# SFY 2022 Economic Distress Zone (EDZ) Grant

## **COMPLIANCE WORKSHOP**



# Grant Requirements



#### **Economic Distress Zone (EDZ) Grant**

The goal of the Economic Distress Zone Fund Grant is to provide funding to organizations registered with the United States Internal Revenue Service (IRS) as a 501(c) (3) corporation who provide services to residents of the State of Missouri in areas of high incidents of crime and deteriorating infrastructure for the purpose of deterring criminal behavior.

#### **Grant Requirements**

- SFY 2022 EDZ Notice of Funding Opportunity (NOFO)
- Administrative Guide for Homeland Security Grants
- Information Bulletins
  - Information Bulletin 1: Policy on Monitoring
  - Information Bulletin 2: Policy on Advance Payment and Cash Advances
  - Information Bulletin 5: Policy on Reimbursement Requests
  - Information Bulletin 8: Policy on Budget and Program Revisions Subaward Adjustments
- ➢ Missouri State Statutes

## **Audit Requirements**

An audit is required if recipients expend \$375,000 or more in state funds within the organization's fiscal year from any state source (including, but not limited to OSET)

- If the recipient is required to have an audit
  - The audit must be performed organization-wide by an independent firm
  - The audit must be conducted with reasonable frequency, usually annually, but no less than every two
     (2) years
- ➤If the recipient is not required to have an audit, the agency is still responsible for monitoring activities to provide reasonable assurance that the agency administers state awards in compliance with state requirements

#### This does not mean that the audit can include every other year!

#### **State Civil Rights**

Section 213.055 RSMo – Unlawful Employment Practices

 May not discriminate on the basis of race, color, religion, national origin, sex, ancestry, age, or disability in its employment practices (e.g. hiring, compensation, conditions, or privileges)

Section 213.065 RSMo – Discrimination in Public Accommodations

- May not discriminate on the basis of race, color, religion, national origin, sex, ancestry, or disability in the use and enjoyment of any place of public accommodation
- It is unlawful to refuse, withhold from, or deny any of the accommodations, advantages, facilities, services, or privileges made available in any place of public accommodations

Section 285.530.1 RSMo indicates that an agency will not knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri

#### **Grant Life Cycle**

Recipient submits an application

> Recipient receives an award letter and invitation to Compliance Workshop

Recipient attends Compliance Workshop

> Recipient will receive the award documents via email

- Award documents must be signed and each page of the Articles of Agreement initialed by the Authorized Official and sent to Department of Public Safety
- Application will be negotiated via WebGrants to update budget to reflect partial awards and remove unallowable items
- Once the signed documents are received and signed by the Director of Public Safety, and application budget corrections completed the grant will be marked "Underway"

"Underway" Phase

- Recipient can now begin work on project
- \*\*MAKE SURE TO REVIEW APPROVED BUDGET\*\* many projects were partially funded
- Claims are to be submitted for Reimbursement or Advanced Payment
- Status Reports are submitted

Closeout

Once all Claims and Status Reports have been submitted and approved the grant can be closed

## **Spending Grant Dollars**

➢ Funds must be obligated within the project period of performance, expended, and submitted for reimbursement within 15 days following the project period of performance end date (June 15, 2022)

Project Period: November 15, 2021 to May 31, 2022

➢ Funds are considered "obligated" when a legal liability to pay a determinable sum for services or goods is incurred and will require payment during the same or future period

>Funds are considered "expended" when payment is made

#### **Grant Reporting**

>Status Reports are required to be completed

- November 15, 2021-February 28, 2022 due March 15
- March 1, 2022-May 31, 2022 due June 15 (Final Status Report)

#### **Procurement Requirements**

>With any expenditure, the recipient must ensure that:

- The expenditure is an approved budget line item
  - Reimbursements will NOT be made for items that are not an approved budget line item at the time of purchase
- Prior approval has been obtained, if necessary
- Sufficient funds are in the approved budget line
- If a recipient is uncertain as to whether a cost meets these requirements, please contact the OHS for clarification

#### **Procurement Requirements Continued**

- Recipient must follow their agency's procurement policy unless the State of Missouri policy is more restrictive
- If the recipient does not have a procurement policy, they must follow the State of Missouri procurement policy
- State of Missouri Revised Statutes Chapter 34, State Purchasing and Printing
- Missouri Rules of Office of Administration Division 40 Purchasing and Materials Management
- Cooperative Procurement Option

If utilizing cooperative contract, procurement documents (quotes/bids) and invoice must reference cooperative contract number

#### **Procurement Requirements Continued**

#### **General Guidelines**

- All procurement transactions, whether negotiated or competitively bid, and without regard to the dollar value, shall be conducted in a manner so as to provide maximum open and free competition
- All bids/quotes, and the rationale behind the selection of a source of supply, must be retained, attached to the purchase
  order copy, and placed in the accounting files

#### State of Missouri Procurement Guidelines

- Items costing less than \$10,000 may be purchased with prudence on the open market
- All purchases estimated to total between \$10,000 but less than \$100,000 to a single vendor, must be competitively bid, but need not be solicited by mail or advertisement. An informal method is acceptable, for example: request for quotation, telephone quotes, online pricing, etc.
- All purchases with an estimated total expenditure of \$100,000 or over to a single vendor shall:
  - Be advertised for bid in at least two daily newspapers for general circulation in such places as are most likely to reach prospective bidders (and may
    advertise in at least 2 weekly minority newspapers and may provide such information through an electronic medium available to the general public) at
    least 5 consecutive days before bids for such purchases are to be opened
  - Post a notice of the proposed purchase in a public area of the recipient's office
  - Solicit bids by mail or other reasonable methods generally available to the public from prospective supplies
- If less than 3 bids are received OHS must approve prior to vendor selection
- Use of single feasible source procurement of \$10,000 or over requires prior approval from the OHS

## **Single Feasible Source**

- Use of a single feasible source procurement of \$10,000.00 or more requires prior approval from the OHS.
- Single feasible source form can be located on the DPS website <u>https://dps.mo.gov/dir/programs/ohs/grantstraining/</u>
- If purchase is made using a single feasible source without prior approval, OHS has the right to refuse reimbursement
  - > Non-compliance could result in the agency being listed as high risk



#### **Single Feasible Source Continued**

- Use of single feasible source procurement is discouraged. A single feasible source procurement exists when:
  - Non-Federal Funds
    - Supplies are proprietary and only available from the manufacturer or a single distributor; or
    - Based on past procurement experience, it is determined that only one (1) distributor services the region in which the supplies are needed; or
    - Supplies are available at a discount from a single distributor for a limited period of time

## Who Are You Doing Business With?

- Recipients are required to verify that vendors used for grant purchases are not on either the State Suspended/Debarred Vendors List
  - State of Missouri Office of Administration

\*Maintain a copy of a screenshot in the grant file to verify this was completed\*



## **Equipment vs. Supplies**

#### ≻Equipment

- Tangible, non-expendable (non-consumable) personal property having a useful life of more than one year and an acquisition cost of \$1,000 or more per unit
- Equipment must be recorded and tracked in an Inventory control list and tagged to reflect its source of funding
- Equipment must be "tagged" with the source of funds used to purchase the item(s)

#### ➤Supplies

Items that do not fit into the "Equipment" category

## **Equipment Records/Inventory**

> Records shall include an inventory control list for non-expendable property

Property must be tagged by the recipient; the tag should identify the item's source of funds, where feasible.

