



Farm Production and Conservation – Business Center  
U.S. DEPARTMENT OF AGRICULTURE

# FPAC-BC GRANTS.GOV APPLICATION GUIDE

**A Guide for Preparation and Submission of  
Applications via Grants.gov for the following  
USDA agencies**

- **Natural Resources Conservation Service**
- **Farm Service Agency**
- **Risk Management Agency**



## **Summary of Recent Changes**

### **Changes included in version dated October 1, 2024**

This is the first version of the document. As the document is updated, this section will highlight the overall changes being made to the document.

**Table of Contents**

**Table of Contents**

<b>I.</b>	<b>INTRODUCTION.....</b>	<b>5</b>
1.	BACKGROUND .....	5
2.	PURPOSE AND SCOPE .....	5
3.	INTENDED AUDIENCE .....	5
4.	REFERENCED DOCUMENTS .....	5
	4.1 NRCS, FSA, and RMA Notice of Funding Opportunity.....	5
	4.2 Grants.gov Applicant User Guide.....	5
<b>II.</b>	<b>GENERAL INSTRUCTIONS FOR SUBMISSION VIA GRANTS.GOV .....</b>	<b>6</b>
1.	REGISTRATION AND OVERALL APPLICATION PROCESS.....	6
2.	SOFTWARE REQUIREMENTS.....	6
	2.1 Adobe Reader .....	6
3.	GRANTS.GOV WORKSPACE .....	6
<b>III.</b>	<b>FPAC-BC AGENCY-SPECIFIC INSTRUCTIONS FOR SUBMISSION VIA GRANTS.GOV .....</b>	<b>7</b>
1.	COMMENTS ON FPAC-BC INSTRUCTIONS .....	7
2.	CONFORMANCE WITH APPLICATION PREPARATION REQUIREMENTS .....	7
	2.1 Attachment Requirements .....	7
3.	APPLICATION STATUS .....	7
	3.1 Grants.gov Application Status and Viewing the Application Manifest.....	7
4.	GRANTS.GOV AND FPAC-BC ASSISTANCE .....	9
	4.1 Grants.gov Contact Center .....	9
	4.2 USDA Help.....	9
<b>IV.</b>	<b>GRANT APPLICATION PACKAGE INSTRUCTIONS .....</b>	<b>10</b>
1.	GRANT APPLICATION PACKAGE.....	10
	1.1 Accessing the Grant Application Package.....	10
	1.2 Verify Grant Application Package .....	11
	1.3 Mandatory and Optional Documents .....	11
	1.4 Navigating the Forms .....	12
	1.5 Submitting an Electronic Application to a Competitive Funding Opportunity.....	12
<b>V.</b>	<b>APPLICATION FORMS/TEMPLATES AND INSTRUCTIONS.....</b>	<b>12</b>
1.	OVERVIEW .....	12
2.	APPLICATION FOR FEDERAL ASSISTANCE SF-424 .....	14
3.	PROJECT NARRATIVE ATTACHMENT .....	24
4.	PROJECT ABSTRACT.....	25
5.	BUDGET INFORMATION FOR NON-CONSTRUCTION PROGRAMS (SF-424A) .....	26
6.	BUDGET NARRATIVE ATTACHMENT FORM .....	34
7.	OTHER ATTACHMENT.....	34
	7.1 Current and Pending Support .....	36
	7.2 GADSUM9, Applicant Contact(s) Information.....	36
	7.3 Negotiated Indirect Cost Rate (NICRA).....	38
8.	ATTACHMENTS .....	39
	8.1 Subawards .....	40

**Table of Contents**

---

	<b>8.1.1 Subaward Budget Detail .....</b>	<b>40</b>
	<b>8.2 Letters of Support.....</b>	<b>41</b>
9.	CERTIFICATION REGARDING LOBBYING FORM .....	41
10.	DISCLOSURE OF LOBBYING ACTIVITIES FORM .....	44
<b>VI.</b>	<b>APPLICATION PREPARATION CHECKLIST.....</b>	<b>47</b>
<b>VII.</b>	<b>ADMINISTRATION OF AWARDS .....</b>	<b>49</b>
<b>VIII.</b>	<b>GRANTS AND AGREEMENTS DIVISION (GAD) CORRESPONDENCE .....</b>	<b>49</b>

## Introduction

# I. INTRODUCTION

## 1. Background

The Grants and Agreements Division of the Farm Production and Conservation – Business Center (FPAC-BC), U.S. Department of Agriculture (USDA), provides full-service, lifecycle administration of grants and agreements for the Natural Resources Conservation Service (NRCS), Farm Service Agency (FSA), and Risk Management Agency (RMA) (i.e., FPAC agencies).

## 2. Purpose and Scope

This instruction document will help you prepare and submit applications to NRCS, FSA, and RMA via Grants.gov. Where appropriate, relevant sections of the Grants.gov User Guide have been incorporated by reference.

## 3. Intended Audience

Any individual, organization, etc. that is interested in submitting an application to NRCS, FSA or RMA in response to a funding opportunity.

