

Version: 2021.07.15

Template Name: Sub-Recipient Profile

Instructions to Reporter:

- Do not change the cell formatting
- Do not reformat the template
- All data should be as text
- Do not publish the "Field ID" row (Treasury Internal Use Only)

Field ID	DUNS__c	DUNS_4__c
Label	Sub-recipient DUNS	Sub-recipient DUNS (+4)
Required or Optional	Required	Optional
Help Text	The DUNS unique identification number for the Sub-Recipient Organization of the Recipient's ERA funds. Format XXXXXXXXXX, 9 numeric characters.	A 4-character suffix that may be assigned by a business concern and appended to its DUNS. Format XXXX, 5 numeric characters.

EIN\_\_c

Sub-Recipient TIN

Required

The Sub-Recipient's Internal Revenue Service (IRS) Taxpayer Identification Number.  
Format XXXXXXXXX, 9 numeric characters.

Recipient\_Type\_\_c

Subrecipient Type

Required

A collection of indicators of different types of Sub-Recipient types that receive ERA funds.  
Valid responses:  
"Tenant",  
"Landlord or Owner" ,  
"Utility / Home Energy Service Provider",  
"Other Housing Services",  
"Eligible Expenses Provider".

Name

POC\_Email\_Address\_\_c

Sub-Recipient Name

POC Email Address

Required

Required

The name of the Sub-Recipient. Max character 80.

The email address of the primary point-of-contact for the sub-recipient. Must be valid Email format.

Address\_\_c

Address Line 1

Address\_2\_\_c

Address Line 2

Required

First line of the Sub-Recipient's  
address. (255 Character max)

Optional

Second line of the Sub-Recipient's  
address. (255 Character max)

Address\_3\_c

Address Line 3

City\_c

City Name

Optional

Third line of the Sub-Recipient's address. (255 Character max)

Required

Name of the city in which the Sub-Recipient is located. (100 Character Max)

State\_\_c  
State Code

Zip\_\_c  
Zip5

Required

Required

United States Postal Service (USPS) two-letter abbreviation for the state or territory in which the Sub-Recipient is located. Valid Response:

(AL, AK, AS, AZ, AR, CA, CO, CT, DE, DC, FM, FL, GA, GU, HI, ID, IL, IN, IA, KS, KY, LA, ME, MH, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, MP, OH, OK, OR, PW, PA, PR, RI, SC, SD, TN, TX, UT, VT, VI, VA, WA, WV, WI, WY)

United States ZIP code (five digits) associated with the Sub-Recipient's address.  
Format XXXXX, 5 numeric characters.

Zip\_4\_\_c

Zip4

Registered\_in\_Sam\_gov\_\_c

Sub-recipient SAM.gov Registration

Required

Required

Zip Plus4 (four digits) identifying where the predominant performance of the subaward will be accomplished.  
Format XXXX, 4 numeric characters.

Confirmation that the Sub-Recipient is registered in SAM.gov.  
Must select Yes or No.

Federal\_Funds\_80\_or\_More\_of\_Revenue\_\_c

In its preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?

Required

Confirmation that the proportion of the Sub-Recipient's federal funding-to-total annual gross revenue for the preceding fiscal year is at least 80%.

Must select Yes or No.

Derives\_25\_Million\_or\_More\_from\_Federal\_\_c

In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?

Required

Confirmation that the Sub-Recipient's total annual gross revenue from federal funding across all programs for the preceding fiscal year is greater than \$25 million. Must select Yes or No.

Total\_Compensation\_for\_Officers\_Public\_\_c  
Is the "total compensation" for the organization's five highest paid officers publicly listed or otherwise listed in SAM.gov?

Officer\_Name\_\_c  
Executive Name (1)

Required

Required (If you answered No to previous question)

Confirmation that qualifying Sub-Recipient's publicly identify their top five highest compensated executives or have it listed in their SAM.gov profile, if No please enter the names and compensation for the 5 highest officers.  
Must select Yes or No.

The legal name belonging to one of the five highest paid executives, officers, or employees of the Sub-Recipient.

Officer\_Total\_Comp\_\_c

Total Compensation Executive (1)

Officer\_2\_Name\_\_c

Executive Name (2)

Required (If you answered No to previous question)

The Total Compensation, as defined in 2 CFR part 170.330, earned by the five highest paid executives, officers, or employees of the Sub-Recipient. DO NOT include a "\$" sign when entering compensation.

Required (If you answered No to previous question)

The legal name belonging to one of the five highest paid executives, officers, or employees of the Sub-Recipient.

Officer\_2\_Total\_Comp\_\_c

Total Compensation Executive (2)

Officer\_3\_Name\_\_c

Executive Name (3)

Required (If you answered No to previous question)

The Total Compensation, as defined in 2 CFR part 170.330, earned by the five highest paid executives, officers, or employees of the Sub-Recipient. DO NOT include a "\$" sign when entering compensation.

Required (If you answered No to previous question)

The legal name belonging to one of the five highest paid executives, officers, or employees of the Sub-Recipient.

Officer\_3\_Total\_Comp\_\_c

Total Compensation Executive (3)

Officer\_4\_Name\_\_c

Executive Name (4)

Required (If you answered No to previous question)

The Total Compensation, as defined in 2 CFR part 170.330, earned by the five highest paid executives, officers, or employees of the Sub-Recipient. DO NOT include a "\$" sign when entering compensation.

Required (If you answered No to previous question)

The legal name belonging to one of the five highest paid executives, officers, or employees of the Sub-Recipient.

Officer\_4\_Total\_Comp\_\_c

Total Compensation Executive (4)

Officer\_5\_Name\_\_c

Executive Name (5)

Required (If you answered No to previous question)

The Total Compensation, as defined in 2 CFR part 170.330, earned by the five highest paid executives, officers, or employees of the Sub-Recipient. DO NOT include a "\$" sign when entering compensation.

Required (If you answered No to previous question)

The legal name belonging to one of the five highest paid executives, officers, or employees of the Sub-Recipient.

Officer\_5\_Total\_Comp\_\_c

Total Compensation Executive (5)

Required (If you answered No to previous question)

The Total Compensation, as defined in 2 CFR part 170.330, earned by the five highest paid executives, officers, or employees of the Sub-Recipient. DO NOT include a "\$" sign when entering compensation.