- "Purchased with SFY 2022 EDZ Funds"
- Subaward Number (e.g. 2022-EDZ-001)

## **Equipment Disposition**

➢ Recipients must request approval from the OHS prior to disposing of equipment. Procedures in the OHS Administrative Guide for Homeland Security Grants must be followed to request equipment disposition approval. Email the Equipment Disposition Forms to Maggie Glick at Maggie.Glick@dps.mo.gov

➤A copy of the approved Equipment Disposition Form must be maintained in the recipient grant file

Equipment Disposition Form found on the OHS website <u>https://dps.mo.gov/dir/programs/ohs/documents/Equipment-Disposition-Reques-%20Form-Other 11-2-20.pdf</u>

# WebGrants System



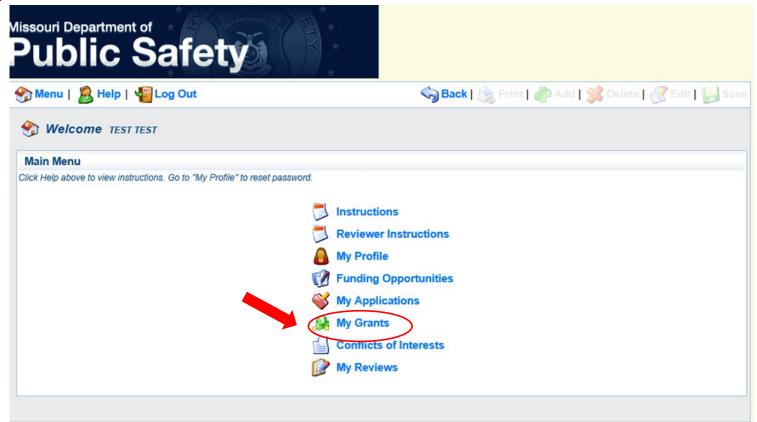
#### WebGrants

Login to the WebGrants using the same User ID and Password used when submitting the application

Log In User ID:* Log In Forgot User Id?	
Two-factor authentication	Two-Step Verification      An email has been sent to the email address listed in     your user profile with a one-time passcode. Please enter     the passcode below.      Password:*     One-Time     Passcode:*     Authenticate     Reset Password     Resend One Time Passcode

#### **WebGrants Continued**

Select "My Grants"



#### **WebGrants Continued**

Select project titled "SFY 2022 Economic Distress Zone (EDZ) Grant"



#### **WebGrants Continued**

#### Grant Components

Grant Components	Alerts   Copy   Annotations (0)   Export Grant Data   Map
The components below are associated with the current Funding Opportunity. Yo You may associate specific forms in the Associated Forms section above. You copy this grant and you can export the raw data.	ou can change these components in the Funding Opportunity module. can define your own alerts in the Alerts section. You can make notes by clicking Annotations. You can
Component	Last Edited
General Information	01/05/2022
Contact Information	01/05/2022
Budget Form	01/05/2022
Claims	
Correspondence	
Subaward Adjustments	
Subaward Adjustment Notices	
Status Reports	
Attachments	
EDZ Project Form	01/05/2022
Award Documents - Final	
Appropriations	
Named Attachments (EDZ)	01/05/2022
Closeout	
Opportunity	-
Application	-
Application Versions	-
Application Annotations	-
Review Forms	-

#### **Award Documents**

#### Fully-executed Award is located in Award Documents – Final Component

• Maintain the Award in your grant file

Grant Components	Alerts   Copy   Annotations (0)   Export Grant Data   Ma
The components below are associated with the current Funding Opportu You may associate specific forms in the Associated Forms section above copy this grant and you can export the raw data.	inity. You can change these components in the Funding Opportunity module. e. You can define your own alerts in the Alerts section. You can make notes by clicking Annotations. You can
Component	Last Edited
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Award Documents - Final	
Appropriations	
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Closeout	
Opportunity	-
Application	· · · · ·
Application Versions	
Application Annotations	-
Review Forms	-

#### Budget

Approved budget is located in Budget Component

- Be sure to review approved budget before beginning procurement
- Ensure you are only purchasing items that are on approved budget
- Ensure you are purchasing the quantity of items that is on approved budget
- Request Subaward Adjustment if need to make changes to budget (i.e. change in quantity)

#### **Budget Continued**

To include lines in	your budget, click "Add". If th	e project includes more than one budget l	ine, repeat this step for each budget line.		
Line Number:	Budget Line Category	Line Name:	Line Description:	Amount of Grant Funds Requested	
1001	1. Personnel	Program Coordinator	TBH - Program Coordinator 20 Hours	\$5,000.00	
2001	2. Personnel Benefits	Program Coordinator Fringe Benefits	Program Coordinator Fringe Benefits 30%	\$1,500.0	
11001	7. Supplies/Operations	Office Supplies	General Office Supplies	\$500.00	
Budget Narra	ative				
Budget Justification*					
(For each budget line requested please provide a separate justification.)					
The Justification for each line should include the following:					
1. Justify why each requested budget line is necessary for the success of the proposed project.					
2. Cost Basis for	the budget line request.				
Specific information for budget lines in these categories should also include:					
Personnel and Overtime Personnel - Description of job responsibilities the individual will be expected to perform for this project/program.					
Benefit and Overtime Benefits - List which benefits are included and the rate of each benefit.					
Travel/Training – List each training separately in the budget and in the justification provide the cost breakdown for the training (Registration, hotel, per diem, etc.)					

Negotiate Component | Create New Version | Return to Components | Add

Equipment – In justification please include if the item is new or a replacement, and who will be using the equipment.

Contractual - Provide the dates of service for any contracts or contracted services.

#### Personnel:

Budget

Program Coordinator 250 hours @ \$20.00 = \$5,000. Program Coordinator will oversee and implement all project activities for the program and ensure the program is successful.

#### Personnel Benefits:

Fringe Benefits for Program Coordinator to include FICA/Medicare, Health, Unemployment. 30% of salary x \$5,000 = \$1,500.00

Supplies:

General Office Supplies to include paper, pens, files, etc. \$500.00



## **Reimbursement Request (Claims)**

Information Bulletin 5: Policy on Reimbursement Requests discusses requirements for reimbursement requests

Must incur an allowable expense, make payment, and seek reimbursement within 6 months of the invoice date

- Supporting documentation must be submitted with each claim
  - Must be in one attachment and in the same order as the Expenditures Form on the reimbursement request in WebGrants

>In the Expenditure Form in WebGrants, a line must be completed for each individual expenditure

Multiple invoices on one expenditure line will not be accepted. However, each item purchased on an invoice does not need to be listed separately unless the items are on a different line in the approved budget

Incomplete claims could result in a delay of payment. It is the requesting agency's responsibility to complete the necessary changes

#### **Personnel/Benefits Supporting Documentation**

- Claim in WebGrants
- Wage and benefit costs
- Proof of payment (payroll journal, check stub)
- Timesheet(s)
- Signed personnel certification(s)

#### **Travel/Training Supporting Documentation**

- Claim in WebGrants
- Vendor Invoice
- Proof of Payment (copy of cancelled check, credit card statement, bank statement)
- Approved Training Request Form
  - Training Request Form must be submitted to the OHS 30 business days before the anticipated training date
  - o Training Request Form link: <u>https://dps.mo.gov/dir/programs/ohs/documents/TrainingRequestForm.pdf</u>
- Agenda/Announcement
- Proof of attendance (sign-in sheet/roster/certificate)

\*Meals, mileage, and lodging cannot exceed the state of Missouri rates established by the Missouri Office of Administration. Current rates can be found at: <u>https://oa.mo.gov/state-employees-new#mini-panel-state-employees-tabs6</u>

#### **Equipment Supporting Documentation**

- Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and <u>a per-unit acquisition cost</u> which equals or exceeds the lesser of the capitalization level established by the agency for financial statement purposes, or <u>\$1,000</u>
- Claim in WebGrants
- Vendor Invoice
- Proof of payment (i.e., copy of cancelled check, credit card statement, bank statement)
- Proof of delivery/completion (i.e., signed packing slip, receipt, or signed statement in writing indicating items delivered)
- Purchase order, if one was created or referenced on an invoice
- Equipment Inventory Form in WebGrants must be completed for each piece of equipment
  - If you purchased, more than one of the same item, they must be listed separately on the equipment inventory form

