

**UNTHSC FACT SHEET FOR OFFICE OF SPONSORED PROGRAMS
APPLICATIONS
(Revised February 2024)**

APPLICANT ORGANIZATION: UNT Health Science Center
3500 Camp Bowie Blvd.
Fort Worth, Texas 76107-2699

OFFICIAL SIGNING FOR APPLICANT ORGANIZATION: Karissa O'Brien, MBA, Assistant Vice President,
Office of Sponsored Programs
3500 Camp Bowie Blvd.
Fort Worth, Texas 76107-2699
817 735-5073 phone 817 735-0375 fax
email: ospext@unthsc.edu

ADMINISTRATIVE OFFICIAL TO BE NOTIFIED IF AWARD IS MADE: Karissa O'Brien, MBA, Assistant Vice President,
Office of Sponsored Programs

(see above address)

AWARD LETTER AND CHECKS PAYABLE TO: UNT Health Science Center
Checks and Awards to be sent to: Karissa O'Brien, MBA Assistant Vice President,
(see above address)

TYPE OF ORGANIZATION: Public/State/Institution of Higher Learning

FEDERAL ENTITY ID NUMBER (EIN): 1756064033A1
(for use on NIH & NSF applications)

FEDERAL TAX ID NUMBER (TIN): 756064033

COGNIZANT AGENCY: DEPT OF HEALTH & HUMAN SERVICES
Denise Shirlee
214-767-3261

GOVERNMENTAL DISTRICTS: 12th Federal Congressional District
For completing SF424 grants.gov apps TX-012
99th State House District
12th State Senatorial District

INSTITUTIONAL PROFILE NUMBER: 6108502

NATIONAL SCIENCE FOUNDATION SUBMITTING INSTITUTION CODE: 0097683000

DUN AND BRADSTREET NUMBER: 110091808

DUNS #: 110091808 (additional zeros ok if needed)

UEI #: JE8AKPCR2KA4

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INSTITUTIONAL ORG NUMBER: 0000415

NIH DIVISIONS: Overall Medical (GSBS, TCOM)
School of Public Health (Self Explanatory)
School of Allied Health Professions (Physical
Therapy, Physician Assistant Studies)
College of Pharmacy

ASSURANCES

Human Subjects Federal Wide Assurance #: FWA00005755
Expiration Date – 02/10/2025
IRB Certification Number: 00000702
Institutional ORG Number: 0000415

Vertebrate Animals Animal Welfare Assurance #: D16-00417 (A3711-01)
Expiration Date – 11/30/2024

AAALAC Certification #: 000622
AAALAC Certification Date: 07/19/2023
Expiration Date: 07/19/2026

USDA Registration #: 74-R-0081

Radioactive Materials TX Department of State Health Services
License #: L02518
Expiration Date: 05/31/2024

FRINGE BENEFIT RATES

8.650% - Part time employees* (20 hours or less per week)
23% - Full-time employees – Faculty Members
33% - Full-time employees – Staff Members

**Temporary employees and hourly student employee fringe benefits are estimated at an average of 8.650% of wages without any insurance contribution. Temporary employees are defined by state law as non-student employees who work less than 50% time (20 hours or less per week) or work 50% or more time for less than 4.5 months total during the fiscal year.*

FACILITIES AND ADMINISTRATIVE COSTS (F&A/INDIRECT COSTS)

Date of Agreement with DHHS: 01/30/2020, currently under provisional terms

Federally negotiated rates as follow:

- 48% of Modified Total Direct Costs (MTDC) – Organized Research.
- 40% of Modified Total Direct Costs (MTDC) – Instruction.
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