

# Silos & Smokestacks National Heritage Area General Grant Final Reporting Requirements

In accordance with our Cooperative Agreement and your Silos & Smokestacks Grant Contract, you are required to complete and submit the following upon completion of your project:

- Complete and submit <u>Financial Status Report Standard Form 425</u>\*

  Online form available at http://www.whitehouse.gov/omb/grants/sf425.pdf
- Complete and submit <u>General Grant Written Performance Report</u> detailing the results of your grant project.
- Include any relevant materials that would visually illustrate the results of the project: photos, media coverage, print material, CD/DVD.

#### For Questions regarding Form 425 contact:

Carol Klein, Finance & Office Manager, cklein@silosandsmokestacks.org, 319.234.4567

#### For Program, Contract and Written Performance Report Questions contact:

Candy Streed, Program & Partnership Director, <a href="mailto:cstreed@silosandsmokestacks.org">cstreed@silosandsmokestacks.org</a>, 319.234.4567

See your contract for your specific Final Report due date.

<sup>\*</sup>Enclosed are the <u>Standard Form 425</u> and a <u>match language document</u> to show how your match can be documented. You will need to keep copies of cancelled checks, paid invoices, etc, showing that the funds were expended for your project. They do not need to be submitted with the Financial Status Report.

## Silos & Smokestacks National Heritage Area Grant Programs Match Language Document

- 1) All contributions, including cash and third party in-kind, shall be accepted as part of the recipient's cost sharing or matching when the contributions meet all of the following criteria:
  - a) Are verifiable from the recipient's records;
  - Are not included as contributions for any other federally-assisted project of program (i.e., the same item cannot be used to match two different federally assisted projects or programs);
  - c) Are necessary and reasonable for proper and efficient accomplishment of project or program objectives;
  - d) Directly benefit and are specifically identifiable to the project receiving Federal assistance from the Silos & Smokestacks Grant program;
  - e) Are not paid by the Federal Government under another award (i.e., Federal funds or federally supported costs cannot be used as matching share); and
  - f) The basis for determining the valuation for donated personal services, materials, equipment and space must be documented.
- 2) Volunteer services furnished by professional and technical personnel, consultants, and other skilled and unskilled labor may be counted as cost sharing or matching if the service is an integral and necessary part of an approved project or program. Rates for volunteer services shall be consistent with those paid for similar work in the recipient's organization. In those instances in which the required skills are not in the recipient organization, rates shall be consistent with those paid for similar work in the labor market in which the recipient competes for the kind of services involved. In either case, paid fringe benefits that are reasonable, allowable, and allocable may be included in the valuation.
- 3) When an employer other than the recipient furnishes the services of an employee, these services shall be valued at the employee's regular rate of pay (plus an amount of fringe benefits that are reasonable, allowable, and allocable but exclusive of overhead costs), provided these services are in the same skill for which the employee is normally paid.
- 4) Volunteer services shall be documented and, to the extent feasible, supported by the same methods used by the recipient for its own employees' time and attendance records.
- 5) Donated supplies may include such items as office supplies, laboratory supplies, or construction supplies (such as bricks and lumber), needed to perform the grant-assisted work. Value assessed to donated supplies included in the cost sharing or matching share shall be reasonable and shall not exceed the fair market value of the property at the time of the donation.
- 6) The value of donated equipment shall not exceed the fair market value of equipment of the same age and condition at the time of donation.
- 7) The value of donated space shall not exceed the fair rental value of comparable space as established by an independent appraisal of comparable space and facilities in a privately owned building in the same locality.
- 8) The value of loaned equipment shall not exceed its fair rental value.

