

# Carnegie Mellon

## Carnegie Mellon University Source & Price Justification Form

To comply with University Purchasing Policy, Office of Management and Budget 2 CFR 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, and Federal Acquisition Regulations (FAR), completion of this Source & Price Justification Form **is required for research and development subcontracts of \$2,500 and over**. This form must be completed and uploaded to SPARCS with all supporting documentation in conjunction with the SPARCS proposal routing .- failure to do so may cause delays in the processing of your subcontract paperwork.

SPARCS PROPOSAL #: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINCIPAL INVESTIGATOR: \_\_\_\_\_

DEPARTMENT & TELEPHONE: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_

SPONSOR: \_\_\_\_\_

**As supporting documentation, please attach preliminary “Statement of Work” or project description and budget for the Subrecipient**

NAME OF SUBRECIPIENT: \_\_\_\_\_

### **Source and Price Justification – Reason for selecting Subrecipient:**

For audit purposes the university must provide a source and price justification for all subcontracts over \$2,500.

Please review the list below and check the reason you chose your supplier or Subrecipient:

- \_\_\_\_\_ Supplier was the low bidder.
- \_\_\_\_\_ Supplier specifically identified within proposal/award documentation – provide copy of award, when available (single source).\*
- \_\_\_\_\_ Supplier establishes or maintains an essential engineering, research or development capability (single source).\*
- \_\_\_\_\_ Supplier provided the best evaluated responsible offer (other than low bidder) – provide evaluation criteria.\*
- \_\_\_\_\_ An unusual and compelling urgency precludes full and open competition – provide rationale (single source).\*
- \_\_\_\_\_ Compatibility with other components of a system already in operation – identify existing items (single source).\*
- \_\_\_\_\_ Only supplier that meets pre-established performance characteristics – provide characteristics (single source).\*
- \_\_\_\_\_ Supplier/consultant is the only manufacturer/provider of this good or service (sole source).\*
- \_\_\_\_\_ Other.\*

(\* Requires explanation; attach supporting documentation): \_\_\_\_\_

\_\_\_\_\_

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## Price Reasonableness based on:

- |  |  |
|--|--|
| _____ Adequate price competition*                                    | _____ Comparable to Price sold to Federal Gov't. |
| _____ Catalog/Market pricing *                                       | _____ Historical pricing (* provide previous PO) |
| _____ Comparison to in-house estimate *                              | _____ Comparison to similar items *              |
| _____ Comparable Customer Invoice *                                  | _____ Cost analysis *                            |
| _____ Proposal/Award specifically identifies item/person and price * |  |
- (\* Requires explanation; attach supporting documentation): \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Small Business Use Requirement:

**Note: If federal government funds are being used and the subcontract is over the then current Simplified Acquisition amount, FAR Part 19.702 requires that the university document for audit purposes its use of certain types of small businesses (i.e., disadvantaged, women-owned, veteran-owned, service disabled veteran-owned and HUBZone). If your subcontract is over the then current Simplified Acquisition amount, please indicate if any of the following groups were solicited and/or answer the questions below.**

- YES\_\_\_\_\_ NO\_\_\_\_\_ :     Small business concern    Disadvantaged/Minority     HUBZone             Women-owned
- Veteran-owned                     Service Disabled Veteran-owned    HBCU/MI

If not solicited, explain why not: \_\_\_\_\_

\_\_\_\_\_

If solicited and not chosen, explain why not: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Competitive Bid on Research and Development Subcontracts:

**If project was competitively bid, please complete the following table. Please attach copies of original quotes/proposals from each supplier if \$10,000 or more:**

	<b>Supplier/Name</b>	<b>Item/Services Price (including shipping costs)</b>	<b>Payment &amp;/or Discount Terms</b>	<b>Total Order Price</b>
1.				
2.				
3.				

Print name of person submitting this form: \_\_\_\_\_

Department Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_

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For Completion by OSP Subcontracts Team:

FEDERAL PRIME AGREEMENT NO. \_\_\_\_\_

Subcontract No: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_