## 4. Referenced Documents

### 4.1 NRCS, FSA, and RMA Notice of Funding Opportunity

A NRCS, FSA, and RMA Notice of Funding Opportunity (NOFO) includes the request for applications (e.g., full announcement) and forms necessary for the preparation and submission of an application to the agency. A NOFO includes, among other things, eligibility information and guidance for preparing and submitting applications to the agency. NRCS, FSA, and RMA makes active funding opportunities available via Grants.gov (<http://www.grants.gov>) or the agency web site.

### 4.2 Grants.gov Applicant User Guide

The Grants.gov Applicant User Guide is a comprehensive reference to information about Grants.gov. You may download the User Guide as a pdf document.

Grants.gov Applicant User Guide:

<https://www.grants.gov/help/html/help/index.htm?callingApp=custom#t=GetStarted%2FGetStarted.htm>

## II. GENERAL INSTRUCTIONS FOR SUBMISSION VIA GRANTS.GOV

### 1. Registration and Overall Application Process

Before using Grants.gov for the first time, each organization must complete a registration process. Once registered, your organization may apply for any government award on the Grants.gov website. **Because of the time required to register, this process should be started in advance of preparing an application.**

Grants.gov Registration: <https://www.grants.gov/applicants/applicant-registration>

Further information about the requirements as well as general application guidance is available at:  
<https://www.grants.gov/quick-start-guide/applicants>.

The following topics are covered at this site.

- Before You Start
- Registering with Grants.gov
- About Roles and Privileges
- About Workspaces
- Creating a Workspace - see [Workspace-Overview | Grants.gov](#) for further details.
- Adding Participants to a Workspace
- Completing Grant Application Forms
- Submitting Your Application
- Tracking Your Application
- Need Help?

### 2. Software Requirements<sup>1</sup>

#### 2.1 Adobe Reader

You must have a version Adobe Reader that is compatible with Grants.gov in order to access, complete and submit applications. **This software is essential to apply for awards through Grants.gov.** See the Grants.gov User Guide for basic system requirements and download instructions (see section [4.2](#)). Grants.gov has a test package to help you determine if you have a compatible version of Adobe Reader. Grants.gov Adobe Versioning Test Package: <https://www.grants.gov/applicants/adobe-software-compatibility>

### 3. Grants.gov Workspace

Grants.gov Workspace exists to make applying for a federal grant as convenient as possible. By leveraging a range of user roles and access levels, applicants can control access to forms, create a custom workflow and save time on their application.

There are three workspace approaches available to applicants; see [Workspace-Overview | Grants.gov](#) to determine which one is most appropriate to you. The Grants.gov User Guide contains Workspace information (see section [4.2](#)) as well as the following available resources:

- [Grants.gov Workspace Training Video Series](#)
- [Grants.gov Community Blog articles on Workspace](#)

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<sup>1</sup> Note: Contact your organization's system administrator if you have problems setting up software on your machine.

### **III. FPAC-BC AGENCY-SPECIFIC INSTRUCTIONS FOR SUBMISSION VIA GRANTS.GOV**

#### **1. Comments on FPAC-BC Instructions**

To submit comments on this application guide, send an e-mail to: [NFO.FPAC@USDA.GOV](mailto:NFO.FPAC@USDA.GOV) (this e-mail address is intended only for receiving comments). Include “FPAC-BC Grants.gov Application Guide” in the subject line of the e-mail and detailed information regarding the comment.

#### **2. Conformance with Application Preparation Requirements**

Applications must conform to the application preparation and submission instructions in Part V. of this document and the NOFO. All attachments to an application **must** comply with the font, spacing, and margin requirements **and MUST be in .pdf** (portable document format) (see [2.1](#)) **otherwise the application is at risk of being excluded from agency consideration**. Note that the agency NOFO may include specific requirements; in these instances, it is critical to follow the language in the NOFO. The agency may exclude from consideration applications that are not consistent with these special instructions.

##### **2.1 Attachment Requirements**

Any APPLICATION containing ATTACHMENTS that ARE not compliant with the below requirements are AT RISK OF BEING EXCLUDED FROM CONSIDERATION.

ATTENTION: There is a paper clip icon on the left side of the page in every application. Do NOT attach documents with this function. If you attach documents under this function your application will be incomplete and cause errors.

- Must in portable document format (pdf) (do not submit video files)
- Must NOT be password protected
- Files must NOT be larger than 10 MB
- Format of contents (exceptions are any agency-provided templates)
  - Typed or word processed
  - Font no smaller than 12 point, regardless of line spacing
  - At least 1-inch margins
  - Each page of an attachment numbered sequentially
- File Name Restrictions: File names of .pdf attachments must:
  - be limited to 50 characters,
  - not include special characters (e.g., &,-,\*,%/,#), periods (.), blank spaces or accent marks, and
  - be unique (i.e., no other attachment may have the same file name)

#### **3. Application Status**

##### **3.1 Grants.gov Application Status and Viewing the Application Manifest**

Within 2 days of submitting a grant application, Grants.gov will send you two email messages:

- The first email will confirm receipt of the application.
- The second email will indicate whether the application has been validated by the system OR has been rejected due to errors.

**FPAC-BC-Specific Instructions for Submission via Grants.gov**

- If the application was successfully validated, Grants.gov will send you a third e-mail notifying you the application has been passed to the agency.