#### FEDERAL FINANCIAL REPORT

(Follow form instructions)

1. Federal Ag	ency and Organi	zational Element	2. Federal Gra	nt or Other Id	entifying Number Assigne	d by Federal	Agency	Page	of
to Which R	eport is Submitte	ed	(To report m	(To report multiple grants, use FFR Attachment)					
America's Agric	cultural/Industrial H	eritage Landscape Inc(dba Sllos	CA6069A0031						
& Smokestacks	National Heritage	Area							
									pages
2 Paciniant C	Organization (No.	me and complete address inclu	ding Zip code)						pages
3. Recipient C	organization (iva	ne and complete address inclu	ding zip code)						
4a. DUNS Nu	mber	4b. EIN	5. Recipient A	count Numbe	er or Identifying Number	6. Re	port Type	7. Basis of Accou	nting
					, use FFR Attachment)		arterly		
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1			1			r An	nual		
						O Fin	al	□ Cash □ A	ccrual
8. Project/Gra	ent Dariod	L					Period End Da	I THE RESTRICTION OF THE PROPERTY OF THE PROPE	
	nth, Day, Year)		To: (Month, Da	v Vear)				410	
Troin. (Mo	illi, Day, Tear)		To. (Montal, De	ly, reary		(Month, Day, Year)			
10. Transac	tions							Cumulative	
(Use lines a-	c for single or n	nultiple grant reporting)							
Federal Cas	h (To report mu	ıltiple grants, also use FFR A	ttachment):						
a. Cash R	teceipts								
b. Cash D	isbursements								
c. Cash or	n Hand (line a m	inus b)							
	o for single grai								
-		Inobligated Balance:							
	ederal funds auti								
TANK AND THE PROPERTY OF	the system conditions and apply the state of	- CONSTRUCTOR							
	I share of expend	STEEL CONTRACT TO SELECT THE SECOND S							
		dated obligations							
		n of lines e and f)							
		Federal funds (line d minus g)					_		
Recipient S	hare:								
i. Total re	cipient share rec	uired							
j. Recipie	nt share of expe	nditures							
k. Remaini	ing recipient sha	re to be provided (line i minus j)							
Program Inc	ome:								
I. Total Fed	deral program in	come earned							
		ded in accordance with the ded	uction alternative	î.					
		ed in accordance with the addi	The state of the s						
		come (line I minus line m or line							
	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount 0	Charged	f. Federal Share	
11. Indirect	и. туро	D. Hoto			1		3		
Expense	-							1	
Experies	CONTRACTOR OF STREET		WINESE PERSONAL IN	g. Totals:		<del>                                     </del>			
12 Pamarks:	Attach any evo	anations deemed necessary or	information requ		al sponsoring agency in c	I omnliance wit	h governing led	islation:	
12. Kemarks.	Attach any exp	anadons deemed necessary or	mionnation requ	med by reder	ar sponsoning agency in o	omphanoc m	n governing leg	nora Born.	
13. Certificat	ion: By signin	g this report, I certify that it is	true, complete	, and accura	e to the best of my know	vledge. I am	aware that		
		audulent information may su						tion 1001)	
		Title of Authorized Certifying C						number and extensi	on)
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						d. Email ad	dross		
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						- Data Da		Marth Day Vara	
b. Signature of Authorized Certifying Official						e. Date Re	port Submitted	(Month, Day, Year)	
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						14. Agency	use only:		
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						Standa	rd Form 425		

OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011

Paperwork Burden Statement
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project ( 0348-0060), Washington, DC 20503.

### **Federal Financial Report Instructions**

#### **Report Submissions**

- 1) Recipients will be instructed by Federal agencies to submit the *Federal Financial Report (FFR)* to a single location, except when an automated payment management reporting system is utilized. In this case, a second submission location may be required by the agency.
- 2) If recipients need more space to support their *FFR*s, or *FFR* Attachments, they should provide supplemental pages. These additional pages must indicate the following information at the top of each page: Federal grant or other identifying number (if reporting on a single award), recipient organization, Data Universal Numbering System (DUNS) number, Employer Identification Number (EIN), and period covered by the report.

#### Reporting Requirements

- 1) The submission of interim *FFR*s will be on a quarterly, semi-annual, or annual basis, as directed by the Federal agency. A final *FFR* shall be submitted at the completion of the award agreement. The following reporting period end dates shall be used for interim reports: 3/31, 6/30, 9/30, or 12/31. For final *FFR*s, the reporting period end date shall be the end date of the project or grant period.
- 2) Quarterly and semi-annual interim reports shall be submitted no later than 30 days after the end of each reporting period. Annual reports shall be submitted no later than 90 days after the end of each reporting period. Final reports shall be submitted no later than 90 days after the project or grant period end date.

