

## Subrecipient Closeout Form

Subaward No.:

PTE Award No.:

Name of Subrecipient:

Please complete **ALL** of the following sections and return to:

New Mexico Institute of Mining and Technology (NMT)  
Sponsored Projects Administration  
[spa@nmt.edu](mailto:spa@nmt.edu)

### SECTION I. FINANCIAL INFORMATION

Total amount received under this subaward to date \$ \_\_\_\_\_.

**Are there any outstanding invoices, which PTE has not reimbursed yet?**

- ☐ Yes\*. Please place an X by those that apply.
- ☐ Please see the attached copies of invoices previously submitted and totaling \$ \_\_\_\_\_, but which have not yet been reimbursed; **AND/OR**,
- ☐ Invoices totaling \$ \_\_\_\_\_ have not yet been submitted to PTE NMT yet; or,
- ☐ No. By selecting "No," you are confirming NM Tech has paid you/your institution for all invoices submitted for expenses and/or claims against this subaward. Any invoices submitted after this box is checked and this form is signed and returned to NM Tech, will not be honored.

*\*Invoices returned with this form are used for informational purposes; originals must be submitted in accordance with the subaward. Reimbursement or payment of expenses is in all cases subject to the terms of the subaward, including submission of an invoice marked "Final."*

### SECTION II. PROGRAMMATIC AND FINANCIAL DELIVERABLES

Have all deliverables been met and all associated technical reports submitted to the NMT PI?

- ☐ Yes
- ☐ No

### SECTION III. PATENTS

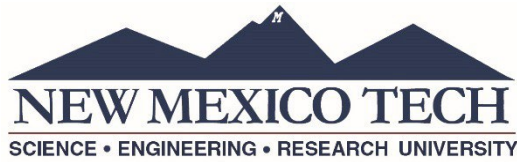
**Are there any inventions to be reported which resulted from work performed under this subaward?**

- ☐ No ☐ Yes\*\*. Please complete the following (attach additional pages as necessary):

Name of Inventor: \_\_\_\_\_

Name / Description of Invention(s): \_\_\_\_\_

**\*\* A COMPLETE INVENTION DISCLOSURE MUST ACCOMPANY THIS DOCUMENT FOR ANY INVENTIONS NOT PREVIOUSLY DISCLOSED TO NMT, WHICH RESULTED FROM WORK PERFORMED UNDER THIS SUBAGREEMENT. INVENTION REPORTING SHALL BE IN THE SAME FORM AS REQUIRED BY THE PRIME AWARD.**



#### SECTION IV. FEDERAL GOVERNMENT/SPONSOR PROVIDED OR FUNDED EQUIPMENT ACQUISITION

**Was any equipment provided by the Federal Government/Sponsor, or was any equipment purchased with Federal or Sponsor funds provided under this subaward?**

☐ No. ☐ Yes, where all equipment either provided, or purchased with funds, under this subaward has been delivered to the U.S. Government or Sponsor through PTE or is it awaiting disposition instructions. If yes, please provide a copy of the property report.

#### SECTION V. CERTIFICATION OF COST SHARE

**Was cost share required on this subaward?**

☐ No ☐ Yes. If yes, please complete the following:

Subrecipient certifies that the cumulative cost share contributed under this subaward is \$\_\_\_\_\_, and further certifies that all such cost share was incurred in accordance with 2 CFR 200 and the terms of the subaward agreement.

Authorized Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_