There are two ways to verify the status of an application submitted to Grants.gov. One way is to use the “Track My Application” tool under the Applicants section of Grants.gov. This does not require a user name or password. The second way is to “Check Application Status” under Applicant Login located under the Applicants section of Grants.gov. This tool requires a user name and password. This option gives you the opportunity to view a “manifest” of submitted forms and files within Grants.gov. This manifest will allow you to review the list of forms and file attachments that were properly uploaded and received.

**OPTION 1 – Check status of application**

Check Grants.gov Application Status on the Track My Application Page: [Track My Application | Grants.gov](#)

Once on the Track My Application page, enter up to five Grants.gov tracking numbers (one per line) and select the Track My Application(s) button. The system will display general information about the status of each application in a chart format as shown below.

Opportunity Package ID	Opportunity Number	Assistance Listings	Grant Tracking Number	Date/Time Received	Status	Status Date
PKG00276548	USDA-FSA-LANDACCESS-22-NOFO0001219	10.968	GRANT13757599	Nov 17, 2022 09:10:04 PM EST	Received by Agency	Nov 21, 2022 05:10:18 PM EST
PKG00271971	USDA-NRCS-COMM-22-NOFO0001139	10.937	GRANT13609614	May 05, 2022 01:53:08 PM EDT	Received by Agency	May 09, 2022 01:20:23 PM EDT

**OPTION 2 – Check status of application and view manifest of submitted forms and files**

Check Grants.gov Application Status on the Track Application Status Page:

<https://apply07.grants.gov/apply/login.faces?cleanSession=1&userType=agency&loggedout=true>

Once logged in using the above link you will be in the Applicant Center where you should select the “Check Application Status” link. You will be given the option to search for your application(s) in several different ways. Choose the one you are searching for and how the information should be displayed. Your selection(s) will be presented in a chart as shown below. One of the columns in the chart is entitled, Actions. You may view the list of particular application’s file(s) and attachment(s) (i.e., the manifest) by selecting the link in the Actions column for that application and selecting either the Details or Download Link.

Grant Tracking Number	DUNS	Funding Opportunity Number	CFDA	Competition ID	Opportunity Package ID	Date/Time Received	Status	Status Date/Time	Submission Method	Actions
GRANT00677772	00000000000000	USDA-NIFA-SRGP-001930	10.200		PKG00006366	Aug 23, 2017 09:06:59 AM EDT	Received by Agency	Aug 31, 2017 11:10:39 AM EDT	Workspace	<a href="#">Details</a>   <a href="#">Download</a>
GRANT00677771	00000000000000	USDA-NIFA-SRGP-001930	10.200		PKG00006366	Aug 23, 2017 09:06:41 AM EDT	Received by Agency	Sep 18, 2017 12:20:20 PM EDT	Workspace	<a href="#">Details</a>   <a href="#">Download</a>

It is important that you thoroughly review the manifest to ensure that required attachments outlined in the NOFO are included and follow .pdf requirements (see [2.1](#)). Submitted applications that do not contain the required forms and file attachments will not be reviewed.

**If issues are found with the manifest, you should submit the application:**

**FPAC-BC-Specific Instructions for Submission via Grants.gov**

PRIOR to the deadline – corrected applications must be made and submitted prior to the established deadline. The last application submitted ahead of the deadline will be the version considered as the official submission.

## 4. Grants.gov and FPAC-BC Assistance

### 4.1 Grants.gov Contact Center

If you need help with the Grants.gov registration process, downloading or navigating Adobe forms and/or Workspace, or with the technical aspects of submitting to the Grants.gov system, first check the resources available on the Grants.gov web site (<http://www.grants.gov>). The Grants.gov Help page (<http://www.grants.gov/web/grants/support.html>) contains useful information including answers to frequently asked questions (FAQs).

Grants.gov assistance is also available as follows:

Grants.gov customer support  
1-800-518-4726 Toll-Free or 606-545-5035  
Business Hours: 24 hours a day, 7 days a week. Closed on [federal holidays](#).  
Email: [support@grants.gov](mailto:support@grants.gov)

If the Authorized Representative (AR) has not received a confirmation message from Grants.gov within 48 hours of submitting an application, contact Grants.gov customer support.

Grants.gov issues a ticket number to track a response. You should maintain the ticket number as documentation of an electronic issues associated with your application.

Grants.gov Help Desk operations process is described below

#### Tier 1: Grants.gov Contact Center Operator

- Handles the initial contact and attempts to resolve the call.
- If not resolved, the operator files a research request (escalation).

#### Tier 2: Research Analyst

- Escalations go to the research analyst who does further research on the issue.
- If not resolved, the issue escalates to the Grants.gov Program Management Office (PMO)

#### Tier 3: Grants.gov PMO

- The Research Analyst works with the PMO to resolve issue.
- Typical escalations: involve policy questions/system bugs/training or meeting requests.

### 4.2 USDA Help

See section A.8. of the NOFO for contact information.