Note: For single award reporting:

- 1) Federal agencies may require both cash management information on lines 10(a) through 10(c) and financial status information lines 10(d) through 10(o).
- 2) 10(b) and 10(e) may not be the same until the final report.

Line Item Instructions for the Federal Financial Report

FFR	Reporting Item	Instructions
Number		
Cover In	formation	
1		Enter the name of the Federal agency and organizational element identified in the award document or as instructed by the agency.
	Identifying Number	For a single award, enter the grant number assigned to the award by the Federal agency. For multiple awards, report this information on the <i>FFR</i> Attachment. <i>Do not complete this box if reporting on multiple awards</i> .
3	Recipient Organization	Enter the name and complete address of the recipient organization including zip code.
4a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
4b	EIN	Enter the recipient organization's Employer Identification Number (EIN).
	or Identifying Number	Enter the account number or any other identifying number assigned by the recipient to the award. This number is for the recipient's use only and is not required by the Federal agency. For multiple awards, report this

FFR Number	Reporting Item	Instructions
		information on the FFR Attachment. Do not complete this box if reporting on multiple awards.
6	Report Type	Mark appropriate box. Do not complete this box if reporting on multiple awards.
7	Basis of Accounting (Cash/Accrual)	Specify whether a cash or accrual basis was used for recording transactions related to the award(s) and for preparing this FFR. Accrual basis of accounting refers to the accounting method in which expenses are recorded when incurred. For cash basis accounting, expenses are recorded when they are paid.
8	Project/Grant Period, From: (Month, Day, Year)	Indicate the period established in the award document during which Federal sponsorship begins and ends.
		Note: Some agencies award multi-year grants for a project period that is funded in increments or budget periods (typically annual increments). Throughout the project period, agencies often require cumulative reporting for consecutive budget periods. Under these circumstances, enter the beginning and ending dates of the project period not the budget period.
	Project/Grant Period, To: (Month, Day, Year)	Do not complete this line if reporting on multiple awards.  See the above instructions for "Project/Grant Period, From: (Month, Day, Year)."
9	Reporting Period End Date: (Month, Day, Year)	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual interim reports, use the following reporting period end dates: 3/31, 6/30, 9/30, or 12/31. For final <i>FFR</i> s, the reporting period end date shall be the end date of the project or grant period.
10	reporting period specified in	Lines 10d through 10o, or Lines 10a through 10o, as specified by the
	Use Line 12, Remarks, to p	rovide any information deemed necessary to support or explain FFR data.
Federal 10a	Cash (To report multiple g Cash Receipts	Enter the cumulative amount of actual cash received from the Federal
10b	Cash Disbursements	Enter the cumulative amount of Federal fund disbursements (such as cash or checks) as of the reporting period end date. Disbursements are the sum of actual cash disbursements for direct charges for goods and services, the amount of indirect expenses charged to the award, and the amount of cash advances and payments made to subrecipients and contractors.
		For multiple grants, report each grant separately on the <i>FFR</i> Attachment. The sum of the cumulative cash disbursements on the <i>FFR</i> Attachment must equal the amount entered on Line 10b, <i>FFR</i> .
10c	Cash On Hand (Line 10a Minus Line 10b	Enter the amount of Line 10a minus Line 10b. This amount represents immediate cash needs. If more than three business days of cash are on hand, the Federal agency may require an explanation