## **Supplies Supporting Documentation**

- Claim in WebGrants
- Vendor Invoice
- Proof of Payment (i.e., copy of cancelled check, credit card statement, or bank statement)
- Proof of delivery/completion (i.e., signed packing slip, signed receipt, or signed statement in writing indicating items delivered)

#### **Contractual Services Supporting Documentation**

- Claim in WebGrants
- Vendor Invoice
- Proof of payment (copy of cancelled check, credit card statement, bank statement)
- Proof of delivery (signed statement in writing indicating goods/services received)
- Copy of signed contact must be submitted with first claim
- Other documentation required by contract (milestone reports, time and effort)

#### **Advance Payment**

- Information Bulletin 2: Policy on Advance Payment and Cash Advances discusses requirements for advance payment requests
- Advance payment is defined as funds given to a recipient in advance of the recipient incurring the debt. For example, if a recipient orders a piece of equipment and requests reimbursement prior to paying the vendor's invoice, receipt of funds would be considered an advance payment
- Will not provide advance payment to a recipient before costs have been incurred through an invoice from a vendor
  - Some situations, local cash flow makes payment for large equipment items difficult
  - OHS has agreed to accept requests for funds from recipients as soon as a vendor submits their invoice and the recipient has received goods or services
- >\$2,500 minimum for recipients requesting a reimbursement with an advance payment

#### **Advance Payment Supporting Documentation**

- Claim in WebGrants
- Vendor Invoice
- Proof of delivery/completion (i.e., signed packing slip, receipt, or signed statement in writing indicating items delivered)
- Completed Equipment Detail Form in WebGrants, if applicable

Required to submit proof of payment (i.e., copy of cancelled check, credit card statement, or bank statement) to the OHS within 30 days from receipt of payment

To request, will type "Advance Payment" in the Check/EFT Number and Check/EFT Date fields in the WebGrants claim

#### Submitting a claim in WebGrants

#### Select "Claims" component in WebGrants

Grant Components Alerts   Copy	y   Annotations (0)   Export Grant Data   Map			
The components below are associated with the current Funding Opportunity. You can change these components in the Funding Opportunity module. You may associate specific forms in the Associated Forms section above. You can define your own alerts in the Alerts section. You can make notes by clicking Annotations. You can copy this grant and you can export the raw data.				
Component	Last Edited			
General Information	01/05/2022			
Contact Information	01/05/2022			
Budget Form	01/05/2022			
Claims				
Correspondence				
Subaward Adjustments				
Subaward Adjustment Notices				
Status Reports				
Attachments				
EDZ Project Form	01/05/2022			
Award Documents - Final				
Appropriations				
Named Attachments (EDZ)	01/05/2022			
Closeout				
Opportunity	-			
Application	-			
Application Versions	-			
Application Annotations	-			
Review Forms	-			

#### Select "Add"

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🐊 G	A Grant Tracking					
Grant	Grant: 131793 - SFY 2022 EDZ ABC Organization - 2022					
		Status:	Underway			
Program Area: Economic Distress Zone						
	Grantee Organization: BaseLine Organization					
Program Officer: Joni McCarter						
Budget Total: \$7,000.00		\$7,000.00				
Claim	Claims Scheduler   Annotations(0)   Return to Components					
ID	Туре	Status	Date Submitted	Date Paid	Date From-To	Claim Amount
					Submitted Amount	\$0.00
					Approved Amount Paid Total	
					Total	\$0.00

**Complete Claim General Information** 

- Claim Type Select "Monthly/Quarterly/Other" in the drop-down
- Reporting Period Enter the date range for the expenses being requested
- Invoice Number Leave field blank
- Is this your Final Report
  - Select "Yes" if this is your last claim
  - Select "No" if this is not your last claim
- Select "Save"

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À Grant Tracking	
Claim General Information	
To create a new Claim enter the starting date	and the ending date of the Report Period. This is the period of coverage for this Claim.
Claim Type:*	Monthly V
Claim Status:*	Editing V
Reporting Period:*	01/01/2022 01/31/2022 01/31/2022
Due Date:	
Invoice Number:	LEAVE BLANK State Agencies Only! Drop first 3 digits of number. Leave blank if there is not an invoice number!
Is This Your Final Report?*	⊖Yes ●No

#### Select claim "ID" on the claim you just created



Complete all Claim Components by selecting the component

- Expenditures
- Reimbursement
- Equipment Inventory
- Other Attachments

All components must be marked "Complete" in order to submit the claim

Claim: 131793 - 001			Grant Components			
Grant:	131793-SFY 2022 EDZ ABC	Organization				
Status:	diting					
Program Area:	Economic Distress Zone	conomic Distress Zone				
Grantee Organization:	<b>BaseLine Organization</b>	aseLine Organization				
Program Manager:	Joni McCarter					
Components			Preview   Submit			
Complete each component of the Claim and n	ark it as complete. Click Submit whe	en you are done.				
Name		Complete?	Last Edited			
General Information		√	01/05/2022			
Expenditures						
Reimbursement						
Equipment Inventory						
Other Attachments						

**Expenditures Component** 

- Select "Add" for each expenditure to add a line to the Expenditures Form
- Complete each line of the Expenditures Form

Expenditu	res				Create New	Version	Mark as Cor	mplete   Go to Clai	im Forms   Add
Line Number	Payee Description	n Quantity	Unit Cost	Expense Total	Federal Amount Requested	Invoice #	Invoice Date	Check/EFT Number	Check/EFT Date
					\$0.0	00			
									Last Edited By:

Select "Save" when complete

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Grant Componen
131793-SFY 2022 EDZ ABC Organization
Editing
Economic Distress Zone
BaseLine Organization
Joni McCarter
1001 - Budget - 1. Personnel V
ABC Organization
Program Coordinator Salary January
1.0
\$400.00
\$400.00
001
1/31/2022
0001
01/31/2022

Line Number – select the corresponding budget line for the item that is being requested for reimbursement

Payee - enter the name of the vendor that the item was purchased from

Description – enter a description of the item purchased

Quantity - enter the quantity of the item that was purchased

Unit Cost – Cost per item

• The number entered into the unit cost field, multiplied by the quantity entered, should be the Federal Amount Requested that you are seeking reimbursement for

Federal Amount Requested – Total amount of funds being requested

Invoice # - vendor's invoice number

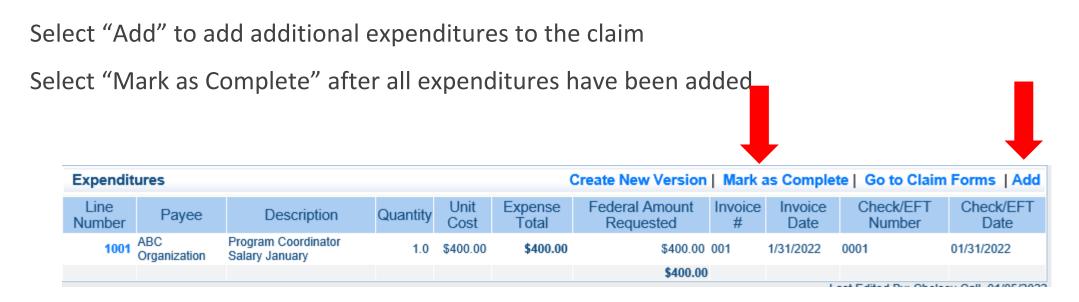
Invoice Date - date on vendor's invoice

Check/EFT Number

- Check number used for payment to vendor **OR** EFT number for payment to vendor
- Advance Payment