## IV. GRANT APPLICATION PACKAGE INSTRUCTIONS

### 1. Grant Application Package

A Grant Application Package is part of a funding opportunity. The following is information about the package and information about obtaining the necessary forms. The forms will be managed in Workspace; Workspace is the standard way for organizations or individuals to apply for federal grants in Grants.gov. Section [II.3](#) of this Guide contains Workspace resources.

#### 1.1 Accessing the Grant Application Package

##### VIEW GRANT OPPORTUNITY

USDA-NRCS-NHQ-SSRA-24-NOFO001387

Model Intercomparison and Improvement for Carbon Sequestration and Greenhouse Gas Emission Estimation from Agriculture

Department of Agriculture

Natural Resources Conservation Service

Apply Subscribe

SYNOPSIS VERSION HISTORY RELATED DOCUMENTS PACKAGE

##### Select Grant Opportunity Package

###### PLEASE READ BEFORE APPLYING!

If you view and complete your application package using Grants.gov downloadable PDF forms, you MUST have Adobe Reader installed. You may receive a validation error using incompatible versions of Adobe Reader. To prevent a validation error, it is now recommended you uninstall any earlier versions of Adobe Reader and install the latest compatible version of Adobe Reader. If more than one person is working on the PDF forms, ALL applicants must be using the same Adobe Reader version. [Click for more information on Adobe Reader Compatibility.](#)

##### Opportunity Package(s) Currently Available for this Funding Opportunity:

Assistance Listing Number	Competition ID	Competition Title	Opportunity Package ID	Opening Date	Closing Date	Actions
10.903			PKG00287578	Aug 05, 2024	Oct 04, 2024	<a href="#">Preview</a>   <a href="#">Apply</a>

#### READ BELOW BEFORE YOU APPLY FOR THIS GRANT!

Before you can view and complete an application package, you MUST have Adobe Reader installed. Packages are posted in Adobe Reader format. You may receive a validation error using incompatible versions of Adobe Reader. To prevent a validation error, it is now recommended you uninstall any earlier versions of Adobe Reader and install the latest compatible version of Adobe Reader. If more than one person is working on the application package, ALL applicants must be using the same software version. [Click for more information on Adobe Reader Compatibility.](#) See section [II.2.1](#).

Subscribe to Opportunity

If you are not logged in Grants.gov, a “Login to Subscribe” block will be visible. We suggest you login at this time using your Grants.gov credentials. Once logged in, a “Subscribe to Opportunity” block will appear providing you the opportunity to subscribe to receive any notices (e.g., modifications) sent regarding the funding opportunity.

Click “Apply” to open the Grant Application Package.

If the Apply button in the opportunity is not active (greyed out), [see Unlock the Mystery of the Gray “Apply” Button: Four Scenarios. – Grants.gov Community Blog \(wordpress.com\)](#) for possible scenarios.

**FPAC-BC Grant Application Package Instructions**

## 1.2 Verify Grant Application Package

### Apply for Grant Opportunity

Please review [Applicant FAQs](#) as you prepare and submit your application.

Selected Opportunity Package:

[Back to Packages](#)

<b>Opportunity Package ID:</b>	PKG00287578	<b>Opening Date:</b>	Aug 05, 2024
<b>Assistance Listings:</b>	10.903	<b>Closing Date:</b>	Oct 04, 2024
<b>Competition ID Title:</b>			
<b>Agency Contact Information:</b>	Tessa Garcia Grants Management Specialist E-mail: tessa.garcia@usda.gov		
<b>Who Can Apply:</b>	Organization Applicants		

Verify the required information corresponds to the grant to which you are applying. Grants.gov will auto-populate the following information:

- Opportunity Package ID
- Assistance Listing Number
- Competition ID (FPAC-BC does not use this field, therefore, no information will be pre-populated in the field; the field will be blank. Do not enter any information in the field.)
- Agency Contact Information
- Who Can Apply
- Opportunity Open Date
- Opportunity Close Date

**Create Workspace »**

Click the button to “Create Workspace.” Also see 1. above for further information.

A. The “New Workspace” box will be pre-filled.

B. Enter a name for the application in the **\*Application Filing Name** field. **This field is required.** This name is solely for you to track the application through the Grants.gov submission process; FPAC-BC will not use the filing name. You may use any combination of letters and/or numbers to name the application file.

## 1.3 Mandatory and Optional Documents

Complete all of the documents listed as “Mandatory” and complete the documents listed as “Optional” as appropriate. Complete the SF-424 first. Data on the SF-424 will populate other mandatory and optional forms where possible.

**FPAC-BC Grant Application Package Instructions**

PACKAGE FORMS:		Download Instructions
Mandatory Forms (Click to Preview)	Optional Forms (Click to Preview)	
Application for Federal Assistance (SF-424) [V4.0] Project Narrative Attachment Form [V1.2] Budget Information for Non-Construction Programs (SF-424A) [V1.0] Budget Narrative Attachment Form [V1.2] Grants.gov Lobbying Form [V1.1]	Other Attachments Form [V1.2] Disclosure of Lobbying Activities (SF-LLL) [V2.0]	

**1.4 Navigating the Forms**

The SF-424 Cover Sheet and SF-424a Budget Information – Nonconstruction Program forms/documents are two or more pages in length. You must complete the mandatory fields on each page of the form/document. To navigate to the next page of a form/document, simply scroll down the screen. To go back to the first page of the form/document or to the Grant Application Package screen, simply scroll up the screen. You must save the application package from the Grant Application Package screen.