FFR Number	Reporting Item	Instructions
		on Line 12, Remarks, explaining why the drawdown was made prematurely or other reasons for the excess cash.
Federal	Expenditures and Unoblig	ated Balance: Do not complete this section if reporting on multiple
awards.	Expenditures and enoung	mod 2mmeet 20 not complete min occurrent reperming on manager
10d	Total Federal Funds Authorized	Enter the total Federal funds authorized as of the reporting period end date.
10e	Federal Share of Expenditures	Enter the amount of Federal fund expenditures. For reports prepared on a cash basis, expenditures are the sum of cash disbursements for direct charges for property and services; the amount of indirect expense charged; the value of third-party in-kind contributions applied; and the amount of cash advance payments and payments made to subrecipients. For reports prepared on an accrual basis, expenditures are the sum of cash disbursements for direct charges for property and services; the amount of indirect expense incurred; the value of in-kind contributions applied; and the net increase or decrease in the amounts owed by the recipient for (1) goods and other property received; (2) services performed by employees, contractors, subrecipients, and other payees; and (3) programs for which no current services or performance are required. Do not include program income expended in accordance with the deduction alternative, rebates, refunds, or other credits. (Program income expended in accordance with the deduction alternative should be reported separately on Line 100.)
10f	Federal Share of Unliquidated Obligations	Unliquidated obligations on a cash basis are obligations incurred, but not yet paid. On an accrual basis, they are obligations incurred, but for which an expenditure has not yet been recorded. Enter the Federal portion of unliquidated obligations. Those obligations include direct and indirect expenses incurred but not yet paid or charged to the award, including amounts due to subrecipients and contractors. On the final report, this line should be zero unless the awarding agency has provided other instructions.  Do not include any amount in Line 10f that has been reported in Line 10e. Do not include any amount in Line 10f for a future commitment of funds (such as a long-term contract) for which an obligation or expense has not
10g	Total Federal Share (Sum	been incurred. Enter the sum of Lines 10e and 10f.
10h	of Lines 10e and 10f) Unobligated Balance of Federal Funds (Line 10d Minus Line 10g)	Enter the amount of Line 10d minus Line 10g.
Recipien		this section if reporting on multiple awards.
10i	Total Recipient Share Required	Enter the total required recipient share for reporting period specified in line 9. The required recipient share should include all matching and cost sharing provided by recipients and third-party providers to meet the level required by the Federal agency. This amount should not include cost sharing and match amounts in excess of the amount required by the Federal agency (for example, cost overruns for which the recipient incurs additional expenses and, therefore, contributes a greater level of cost

FFR Number	Reporting Item	Instructions
		sharing or match than the level required by the Federal agency).
10j	Recipient Share of Expenditures	Enter the recipient share of actual cash disbursements or outlays (less any rebates, refunds, or other credits) including payments to subrecipients and contractors. This amount may include the value of allowable third party in-kind contributions and recipient share of program income used to finance the non-Federal share of the project or program. Note: On the final report this line should be equal to or greater than the amount of Line 10i.
10k	Remaining Recipient Share to be Provided (Line 10i Minus Line10j)	Enter the amount of Line 10i minus Line 10j. If recipient share in Line 10j is greater than the required match amount in Line 10i, enter zero.
Progran		this section if reporting on multiple awards.
101	Total Federal Program Income Earned	Enter the amount of Federal program income earned. Do not report any program income here that is being allocated as part of the recipient's cost sharing amount included in Line10j.
10m	Program Income Expended in Accordance With the Deduction Alternative	Enter the amount of program income that was used to reduce the Federal share of the total project costs.
10n	Program Income Expended in Accordance With the Addition Alternative	Enter the amount of program income that was added to funds committed to the total project costs and expended to further eligible project or program activities.
100	Unexpended Program Income (Line 101 Minus Line 10m or Line 10n)	Enter the amount of Line 10l minus Line 10m or Line 10n. This amount equals the program income that has been earned but not expended, as of the reporting period end date.
11		te this information only if required by the awarding agency and in
11a	Type of Rate(s)	State whether indirect cost rate(s) is Provisional, Predetermined, Final, or Fixed.
11b	Rate	Enter the indirect cost rate(s) in effect during the reporting period.
11c	Period From; Period To	Enter the beginning and ending effective dates for the rate(s).
11d	Base	Enter the amount of the base against which the rate(s) was applied.
11e	Amount Charged	Enter the amount of indirect costs charged during the time period specified. (Multiply 11b. x 11d.)
11f	Federal Share	Enter the Federal share of the amount in 11e.
11g	Totals	Enter the totals for columns 11d, 11e, and 11f.
	s, Certification, and Agenc	<u> </u>
12	Remarks	Enter any explanations or additional information required by the Federal sponsoring agency including excess cash as stated in line 10c.
13a	Typed or Printed Name and Title of Authorized Certifying Official	Enter the name and title of the authorized certifying official.
13b	Signature of Authorized Certifying Official	The authorized certifying official must sign here.
13c	Telephone (Area Code, Number and Extension)	Enter the telephone number (including area code and extension) of the individual listed in Line 13a.
13d	E-mail Address	Enter the e-mail address of the individual listed in Line 13a.