Check/EFT Date

- Date of check used for payment to vendor **OR** Date of EFT for payment to vendor
- Advance Payment



Select the "Reimbursement" Claim Component

 Verify the amounts entered on the Expenditures Form have been transferred to the Reimbursement Form correctly

Select "Mark as Complete"

Reimbursement			с	reate New Version	Mark as Complete	Go to Claim Forms
Budget Category		Contract Budget	Expenses This Period	Prior Expenses (Paid)	Total Paid	Available Balance (Unpaid)
Budget						
1. Personnel		\$5,000.00	\$400.00	\$0.00	\$400.00	\$4,600.00
2. Personnel Benefits		\$1,500.00	\$120.00	\$0.00	\$120.00	\$1,380.00
7. Supplies/Operations		\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
Sub	Total:	\$7,000.00	\$520.00	\$0.00	\$520.00	\$6,480.00
Total Budget						
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Sub	Total:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Total:	\$7,000.00	\$520.00	\$0.00	\$520.00	\$6,480.00
						Last Edited By

Select "Equipment Inventory" Claim Component

Select "Add" for each equipment item

Each item needs to be entered on its own line

• If you purchased two of the same item, there should be one line for each item

Complete all fields in the Equipment Detail Form

If no equipment is being requested for reimbursement, select "Mark as Complete"

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🐊 Grant Tracking	
Claim: 131793 - 001	Grant Components
Grant: 131793-SFY 2 Status: Editing Program Area: Economic Dis Grantee Organization: BaseLine Org Program Manager: Joni McCarter	rganization
Equipment Detail	Create New Version   Mark as Complete   Go to Claim Forms
Requesting Organization: Region: County: Year: Budget Line # Manufacturer: Model:	I: Description: Identification #(s): Source of Funding: Title Date of Delivery Quantity Individual Item Costs Intercost: Cost

If equipment is requested, complete all fields in the Equipment Detail Form

Requesting Organization – Recipient's Organization

Region – Recipient's Region

County – Recipient's County

Year – Grant year the equipment was purchased (2022)

Budget Line # - Budget line number associated with the equipment

Manufacturer – Manufacturer of the equipment

Model – Model number of the equipment

Description – Description of the equipment (i.e., Laptop, Printer)

Identification # - Unique identification numbers such as serial number. N/A should be annotated if there is not a serial number

Source of Funding – Source of funding utilized (EDZ)

Title Holder – Recipient Organization who owns the equipment

Date of Delivery - Date equipment was delivered

Quantity – Number of equipment items purchased (should only be one per line)

Individual Item Costs - Cost of individual equipment item

% of Federal Participation in the Cost – Percentage of cost of the equipment that is being requested

Current Physical Location – Address where the equipment is located (P.O. Box is not a physical location for the inventory)

Equipment Contact Person (ECP) – Name of person to contact regarding equipment

ECP Phone # - Phone number for equipment contact person

ECP Email Address – Email address for equipment contact person

Use – Local, regional, statewide, or national. Progressive scale. If national use is entered, it is assumed it is available at all other levels

**Readiness Condition** 

- Mission capable material condition of equipment indicating it can perform at least one and potentially all of its designated missions
- Not mission capable material condition indicating that equipment is not capable of performing any of its designated mission



Select "Other Attachments" Claim Component

 Select "Add" to attach supporting documentation to claim

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🐊 Grant Tracking			
Claim: 131793 - 001			Grant Components
Grant:	131793-SFY 2022 EDZ ABC Organia	zation	
Status:	Editing		
Program Area:	Economic Distress Zone		
Grantee Organization:	BaseLine Organization		
Program Manager:	Joni McCarter		
Other Attachments		Create New Vers	sion   Mark as Complete   Go to Claim Form
If you have no relevant and/or required docum	ents to attach, simply click "Mark as Complete"	-	
To upload any relevant and/or required docum click Save.	ents, select Add from the menu toolbar, brows	e for the document on your com	puter or disk, enter a short title in the Description box, and
	disk but is rather a sheet of printed paper, it w the pages can be saved as one file or use a PL		d to a computer file location. If the document is multiple -page scans into 1 saved document.
pages, check your scanner settings to ensure The Department of Public Safety can support	the pages can be saved as one file or use a PL the following file types: Word (*.doc, *.docx), Ex	DF merger to combine multiple 1 (cel (*.xls, *.xlsx), PowerPoint (*	-page scans into 1 saved document.
pages, check your scanner settings to ensure The Department of Public Safety can support (*.bmp, *.jpg, *.jpeg, *.jpe, *.asp, *.tif, *.wmf) a attachment may not be considered.	the pages can be saved as one file or use a PL the following file types: Word (*.doc, *.docx), Ex	DF merger to combine multiple 1 ccel (*.xls, *.xlsx), PowerPoint (* ach a file type that the Departme	-page scans into 1 saved document. .ppt, *.pptx), Publisher (*.pub), Adobe PDF (*.pdf), Photos

Select browse to locate supporting documentation on your computer

Enter a description of the attachment

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À Claim		1
Attach File		
If you have no relevant and/or required docum	ents to attach, simply click "Mark as Complete".	
To upload any relevant and/or required docum click Save.	ents, select Add from the menu toolbar, browse for the do	cument on your computer or disk, enter a short title in the Description box, and
		be scanned and saved to a computer file location. If the document is multiple to combine multiple 1-page scans into 1 saved document.
		*.xlsx), PowerPoint (*.ppt, *.pptx), Publisher (*.pub), Adobe PDF (*.pdf), Photos pe that the Department of Public Safety does not have software to open, the
Do not attach password protected documents	as the Print to PDF feature will not be able to open such fi	ile types.
Upload File:	C:\Users\ccall\Desktop\Test File.docx	Browse
Description:*	Claim #1 Supporting Documentation	
		×

When all attachments have been added, select "Mark as Complete"

🏠 Menu   🧏 Help   📲 Log Out		Sack	🔌 Print   🥐 Add	💢 Delete   💕 Edit   🔚 S
À Grant Tracking				
Claim: 131793 - 001				Grant Componer
Grant:	131793-SFY 2022 EDZ ABC	Organization		
Status:	Editing			
Program Area:	Economic Distress Zone			
Grantee Organization:	BaseLine Organization			
Program Manager:	Joni McCarter			
Other Attachments			ew Version   Mark a	s Complete   Go to Claim Fo
you have no relevant and/or required docum	ients to attach, simply click "Mark as	Complete".		
o upload any relevant and/or required docum lick Save.	nents, select Add from the menu tooll	par, browse for the document on j	your computer or disk, ent	er a short title in the Description box, a
this document is not saved on a computer of ages, check your scanner settings to ensure				
The Department of Public Safety can support i *.bmp, *.jpg, *.jpeg, *.jpe, *.asp, *.tif, *.wmf) au ttachment may not be considered.				
o not attach password protected documents	as the Print to PDF feature will not b	e able to open such file types.		
Descriptio	on	File Name	File Size	Date Uploaded
Claim #1 Supporting Documentation		Test File.docx	12 KB	01/05/2022

When all Claim Components have been complete, select "Submit" to submit the claim to OHS

Components		Preview   Submit		
Complete each component of the Claim and mark it as complete. Click Submit when you are done.				
Name	Complete?	Last Edited		
General Information	√	01/05/2022		
Expenditures	✓	01/05/2022		
Reimbursement	1	01/05/2022		
Equipment Inventory	✓	01/05/2022		
Other Attachments	1	01/05/2022		

## **Subaward Adjustments**

Information Bulletin 8: Policy on Budget and Program Revisions – Subaward Adjustments discusses Subaward Adjustments

