EXHIBIT R (LIST OF LOWER TIER SUBAWARDS)

Subrecipient's Legal Name: Click here to enter text.

Select the certification below that is applicable to Subrecipient's use of Lower Tier Subrecipient(s)/Lower Tier Subaward(s):

☐ Subrecipient intends to use Lower Tier Subrecipient(s)/Lower Tier Subaward(s) to provide Program Services (details are provided in the chart below).

☐ Subrecipient will not use Lower Tier Subrecipient(s)/Lower Tier Subaward(s) to provide Program Services.

Lower Tier Subrecipient			Description of Services to be Performed
Legal Name	**Address**	**Contact Person's Name and Phone Number**	
Click here to enter text.	Click here to enter address.	Click here to enter text. Click here to enter phone number.	☐ Click here to enter text.

If you need to report additional Lower Tier Subrecipients, use this Exhibit Y and include page numbers on each completed Exhibit Y as follows: Page 1 of X, Page 2 of X, Page 3 of X, etc. (where 'X' represents the total number of completed forms).

Rev. 3/23