**1.5 Submitting an Electronic Application to a Competitive Funding Opportunity**

You must complete all of the following steps for an application to be considered for competitive peer review:

- 1) Meeting the deadline: Refer to section A.6. of the applicable NOFO for established deadline information.

Successful Grants.gov validation: The Grants.gov system performs a limited check of the application and Grants.gov will notify you of the outcome of the initial review. The Grants.gov validation process includes a check for an active SAM registration (**applicants with expired SAM registrations will be rejected**). SAM registration is part of the registration identified in section [II.1](#).

- 2) Grants.gov sends applications that are successfully validated to FPAC-BC for further processing. Applications that fail Grants.gov validation may be resubmitted to Grants.gov if the established deadline has not passed.
- 3) Successful agency validation: Agency staff perform precursory review of the application. The agency validation process includes meeting eligibility requirements and following the application guidelines (e.g., formatting, page limitations, limits on budget requests). Applicants will be notified of the outcome of this review.

**V. APPLICATION FORMS/TEMPLATES AND INSTRUCTIONS**

**1. Overview**

This section contains both the general form instructions and any applicable FPAC-specific instructions. Conformance is required and will be strictly enforced unless a deviation has been approved. The agency may exclude from consideration applications that are not consistent with these instructions. The following SF 424 forms may be required as part of the application package and the provided suggested templates to meet other FPAC agency needs. Refer to the NOFO for application requirements.

**FPAC-BC Grant Application Package Instructions**

The documents listed in Table 1 may be part of a NRCS, FSA, or RMA application. The Grants.gov Application Package (i.e., NOFO) and the forms package will identify which forms you must submit as part of the application and which one(s), if any, are optional.

Table 1: Components of a NRCS, FSA, or RMA Application

Document	Instructions
Application for Federal Assistance (SF-424)	see section <a href="#">V.2.</a>
Project Narrative Attachment Form	see section <a href="#">V.3.</a>
Project Abstract	see section <a href="#">V.4.</a>
Budget Information for Non-Construction Programs (SF-424A)	see section <a href="#">V.5.</a>
Budget Narrative Attachment Form	see section <a href="#">V.6.</a>
Other Attachments Form <ul style="list-style-type: none"> <li>• Current and Pending Support</li> <li>• GADSUM9, Applicant Contact(s) Information</li> <li>• NICRA, as applicable</li> <li>• Additional Congressional Districts, as needed</li> </ul>	see section <a href="#">V.7.</a> see section <a href="#">V.7.1</a> see section <a href="#">V.7.2</a> see section <a href="#">V.7.3</a> see block <a href="#">16b of SF-424</a>
Attachments <ul style="list-style-type: none"> <li>• Subawards, as applicable</li> <li>• Letters of Support, if required</li> <li>• Conflict of Interest, as applicable</li> </ul>	see section <a href="#">V.8.</a> see section <a href="#">V.8.1</a> see section <a href="#">V.8.2</a> see section D.3. of NOFO
Grants.gov Lobbying Form	see section <a href="#">V.9.</a>
Disclosure of Lobbying Activities (SF-LLL)	see section <a href="#">V.10.</a>

The following sections contain a relevant document followed by detailed instructions for completion of each of the application forms and available templates.

**FPAC-BC Grant Application Package Instructions**

**2. Application for Federal Assistance SF-424**

<a href="#">View Burden Statement</a>	OMB Number: 4040-0004 Expiration Date: 11/30/2025	
<b>Application for Federal Assistance SF-424</b>		
<b>* 1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	<b>* 2. Type of Application:</b> <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	* If Revision, select appropriate letter(s): <input type="text"/> * Other (Specify): <input type="text"/>
* 3. Date Received: <input type="text"/>	4. Applicant Identifier: <input type="text"/>	
5a. Federal Entity Identifier: <input type="text"/>		5b. Federal Award Identifier: <input type="text"/>
<b>State Use Only:</b>		
6. Date Received by State: <input type="text"/>	7. State Application Identifier: <input type="text"/>	
<b>8. APPLICANT INFORMATION:</b>		
* a. Legal Name: <input type="text"/>		
* b. Employer/Taxpayer Identification Number (EIN/TIN): <input type="text"/>	* c. UEI: <input type="text"/>	
<b>d. Address:</b>		
* Street1: <input type="text"/>	<input type="text"/>	
Street2: <input type="text"/>	<input type="text"/>	
* City: <input type="text"/>	<input type="text"/>	
County/Parish: <input type="text"/>	<input type="text"/>	
* State: <input type="text"/>	<input type="text"/>	
Province: <input type="text"/>	<input type="text"/>	
* Country: USA: UNITED STATES	<input type="text"/>	
* Zip / Postal Code: <input type="text"/>	<input type="text"/>	
<b>e. Organizational Unit:</b>		
Department Name: <input type="text"/>		Division Name: <input type="text"/>
<b>f. Name and contact information of person to be contacted on matters involving this application:</b>		
Prefix: <input type="text"/>	* First Name: <input type="text"/>	
Middle Name: <input type="text"/>		
* Last Name: <input type="text"/>		
Suffix: <input type="text"/>		
Title: <input type="text"/>		
Organizational Affiliation: <input type="text"/>		
* Telephone Number: <input type="text"/>		Fax Number: <input type="text"/>
* Email: <input type="text"/>		