- >Budget Modifications transfer among existing budget lines within the grant budget
  - Request for budget modification must be submitted through WebGrants as a Subaward Adjustment and <u>must</u> be approved by the OHS <u>prior</u> to the recipient obligating or expending the grant funds

#### Program Modifications

- Request for program modifications must be submitted through WebGrants as a Subaward Adjustment and must be approved by the OHS prior to the recipient obligating or expending the grant funds
- Program modifications include:
  - Changes in recipient staff (Authorized Officials, Project Directors, or Fiscal Officers)
  - $\,\circ\,$  Address change or other information in the organization component of WebGrants



Scope of Work Changes

- Adding new line items to the approved budget
- Changes in quantity of an existing line item in approved budget
- Changes to specifications of existing line item (i.e., an equipment line item on the approved budget lists a 12'x 20' tent, in order to purchase a tent that is 10' x 10' instead of the listed equipment, prior approval is required

Request for scope changes must be submitted through WebGrants as a Subaward Adjustment and must be approved by the OHS prior to the recipient obligating or expending the grant funds

#### Submitting a Subaward Adjustment in WebGrants

#### Select "Subaward Adjustments" component in WebGrants

Grant Components	Alerts   Copy   Annotations (0)   Export Grant Data   Map
The components below are associated with the current Funding Opportunity. Yo You may associate specific forms in the Associated Forms section above. You o copy this grant and you can export the raw data.	I can change these components in the Funding Opportunity module. an define your own alerts in the Alerts section. You can make notes by clicking Annotations. You can
Component	Last Edited
General Information	01/05/2022
Contact Information	01/05/2022
Budget Form	01/05/2022
Claims	
Correspondence	
Subaward Adjustments	
Subaward Adjustment Notices	
Status Reports	
Attachments	
EDZ Project Form	01/05/2022
Award Documents - Final	
Appropriations	
Named Attachments (EDZ)	01/05/2022
Closeout	
Opportunity	-
Application	-
Application Versions	-
Application Annotations	-
Review Forms	

#### Select "Add"

Subaward Ad	djustments		Return to Components   Add			
ID	Туре	Status	Submitted Date			
	Last Edited By:					

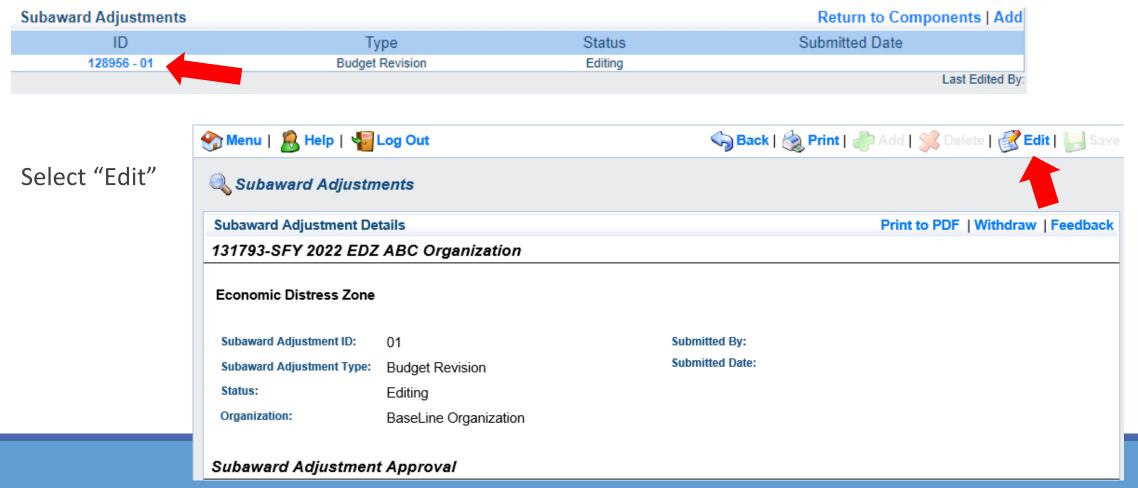
#### Complete General Information and select "Save"

🅎 Menu   🧏 Help   📲 Log Out	🥱 Back   쵫 Print   🧼 Add   渊 Delete   🥳 Edit   🔚 Save
A Grant Tracking	
General Information	
(limited to 250 characters)* Brief Title	
Contract Amendment Type: <sup>∗</sup> Budget Revision ✓	
Status:* Editing	

**General Information** 

- Title enter a brief title
- Contract Amendment Type choose the type of adjustment being requested
  - Budget Revision
  - Program Revision

#### Select the "ID" of the Subaward Adjustment you just created



Complete all Subaward Adjustment Components by selecting the Component

- Justification
- Budget
- Confirmation
- Attachments

All components must be marked "Complete" in order to submit the Subaward Adjustment

Components		Preview   Submit
Name	Complete?	Last Edited
General Information	1	01/05/2022
Justification		
Budget		
Confirmation		
Attachments		

Justification Component

- Explain the requested change and the reason for the requested adjustment
- Complete Subaward Adjustment Spreadsheet with requested changes for budget modification
  - Copy and paste Subaward Adjustment Spreadsheet into text box
  - Will be sent at conclusion of training
  - Select "Save"

	on
ustificatio	
lease expl roject.	n the reason for the requested adjustment and include the effective date. State the need for the change and how the requested revision will further the objectives of t
<b>X</b> 6	$\hat{\mathbb{T}}$ $\hat{\mathbb{T}}$ $\hat{\mathbb{W}}$ $\rightarrow$ $\hat{\mathbb{W}}$ $\rightarrow$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ $\hat{\mathbb{W}}$ Source
BI	<u>U</u>   <u>I</u> <sub>x</sub>   ≟≣ ∶≡   ⊕E ⊕E ≡ ≡ =   Font -   Size -   <u>A</u> - [A] -
	he requested change and the reason for the requested adjustment I paste Subaward Adjustment Spreadsheet here

Line Number	Current Budget	<b>Requested Change</b>	Updated Budget	Notes
10001	\$ 400.00	\$ (150.00)	\$ 250.00	Savings needed in another budget line of the project
10002	\$ 3,000.00	\$ 300.00	\$ 3,300.00	Cost of equipment over original budget
11003	\$ 20,000.00	\$ (150.00)	\$ 19,850.00	Decrease number of supplies to purchase equipment
Total	\$ 23,400.00	\$-	\$ 23,400.00	

#### Review "Justification Form" to ensure it is complete and accurate

Select "Mark as Complete"

		•	
Justification	Create New Version	Mark as Complete	<b>Return to Components</b>
Justification*			
Please explain the reason for the requested adjustment and include the effective date. State the project.	e need for the change and how	r the requested revision will	further the objectives of the
Explain the requested change and the reason for the requested adjustment			
Copy and paste Subaward Adjustment Spreadsheet here			
		Last Edit	ed By: Chelsey Call, 04/19/2021

Select "Budget" for Budget Modifications

- Adjust the budget to mirror the requested changes
- Make sure to update the Total Federal/State Share amounts

Select "Save"



#### Budget

The Current Budget column represents the total cost of the current subaward. Enter the total cost of each budget category as it is reflected in the current version of the Budget component. The sum of the Current Budget column should equal your current budget total.

The Revised Amount column represents the requested, revised total cost of the budget as a result of the Subaward Adjustment. Therefore, enter the total cost of each budget category as it will be reflected in the revised version of the Budget component. The sum of the Revised Amount column should equal your revised budget total.

