



Audit Certification

DATE:

INSTITUTION NAME:

AUDIT CONTACT NAME:

EMAIL:

Our records indicate that your institution was a subrecipient of pass through funds awarded to Montana State University. OMB Circular A-133, and 2 CFR 200 subpart F require us to ensure that you are in compliance with their requirements. Please provide the following information for your institution's most recently completed audited financials.

Please return by email to: subawards@montana.edu or by FAX to 406-994-7951

OR mail to: Montana State University, Office of Sponsored Programs, P.O. Box 172470, Bozeman, MT 59717-2470

SECTION A: Organizations subject to the requirements of OMB Circular A-133 or 2 CFR 200 Subpart F

Please mark the appropriate boxes and provide required documentation.

I hereby certify that for our fiscal year ended

Our A-133 or 2 CFR 200 Subpart F audit is not yet completed. We expect the audit to be completed by
Upon completion, we will advise you of the results and forward all appropriate documents.

Our A-133 or 2 CFR 200 Subpart F audit has been completed. The audit presented no material weaknesses, material instance of noncompliance, no significant deficiencies and no findings related to the subawards from Montana State University. Our audit report and/or financial statements can be found at this **web site (provide link)**:

Our A-133 or 2 CFR 200 Subpart F audit included negative findings. A copy of the audit report is enclosed or can be found on the **web site (provide link)**:
Relevant findings, our responses and corrective action plan are discussed on pages

SECTION B: Organizations NOT subject to the requirements of OMB Circular A-133 or 2 CFR 200 Subpart F

We are not subject to the requirements of OMB Circular A-133 or 2 CFR 200 Subpart F because our organization is:

For-profit: Include a copy of your financial statements and management letter (if applicable).

The management letter did not include material weaknesses.

The management letter did include material weaknesses. Attach audit report and management letter.

Non-profit and expended less than \$500,000 as described in OMB A-133 or \$750,000 as described in 2 CFR Part 200 in fiscal year entered above.

A non-US, foreign entity.

Other:

I certify that the above checked boxes characterize the position of the institution of which I am a representative. Further, I certify that all relevant material findings contained in the audit report, if complete have been disclosed.

Use digital signature or print and sign manually

Signature: _____ Date:

Typed Name and Title:

Please return by email to: subawards@montana.edu or by FAX to **406-994-7951**

Use or to Save in order to attach to an email, and for your record. Use the *Print Form* button to print for Scan and Email, FAX, or Postal Mail

OR mail to: Montana State University, Office of Sponsored Programs, PO Box 172470, Bozeman, MT 59717-2470

Your cooperation is appreciated. If you have any questions, please contact Montana State University by email at subawards@montana.edu or 406-994-2381