**FPAC-BC Grant Application Package Instructions**

Block	Field Name	SF-424 Instructions (V4.0)	FPAC Agency Guidance
1	Type of Submission	<p>Select one type of submission in accordance with agency instructions.</p> <ul style="list-style-type: none"> <li>• Pre-application</li> <li>• Application</li> </ul> <p>Changed/Corrected Application - Check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this form to submit changes after the closing date. Required.</p>	<p>Select “Application” if this is the first application submitted. If updating an application recently submitted, choose Changed/Corrected Application.</p>
2	Type of Application	<p>Select one type of application in accordance with agency instructions.</p> <ul style="list-style-type: none"> <li>• New - An application that is being submitted to an agency for the first time.</li> <li>• Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals.</li> <li>• Revision - Any change in the federal government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected.</li> </ul> <p>A: Increase Award B: Decrease Award            C: Increase Duration            D: Decrease Duration            E: Other (specify)            AC: Increase Award, Increase Duration            AD: Increase Award, Decrease Duration            BC: Decrease Award, Increase Duration</p>	<p>Applicants should generally select “New”. If, however, the applicable Notice of Funding Opportunity (NOFO) allows the submission of renewals or supplements (see section B of the NOFO) and the application meets the NOFO description of one of these categories, then choose “Continuation or Revision” and the appropriate letter(s).</p>

**FPAC-BC Grant Application Package Instructions**

		BD: Decrease Award, Decrease Duration Required.	
3	Date Received	Enter date if form is submitted through other means as instructed by the Federal agency. The date received is completed electronically if submitted via Grants.gov. Required.	Not completed by applicant. This is a required field and will be populated automatically by Grants.gov.
4	Applicant Identifier	Enter the entity identifier assigned by the Federal agency, if any, or the applicant's control number if applicable. Optional.	Optional/not required.
5a	Federal Entity Identifier	Enter the number assigned to your organization by the federal agency, if any. Optional.	Leave blank.
5b	Federal Award Identifier	For new applications, leave blank. For a continuation or revision to an existing award, enter the previously assigned federal award identifier number. If a changed/corrected application, enter the federal identifier in accordance with agency instructions. Optional.	Leave blank if you are submitting a new application (item 2). If submitting another type (e.g., renewal or supplement), enter the assigned Award Identifying Number (block 1 on the Notice of Grant and Agreement Award). If submitting a changed/corrected application in Grants.gov, include the Grants.gov tracking number for previously submitted application.
6	Date Received by State	Leave this field blank. This date will be assigned by the state, if applicable. Optional.	Leave blank.
7	State Application Identifier	Leave this field blank. This identifier will be assigned by the state, if applicable. Optional.	Leave blank.
8a	Applicant Legal Name	Enter the legal name of the applicant that will undertake the assistance activity. This is the organization that has registered with the System for Award Management (SAM). Information on registering with SAM may be obtained by visiting SAM.gov. Required.	This name must be consistent with the name as registered in the System for Award Management (SAM). If the name in SAM is not correct, update it accordingly. If you are applying as an individual, use your legal name as in the Social Security system.
8b	Applicant Employer/Taxpayer	Enter the employer or taxpayer identification number	This number must be consistent with the number in the applicant's SAM

**FPAC-BC Grant Application Package Instructions**

	Identification Number (EIN/TIN)	(EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444. Required.	registration. If you are applying as an individual, use your Social Security number.
8c	Unique Entity Identifier (UEI)	Enter the organization’s UEI received from SAM. The UEI is a unique 12-character organization identifier. Information on registering with System for Award Management (SAM.gov) may be obtained by visiting the Grants.gov website. Required.	As of April 2022, the SAM-assigned UEI replaces the DUNS. If you are applying as an individual, this field must be 00000000INDV.
8d	Applicant Address	Enter address: Street 1 (required); City (required); County/Parish, State (required if country is US); Province; Country (required); 9digit ZIP/Postal Code (required if country is US). If +4 does not exist for the address, enter “0000”. Required.	This address must be consistent with the address in the applicant’s SAM registration.
8e	Applicant Organizational Unit	Enter the name of the primary organizational unit, department, or division that will undertake the assistance activity. Optional.	Not required.
8f	Applicant Contact Information	Enter the first and last name (required), prefix, middle name, suffix, and title. Enter organizational affiliation if affiliated with an organization other than that in 7.a. Telephone number and email (required); fax number. Required.	This does not necessarily need to be the person with authority to sign the application. It is a point of contact for agency staff to contact regarding the application.