Row	Current Budget	t Revised Amount
Personnel	\$0.00	\$0.00
Personnel Benefits	\$0.00	\$0.00
Personnel Overtime	\$0.00	\$0.00
Personnel Overtime Benefits	\$0.00	\$0.00
PRN Time	\$0.00	\$0.00
PRN Benefits	\$0.00	\$0.00
Volunteer Match	\$0.00	\$0.00
Travel/Training	\$0.00	\$0.00
Equipment	\$5,000.00	\$4,800.00
Supplies/Operations	\$0.00	\$200.00
Contractual	\$0.00	\$0.00
Renovation/Construction	\$0.00	\$0.00

#### Federal/State and Local Match Share

The Current Budget column represents the current subaward. Enter the total federal/state share and total local match share as it is reflected in the current version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Current Budget column above.

The Revised Amount column represents the requested, revised total of the budget as a result of the Subaward Adjustment. Therefore, enter the total federal/state share and the total local match share as it will be reflected in the revised version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Revised Amount column above.

Row	Current Budget	Revised Amount
Total Federal/State Share	\$5,000.00	\$5,000.00
Total Local Match Share	\$0.00	\$0.00

#### Ensure the "Budget" form is accurate and select "Mark as Complete"

Budget	t Create New Version   Mark as Complete   Return to Components				
The Current Budget column represents the total cost of the current moment. The sum of the Current Budget column should equal is     The Revised Amount column represents the requested, revise	your current budget total.		rent version of the Budget		
category as it will be reflected in the revised version of the Budget			t total.		
Row	Current Budget	Revised Amount	Net Change		
Personnel	\$0.00	\$0.00	\$0.00		
Personnel Benefits	\$0.00	\$0.00	\$0.00		
Personnel Overtime	\$0.00	\$0.00	\$0.00		
Personnel Overtime Benefits	\$0.00	\$0.00	\$0.00		
PRN Time	\$0.00	\$0.00	\$0.00		
PRN Benefits	\$0.00	\$0.00	\$0.00		
Volunteer Match	\$0.00	\$0.00	\$0.00		
Travel/Training	\$0.00	\$0.00	\$0.00		
Equipment	\$5,000.00	\$4,800.00	(\$200.00)		
Supplies/Operations	\$0.00	\$200.00	\$200.00		
Contractual	\$0.00	\$0.00	\$0.00		
Renovation/Construction	\$0.00	\$0.00	\$0.00		
Totals	\$5,000.00	\$5,000.00	\$0.00		

#### Federal/State and Local Match Share

The Current Budget column represents the current subaward. Enter the total federal/state share and total local match share as it is reflected in the current version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Current Budget column above.

The **Revised Amount** column represents the requested, revised total of the budget as a result of the Subaward Adjustment. Therefore, enter the total federal/state share and the total local match share as it will be reflected in the revised version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Revised Amount column above.

Row	Current Budget	Current Percent	Revised Amount	Revised Percent	Net Change
Total Federal/State Share	\$5,000.00	100.0%	\$5,000.00	100.0%	\$0.00
Total Local Match Share	\$0.00	0%	\$0.00	0%	\$0.00

Select "Confirmation" form

- Complete with Authorized Official's Name, Title, and Date
- Select "Save"

🏹 Menu   🧏 Help   📲 Log Out	🥎 Back   쵫 Print   🤚 Add   🎉 Delete   🛃 Edit   🔚 Sa
🔍 Subaward Adjustments	
Subaward Adjustment: 01	
Grant:	131793-SFY 2022 EDZ ABC Organization
Status:	Editing
Program Area:	Economic Distress Zone
Grantee Organization:	BaseLine Organization
Program Manager:	Joni McCarter
Submitted Date:	
Confirmation	
	official, in lieu of signature, represents your legally binding acceptance of the terms of this subaward adjustment and your statement of is subaward adjustment. You must include your title, full legal name, and the current date.
Authorized Official Name:*	John Smith
Title:*	Executive Director
Date:*	01/15/2022 ×)
All terms and conditions of the original Su	ibaward apply to this Subaward Adjustment Notice.
All terms and conditions of the original Su	
DPS Authorized Official/Designee Signature:	

#### Select "Mark as Complete"



 Confirmation
 Create New Version
 Mark as Complete
 Return to Components

 Your typed name as the applicant authorized official, in lieu of signature, represents your legally binding acceptance of the terms of this subaward adjustment and your statement of the veracity of the representations made in this subaward adjustment. You must include your title, full legal name, and the current date.

 Authorized Official Name:\*
 John Smith

 Title:\*
 Executive Director

 Date:\*
 01/15/2022

 All terms and conditions of the original Subaward apply to this Subaward Adjustment Notice.

 DPS Authorized Official/Designee

 Signature:

 Date:

Select "Attachments" form

- Select "Add"
- Attach Subaward Adjustment Spreadsheet
- Attachments may also include new/updated quote

I Menu   🧟 Help   📲 Log Out		S Bac	<b>:k   阈 Print   </b>	P Add   💥 Del	lete   💕 Edit   📙 Sa
🔍 Subaward Adjustments					
Subaward Adjustment: 01					
Grant:	131793-SFY 2022 EDZ A	BC Organization			
Status:	Editing				
Program Area:	Economic Distress Zone				
Grantee Organization:	BaseLine Organization				
Program Manager:	Joni McCarter				
Submitted Date:					
Attachments		Create Net	v Version   Mar	k as Complete	Return to Componen
If you have no relevant and/or required docum	ents to attach, simply click "Man	k as Complete".			
To upload any relevant and/or required docum click Save.	ents, select Add from the menu	toolbar, browse for the document	on your computer or	disk, enter a short tit	le in the Description box, an
	If this document is not saved on a computer or disk but is rather a sheet of printed paper, it will need to be scanned and saved to a computer file location. If the document is multiple pages, check your scanner settings to ensure the pages can be saved as one file or use a PDF merger to combine multiple 1-page scans into 1 saved document.				
The Department of Public Safety can support t (*.bmp, *.jpg, *.jpeg, *.jpe, *.asp, *.tif, *.wmf) ar attachment may not be considered.					
Do not attach password protected documents	as the Print to PDF feature will r	ot be able to open such file types			
Description		File Nam	e		File Size

Select "Browse" to locate file on your computer

Enter brief description of document

Select "Save"

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À Subaward Adjustment		
Attach File		
If you have no relevant and/or required docum	ents to attach, simply click "Mark as Complete".	
To upload any relevant and/or required docum click Save.	ents, select Add from the menu toolbar, browse for the	he document on your computer or disk, enter a short title in the Description box, and
		d to be scanned and saved to a computer file location. If the document is multiple arger to combine multiple 1-page scans into 1 saved document.
		xls, *.xlsx), PowerPoint (*.ppt, *.pptx), Publisher (*.pub), Adobe PDF (*.pdf), Photos file type that the Department of Public Safety does not have software to open, the
Do not attach password protected documents	as the Print to PDF feature will not be able to open su	uch file types.
Upload File:	C:\Users\ccall\Desktop\Test File.docx	Browse
Description:*	Subaward Adjustment Spreadsheet	

After all Subaward Adjustment Components have been marked complete, select "Submit" to submit the Subaward Adjustment to the OHS

Components		Preview   Submit
Name	Complete?	Last Edited
General Information	4	01/05/2022
Justification	√	01/05/2022
Budget	√	01/05/2022
Confirmation	√	01/05/2022
Attachments	1	01/05/2022

#### **Status Report**

Status Reports due: 03/15/2022 & 06/15/2022	Grant Components Alerts   Copy	Annotations (0)   Export Grant Data   Map
(Final Status Report)		
	The components below are associated with the current Funding Opportunity. You can change these components in the Funding You may associate specific forms in the Associated Forms section above. You can define your own alerts in the Alerts section. Y copy this grant and you can export the raw data.	Opportunity module. ou can make notes by clicking Annotations. You can
Reporting period:	Component	Last Edited
	General Information	01/05/2022
<ul> <li>03/15/2022 Status Report 11/15/2021 –</li> <li>02/28/2022</li> </ul>	Contact Information	01/05/2022
	Budget Form	01/05/2022
	Claims	
	Correspondence	
06/15/2022 Status Report 03/01/2022 –	Subaward Adjustments	
05/31/2022	Subaward Adjustment Notices	
05/51/2022	Status Reports	
	Attachments	
To submit Status Report, select "Status Report"	EDZ Project Form	01/05/2022
component in WebGrants	Award Documents - Final	
	Appropriations	
	Named Attachments (EDZ)	01/05/2022
	Closeout	
	Opportunity	-
	Application	-
	Application Versions	·
	Application Annotations	-
	Review Forms	-

