pay (Effective 07/01/14)
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 in 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 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 Office of Management and Budget Circular A-21, and should be applied to grants, contracts and other agreements covered by this Circular, 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 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:
University of Arkansas

[INSTITUTION]
[Signature]
Donald C. Pederson
[NAME]
Vice Chancellor for Finance & Admin
[TITLE]
[DATE] 04/03/14

ON BEHALF OF THE FEDERAL GOVERNMENT:
DEPARTMENT OF HEALTH AND HUMAN SERVICES
[AGENCY]
[Signature]
[NAME]
Director, Division of Cost Allocation
[TITLE]
[DATE] 06/09

NHS REPRESENTATIVE:
Theodore Foster
TelephoneNumber: (214) 767-3261
March 24, 2014

Mr. Donald O. Pederson
Vice Chancellor for Finance & Administration
University of Arkansas
316 Administration Building
Fayetteville, AR 72701

Dear Mr. Pederson:

A copy of a facilities and administrative (F&A) cost and fringe benefit (FB) Rate Agreement are being faxed to you for your signature. This Agreement reflects an understanding reached between your organization and a member of my staff concerning F&A and FB rates that may be used to support your claim for 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 it to me, retaining the copy for your files. Our fax number is (214) 767-3264 and email address is theodore.foster@psc.gov. We will reproduce and distribute the Agreement to the appropriate awarding organizations of the Federal Government for their use.

The Office of Management and Budget (OMB) has requested that we reach an agreement with each institution on components for the published F&A cost rates. The attached form(s) are provided for that purpose. Please sign the form(s) and return them with the Agreement.

In addition, your FB cost rate(s) for the fiscal year ending June 30, 2014 based on actual costs for the fiscal year ended June 30, 2012 and FB cost rates for the fiscal year ending June 30, 2015 based on actual costs for the fiscal year ended June 30, 2013 under-recovered (−) or over-recovered (+) amounts are listed below:

<table>
<thead>
<tr>
<th>Group</th>
<th>2012/2014</th>
<th>2013/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group #1</td>
<td>($4,158)</td>
<td>$29,012</td>
</tr>
<tr>
<td>Group #2</td>
<td>($11,647)</td>
<td>$215,308</td>
</tr>
<tr>
<td>Group #3</td>
<td>$53,683</td>
<td>($17,185)</td>
</tr>
<tr>
<td>Group #4</td>
<td>$46,327</td>
<td>$133,756</td>
</tr>
<tr>
<td>Group #5</td>
<td>($134,966)</td>
<td>$3,029,360</td>
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<tr>
<td>Co-op Ext. Serv. #1</td>
<td>($500,460)</td>
<td>($179,998)</td>
</tr>
<tr>
<td>Co-op Ext. Serv. #2</td>
<td>$16,784</td>
<td>($2,356)</td>
</tr>
</tbody>
</table>

The fixed rates for the fiscal years ended June 30, 2012 and June 30, 2013 are considered final.
Mr. D. Pederson  
March 24, 2014  
Page 2 of 2  

A Fringe Benefit cost proposal, together with supporting information and the certified audit financial statement, is required each year. Thus, your next Fringe Benefit cost proposal based on actual costs for the fiscal year ending June 30, 2014 is due in our office by December 31, 2014. Your next Facilities and Administrative cost rate proposal based on actual costs for the fiscal year ending June 30, 2016 is due in our office by December 31, 2016.

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

Thank you for your cooperation.

Sincerely,

Arif Karim  
Director  
Division of Cost Allocation

Enclosures

ACCEPTANCE

University of Arkansas  
Institution

Donald O. Pederson

Signature

Name

Vice Chancellor for Finance & Admin

Title

04/03/14  
Date