**FPAC-BC Grant Application Package Instructions**

<b>Application for Federal Assistance SF-424</b>	
* 9. Type of Applicant 1: Select Applicant Type: <input style="width: 100%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
Type of Applicant 2: Select Applicant Type: <input style="width: 100%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
Type of Applicant 3: Select Applicant Type: <input style="width: 100%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
* Other (specify): <input style="width: 80%; height: 20px;" type="text"/>	
* 10. Name of Federal Agency: <input style="width: 90%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
11. Catalog of Federal Domestic Assistance Number: <input style="width: 15%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/> CFDA Title: <input style="width: 90%; height: 25px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
* 12. Funding Opportunity Number: <input style="width: 80%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/> * Title: <input style="width: 90%; height: 50px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
13. Competition Identification Number: <input style="width: 80%; height: 20px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/> Title: <input style="width: 90%; height: 50px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
14. Areas Affected by Project (Cities, Counties, States, etc.): <input style="width: 30%; height: 20px;" type="text"/> <span style="margin-left: 20px;"><input type="button" value="Add Attachment"/></span> <span style="margin-left: 20px;"><input type="button" value="Delete Attachment"/></span> <span style="margin-left: 20px;"><input type="button" value="View Attachment"/></span>	
* 15. Descriptive Title of Applicant's Project: <input style="width: 90%; height: 40px; background-color: #d9ead3; border: 1px solid #bdc3c7;" type="text"/>	
Attach supporting documents as specified in agency instructions. <input type="button" value="Add Attachments"/> <span style="margin-left: 20px;"><input type="button" value="Delete Attachments"/></span> <span style="margin-left: 20px;"><input type="button" value="View Attachments"/></span>	

**FPAC-BC Grant Application Package Instructions**

9	Type of Applicant 1	<p>Select a minimum of one applicant type or select up to three applicant types in accordance with agency instructions. If “Other” is selected, then specify Other Type of Applicant in text box.</p> <ul style="list-style-type: none"> <li>A. State Government</li> <li>B. County Government</li> <li>C. City or Township Government</li> <li>D. Special District Government</li> <li>E. Regional Organization</li> <li>F. U.S. Territory or Possession</li> <li>G. Independent School District</li> <li>H. Public/State Controlled Institution of Higher Education</li> <li>I. Indian/Native American Tribal Government (Federally Recognized)</li> <li>J. Indian/Native American Tribal Government (Other than Federally Recognized)</li> <li>K. Indian/Native American Tribally Designated Organization</li> <li>L. Public/Indian Housing</li> <li>M. Nonprofit</li> <li>N. Private Institution of Higher Education</li> <li>O. Individual</li> <li>P. For-Profit Organization (Other than Small Business)</li> <li>Q. Small Business</li> <li>R. Hispanic-serving Institution</li> <li>S. Historically Black Colleges and Universities (HBCUs)</li> <li>T. Tribally Controlled Colleges and Universities (TCCUs)</li> <li>U. Alaska Native and Native Hawaiian Serving Institutions</li> <li>V. Non-US Entity</li> <li>W. Other (specify)</li> </ul> <p>Required.</p>	The selection must be consistent with the entity type listed in the applicant’s SAM registration.
10	Name of Federal Agency	Enter the name of the federal agency from which assistance is being requested with this application. This information is pre-populated if submitting through Grants.gov. Required.	Grants.gov will automatically populate.
11	Catalog of Federal Domestic	Enter the Catalog of Federal Domestic Assistance number and title of the	Grants.gov will automatically populate. If not automatically

**FPAC-BC Grant Application Package Instructions**

	Assistance Number/Federal Assistance Listing and Title a.k.a. Federal Assistance Listing	program under which assistance is requested, as found in the program announcement, if applicable. This information is pre-populated if using Grants.gov. Required.	populated, leave blank.
12	Funding Opportunity Number and Title	Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested as found in the program announcement. This information is prepopulated if using Grants.gov. Required.	Grants.gov will automatically populate. If not automatically populated, enter the opportunity number and title. If unknown leave blank.
13	Competition Identification Number and Title	Enter the competition identification number and title of the competition under which assistance is requested, if applicable. These fields are prepopulated by Grants.gov if provided by the federal agency. Optional.	Leave blank.
14	Areas Affected by Project (Cities, Counties, States, etc.)	This data element is intended for use only by programs for which the area(s) affected are likely to be different from the place(s) of performance reported on the SF-424 Project/Performance Site Location(s) Form. Add attachment to enter additional areas, if needed. Optional.	Leave blank.
15	Descriptive Title of Applicant's Project	Enter a brief descriptive title of the project. Supporting documents may be attached if specified in agency instructions. Optional.	Enter a concise but informative title for the project (maximum of 200 characters).
	Attach supporting documents as specified in agency instructions.		Do not attach any files here; this includes a coversheet. If no designation is provided for where to include an attachment, include it in the Attachment form (see section <a href="#">V.8</a> ).