#### **Status Report Continued**

Status Report with milestones has already been setup and is ready to update

Select "ID" for Status Report that is due

Status Reports opy Existing Status Report   Scheduler   Return to Components						
ID 🔨	Туре	Date From-To	Due Date	Submitted Date	Arrived?	Status
131793 - 01	Quarterly Report	11/15/2021-02/28/2022	03/15/2022		-	Editing

Select "Edit"

🥎 Menu   🧏 Helj	o   🍟 Log Out	🌍 Back   🍓 Print   🧼 Add   💢 Delete   🛃 Edit   📙
🐊 Grant Tracki	ing	
Instructions		
sections of the Status Re grantee cannot see these the Status Report to the g	port and route the Status Report back to the notes. Versions will display all component	into a single PDF file. Edit Approval allows internal approval. Negotiation will allow you to unlock one or m rantee for further editing. Annotations allow internal staff to add notes that are visible to internal staff only. resions that were created as a result of the negotiation process. Feedback allows staff to enter feedback about of the Status Report and will be visible to anyone who has access to the Status Report. Withdraw char eport from further processing.
Status Report Det	ails	Print to PDF   Withdraw   Negotiation   Annotations(0)   Versions   Feedb
131793-SFY 202	2 EDZ ABC Organization	
	_	
Economic Distres	s Zone	
Award Year:	2022	Status: Editing
Subward Number:	131793	Approved By:
Status Report Number:	01	Approved Date:
Submitted By:		
Submitted Date:		
Submitted Date:		

#### **Status Report Continued**

#### Select "Milestone Progress Report"

Components	Preview   Submit			
Complete each component of the status report and mark it as complete. Click Submit when you are done.				
Name	Complete?	Last Edited		
eneral Information	√	04/19/2021		
lestone Progress Report		04/19/2021		

Select "Edit" at the top of the screen to edit the entire Status Report at once or select Milestone to edit each milestone one at a time

Status Repo	ort: 131793 - 01					
ciata citopo		424702 SEV 0000 ED7 AD0 O-				-
	Grant;	131793-SFY 2022 EDZ ABC Org	ganization			
	Status:	Editing				
	Program Area:	Economic Distress Zone				
	Grantee Organization:	BaseLine Organization				
	Program Officer:	-				
Milestone P	rogress	Cr	eate New Version   N	lark as Complete	Go to Status	Report Forms   A
	Mile	stone:	Project Name:	Estimated Completion Date:	% Milestone Completed	Milestone Progres
. Determine spe	ecifications for needed sup	plies.	SFY 2022 EDZ		0%	
		selection, and ordering of supplies.	SFY 2022 EDZ		0%	
	ived, installed, tested, and i		SFY 2022 EDZ		0%	
	nd receipt of proof of paym		SFY 2022 EDZ		0%	
	imbursement completed wi	th all necessary documentation.	SFY 2022 EDZ SFY 2022 EDZ		0% 0%	
	Report submitted and close	al aust				

Complete "Milestone Progress" section of Status Report

- Project Name Brief project name (i.e., SFY 2022 Baseline Organization EDZ)
- Estimated Completion Date Estimated completion date for milestone at time of status report
- Milestone Completed Estimated % of milestone completed at time of status report
- Milestone Progress Enter pertinent notes on milestone (i.e., Specifications for mobile radio complete)

Milestone Progress	Milestone Progress Create New Version   Go to Status Report Form				
Milestone:	Project Name:	Estimated Completion Date:	% Milestone Completed	Milestone Progress:	
1. Determine specifications for needed supplies.	SFY 2022 EDZ	12/31/2021	100% 🗸	Specifications for equipment have been determined.	
2. Procurement completed: bidding, vendor selection, and ordering of supplies.	SFY 2022 EDZ	01/31/2022 🥣	100% 🗸	Supplies ordered.	
3. Supplies received, installed, tested, and inventoried.	SFY 2022 EDZ	02/16/2022	100% 🗸	Supplies received.	
4. Vendor paid and receipt of proof of payment received.	SFY 2022 EDZ	03/15/2022 🥑	0% 🗸		
5. WebGrants reimbursement completed with all necessary documentation.	SFY 2022 EDZ	03/31/2022 🥑	0% 🗸	\$	
6. Project Final Report submitted and closed out.	SFY 2022 EDZ	05/31/2022 × 🧾	0% 🗸	$\sim$	

Select "Save"			,
🏤 Menu   🧟 Help   📲 Log Out	Sack   쵫 Print	t   🥐 Add   渊 Delete   룴 Edit   闄 Save	
🧖 Grant Tracking			
Status Report: 131793 - 01			
Grant: 13	93-SFY 2022 EDZ ABC Organization		
Status: Ec	ng		
Program Area: Ec	nomic Distress Zone		
Grantee Organization: Ba	eLine Organization		
Program Officer: JO	McCarter		
Milestone Progress			Create New Version   Go to Status Report Forms
Milestone:	Project Name:	Estimated Completion Date: % Milestone Completed	Milestone Progress:
1. Determine specifications for needed suppli	SFY 2022 EDZ	12/31/2021	cations for equipment have been determined.
<ol> <li>Procurement completed: bidding, vendor selection, and ordering of supplies.</li> </ol>	SFY 2022 EDZ	01/31/2022 🧭 100% 🗸	s ordered.

Complete "Narrative Project Progress"

Select "Add"

Narrative	Project Progress Add
Project Name:	What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted?
	Last Edited By: Chelsey Call, 04/19/2021

#### Add Project Name

 What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted

#### Complete "Narrative Project Progress"

Select "Add"

Narrative I	Project Progress Add
Project Name:	What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted?
	Last Edited By: Chelsey Call, 04/19/2021

- Add Project Name
- What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted

Narrative Project Progress		
Project Name:*	SFY 2022 EDZ	
	It is anticipated that the vendor will be paid, WebGrants reimbursement completed, and Final Status Report will be submitted by next status report submission.	
	· · · · · · · · · · · · · · · · · · ·	

Select "Save"	I Kenu   🤱 Help   🍓 Log Out	Save 🖓 Back   💩 Print   🧼 Add   👷 Delete   🔣 Edit   🔡 Save
Select Save	🐊 Grant Tracking	
	Status Report: 128956 - 01	
	Grant:	128956-FY 2021 CTO Equipment Grant
	Status:	Editing
	Program Area:	State Homeland Security Program (SHSP)
	Grantee Organization:	BaseLine Organization
	Program Officer:	Joni McCarter
	Instructions	
Select "Mark a	as Complete"	
Milestone Status Report		Create New Version   Mark as Complete   Go to Status Report Forms

Is this the final Status Report?\* No

## Select "Submit" to submit Status Report to the OHS

Components Preview   Submit		
Complete each component of the status report and mark it as complete. Click Submit when you are done.		
Name	Complete?	Last Edited
General Information	V	04/19/2021
Milestone Progress Report	√	04/19/2021

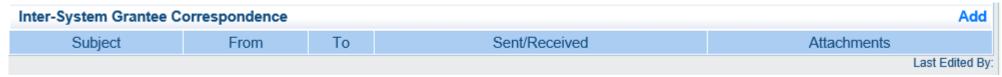
## Correspondence

Correspondence Component of the grant should be used for contacting the OHS with questions/pertinent information regarding your grant