FFR Number	Reporting Item	Instructions
13e	Date Report Submitted	Enter the date the FFR is submitted to the Federal agency using the
	(Month, Day, Year)	month, day, year format.
14	Agency Use Only	This section is reserved for Federal agency use.

## Line Item Instructions for the Federal Financial Report Attachment (To be completed if reporting on cash management activity for multiple grants.)

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Box	Reporting Item	Instructions
Number		
1	Federal Agency and	Enter the name of the Federal agency and organizational element
		identified in the award document or otherwise instructed by the agency.
	Which Report is Submitted	(This information should be identical to that entered in Box 1, FFR.)
2	Recipient Organization	Enter the name and complete address of the recipient organization
		including zip code. (Same information as entered in Box 3, FFR.)
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System
		(DUNS) number or Central Contract Registry extended DUNS number.
		(Same information as entered in Box 4a, FFR.)
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN).
		(Same information as entered in Box 4b, FFR.)
4	Reporting Period End Date:	Enter the ending date of the reporting period of this report. (Same
	(Month, Day, Year)	information as entered in Box 9, FFR.)
5	Federal Grant Number	Enter the grant number assigned to each award by the Federal agency.
	Recipient Account Number	Enter the account number or any other identifying number assigned by the
		recipient to each award. This number is for the recipient's use only and is
		not required by the Federal agency.
	Cumulative Federal Cash	Enter the cumulative amount of the Federal share of cash disbursed for
	Disbursement	each award. Cash disbursements are the sum of actual cash disbursements
		for direct charges for goods and services, the amount of indirect expenses
		charged to the award, and the amount of cash advances and payments
		made to subrecipients and contractors.
	Total	Enter the total for the Cumulative Cash Disbursement. This column
		should equal the amount reported on Line 10b, FFR.



#### **GENERAL GRANT WRITTEN PERFORMANCE REPORT**

STACKS NATIONAL HERITAGE AREA	Organization:	
Grant Programs	Grant Project Name:	
<i>Gram</i>	Year Grant Awarded:	
# of people served by # of staff hours in pro # of volunteer hours # of dollars matched	oject: in project:	

#### **OUTPUTS**

Describe activities and objectives accomplished by grant project. a) Were your original objectives met or changed? b) If changed, please briefly describe the key challenges, and reasons that they arose. c) Describe any unanticipated benefits to your organization, to participants, beyond the original goals or activities. d) How did the grant help you form new relationships, partnerships or leverage more funding? List any organizations that were active partners.

OUTCOMES  What happened to individuals, customers, participants as a result of these activities? It may have been a participant, a staff member or a volunteer. Share a brief story of how this program
impacted the life of someone. You can include thank you notes or comment cards that show individual or group impact from this project. Please quantify your outcomes, when possible.

**ATTACHMENTS** (Provide relevant materials that would visually illustrate the results of the project: <a href="mailto:photos">photos</a>, media coverage, print material, CD/DVD, etc. Electronic files may be emailed to cstreed@silosandsmokestacks.org.)

IMPACTS What has happened to your organization or community because of this project? How did this
grant make an impact or a difference on your organization or community?
NEXT STEPS
What are your next steps and plans for continuing or changing this program/project? Can Silos & Smokestacks staff be of assistance in the future with these plans?

DATE

SIGNATURE