Select "Correspondence" component in WebGrants

Grant Components	Alerts   Copy   Annotations (0)   Export Grant Data   Map
The components below are associated with the current Funding Opportunity. You can You may associate specific forms in the Associated Forms section above. You can de copy this grant and you can export the raw data.	change these components in the Funding Opportunity module. fine your own alerts in the Alerts section. You can make notes by clicking Annotations. You can
Component	Last Edited
General Information	01/05/2022
Contact Information	01/05/2022
Budget Form	01/05/2022
Claims	
Correspondence	
Subaward Adjustments	
Subaward Adjustment Notices	
Status Reports	
Attachments	
EDZ Project Form	01/05/2022
Award Documents - Final	
Appropriations	
Named Attachments (EDZ)	01/05/2022
Closeout	
Opportunity	•
Application	-
Application Versions	-
Application Annotations	-
Review Forms	

#### Select "Add" under Inter-System Grantee Correspondence



Correspondence Component works similar to email

To: Select who you would like to send the message to



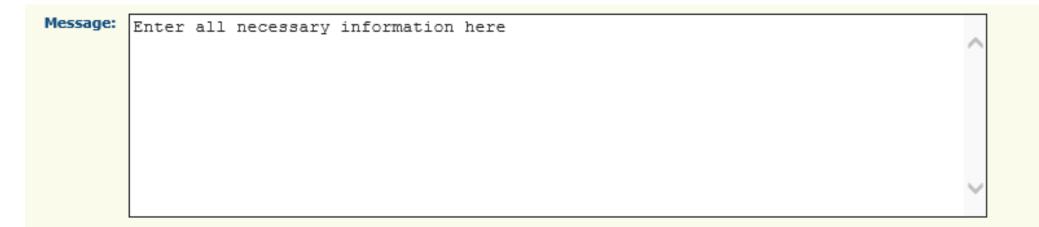
- You may select multiple people by using the Ctrl function on your кеуboard
- CC: Additional people can be added to the message
  - Use a ";" between each email address added

CC:	Chelsey.call@dps.mo.gov	~	
		$\sim$	
	CC addresses must be entered in a valid email format. Use	a semicolon (;) to separate multiple CC email address	es.

Enter a "Subject" for the message

	CC audiesses	muse be	entereu		mat, use
Subject:*	SFY 2022	EDZ			×

Enter all necessary information in the "Message" section



Attach any necessary documents in the Attachments section

Select "Browse" to locate document on your computer

Attachments:	C:\Users\ccall\Desktop\Test File.docx	Browse
		Browse

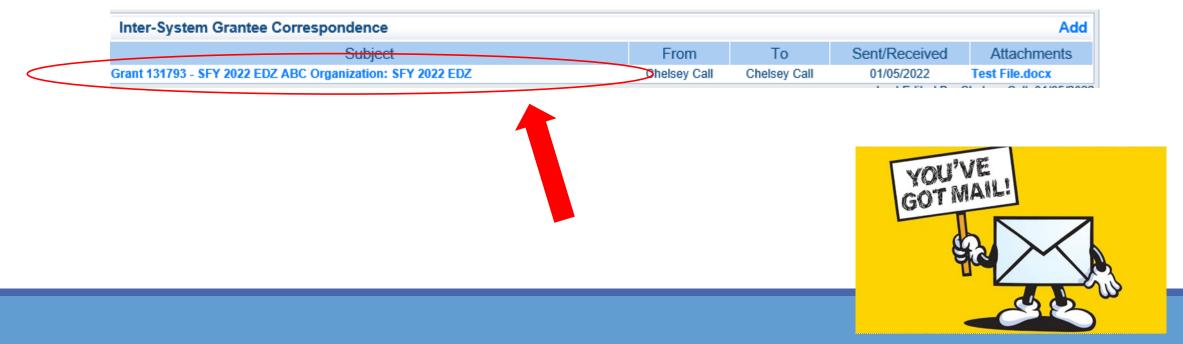
#### Select "Send" to send the message to the OHS

Correspondence		Send
	To:* Joni McCarter TEST TEST	

When receiving emails from WebGrants, DO NOT reply from your email

The reply will go to a generic inbox and will cause a delay in response

To reply to a message, select the "Subject" section of the message you want to reply to

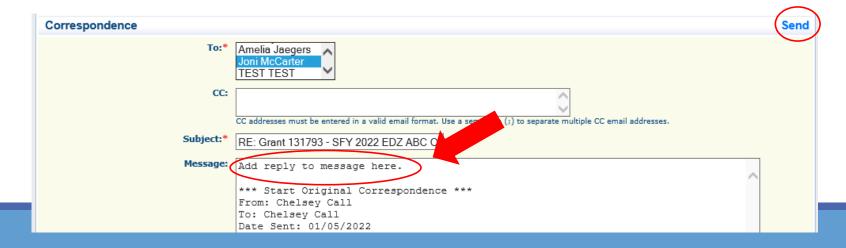




Select who you want the reply to be sent to

Add "Message" above the start of the original correspondence

Select "Send"



# **Grant File**

All grant records shall be retained by the recipient for:

 At least 5 years from the end of the state fiscal year in which the grant closes or following notification by the awarding agency that the grant has been programmatically and fiscally closed or at least 5 years following the closure of the recipient's audit report covering the entire award period, whichever is later

Recipient should maintain grant file with grant documentation including but not limited to:

- 1. Copy of grant application(s)
- 2. Award
- 3. Approved Claims
- 4. Approved Subaward Adjustments
- 5. Approved Status Reports
- 6. Final Status Report
- 7. Monitoring Reports
- 8. Relevant Grant Correspondence
- 9. Procurement Documents
- 10. Disposition of Equipment Forms
- 11. Equipment Inventory

# **Grant Closeout**

➢ Grant Period of Performance ends 05/31/2022

➢ Final Claims and Final Status Report are due 15 days after the end of the period of performance (06/15/2022)

Final Claim – Select "Yes" in "General Information" on the question "Is this your Final Report"

#### Final Status Report

- In the "Narrative Project Progress" section indicate that the project is complete and this submission is the Final Status Report.
- Include amount of de-obligated funds, if applicable, in the Narrative Project Progress section

# Monitoring

➢ Information Bulletin 1: Policy on Monitoring discusses monitoring

Types of Monitoring

- Desk Review that is completed by the OHS at the OHS' office
- On-Site Review that is conducted by the OHS at the recipient's agency





# **Monitoring Continued**

## ➤Scheduling

- Agreed upon date between OHS and recipient
- Given at least 30 days notice
- ➤Topics Covered
  - See Monitoring Information Bulletin

### Corrective Actions

If observations are made, at least 30 days will be allowed to complete and submit necessary corrective actions

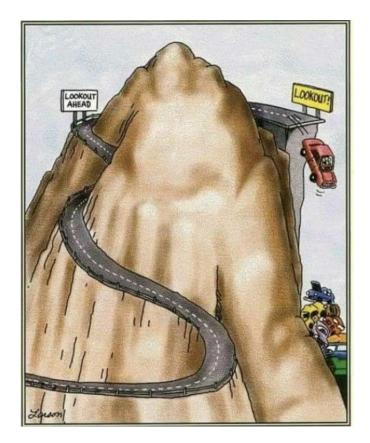


# **Monitoring Continued**

>Monitoring is NOT an audit

➢OHS is NOT out to catch you doing something wrong – we are there to HELP correct areas of noncompliance to prevent audit findings

Chance to provide technical assistance and answer questions



## **Important Dates**



# **Questions?**

## **OHS Contacts**

Chelsey Call Grants Supervisor 573-526-9203 Chelsey.Call@dps.mo.gov

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