**FPAC-BC Grant Application Package Instructions**

<b>Application for Federal Assistance SF-424</b>	
<b>16. Congressional Districts Of:</b>	
* a. Applicant <input style="width: 100px;" type="text"/>	* b. Program/Project <input style="width: 100px;" type="text"/>
Attach an additional list of Program/Project Congressional Districts if needed.	
<input style="width: 200px;" type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<b>17. Proposed Project:</b>	
* a. Start Date: <input style="width: 100px;" type="text"/>	* b. End Date: <input style="width: 100px;" type="text"/>
<b>18. Estimated Funding (\$):</b>	
* a. Federal	<input style="width: 200px;" type="text"/>
* b. Applicant	<input style="width: 200px;" type="text"/>
* c. State	<input style="width: 200px;" type="text"/>
* d. Local	<input style="width: 200px;" type="text"/>
* e. Other	<input style="width: 200px;" type="text"/>
* f. Program Income	<input style="width: 200px;" type="text"/>
* g. TOTAL	<input style="width: 200px;" type="text"/>
<b>* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?</b>	
<input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input style="width: 100px;" type="text"/>	
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.	
<input type="checkbox"/> c. Program is not covered by E.O. 12372.	
<b>* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)</b>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes", provide explanation and attach	
<input style="width: 200px;" type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<p><b>21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)</b></p>	
<input checked="" type="checkbox"/> ** I AGREE	
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.	
<b>Authorized Representative:</b>	
Prefix: <input style="width: 100px;" type="text"/>	* First Name: <input style="width: 200px;" type="text"/>
Middle Name: <input style="width: 200px;" type="text"/>	
* Last Name: <input style="width: 500px;" type="text"/>	
Suffix: <input style="width: 100px;" type="text"/>	
* Title: <input style="width: 400px;" type="text"/>	
* Telephone Number: <input style="width: 200px;" type="text"/>	Fax Number: <input style="width: 200px;" type="text"/>
* Email: <input style="width: 600px;" type="text"/>	
* Signature of Authorized Representative: <input style="width: 300px;" type="text"/>	* Date Signed: <input style="width: 100px;" type="text"/>

**FPAC-BC Grant Application Package Instructions**

16a	Congressional District of Applicant	16a. Enter the applicant’s congressional district. Required.	Enter the Congressional district based on the physical address of the applicant as listed in the applicant’s SAM registration. District numbers can be found at <a href="https://www.house.gov/representatives/find-your-representative">https://www.house.gov/representatives/find-your-representative</a>
16b	Congressional District(s) of Program/Project	16b. Enter the primary district affected by the program or project. Enter in the following format: 2-character state abbreviation – 3 characters district number, e.g., CA-005 for California 5th district, CA-012 for California 12th district, NC-103 for North Carolina’s 103rd district. If all congressional districts in a state are affected, enter “all” for the district number, e.g., MD-all for all congressional districts in Maryland. If nationwide, i.e., all districts within all states are affected, enter US-all. If the program/project is outside the US, enter 00.000. This optional data element is intended for use only by programs for which the area(s) affected are likely to be different than place(s) of performance reported on the SF-424 Project/Performance Site Location(s) form. Attach an additional list of program/project congressional districts, if needed. Required.	District numbers can be found at <a href="https://www.house.gov/representatives/find-your-representative">https://www.house.gov/representatives/find-your-representative</a> If an additional list of program/project congressional districts is to be attached to a Grants.gov opportunity, upload it under Other Attachments (see section <a href="#">V.7.</a> ) in the Grants.gov Opportunity Package.
17a	Proposed Project Start Date	Enter the proposed start date of the project. Required.	Refer to section A.5. of the NOFO.
17b	Proposed Project End Date	Enter the proposed end date of the project. Required.	Refer to section A.5. of the NOFO.
18a-g	Estimated Funding	Enter the amount requested, or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the	Enter the project’s total amount of funding for each category below. These values must be consistent with the values on the SF-424A and the Budget Narrative (see section <a href="#">V.6.</a> ). Only include amounts for items b. through f. to meet the required cost-share/match, if any, identified in the NOFO. a. <u>Federal</u> : enter the amount of Federal

**FPAC-BC Grant Application Package Instructions**

		change. For decreases, enclose the amounts in parentheses. For zero funding, enter 0. Required.	funds being requested. b. <u>Applicant</u> : enter cost share/match being provided by the applicant itself. Do not include cost share/match being provided by commitments from other sources; those amounts are to be included in items c., d., and e, as applicable. c. <u>State</u> : enter the amount of any cost share/match being provided by a State government entity. d. <u>Local</u> : enter the amount of any cost share/match being provided by a Local government entity. e. <u>Other</u> : enter the amount of any cost share/match being provided by a source other than those listed above. f. <u>Program Income</u> : enter the amount of program income (if any) used for meeting cost share/match requirements (see 2 CFR <a href="#">200.1</a> and <a href="#">200.307</a> ). g. <u>Total</u> : This field is automatically calculated. It is the sum of all amounts in the categories (items a. through f.) above.
19	Executive Order 12372	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. Select the appropriate box. If “A.” is selected, enter the date the application was submitted to the State. Required.	Select option c, Program is not covered by E.O. 12372.
20	Federal Debt Delinquency	Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of federal debt include but may not be limited to delinquent audit disallowances, loans, and taxes. If yes, include an explanation in an attachment. Required.	No additional instructions
21	Certification and Signature	To be signed and dated by the authorized representative of the applicant organization. Enter the first and last name (required), prefix,	No additional instructions.

**FPAC-BC Grant Application Package Instructions**

		<p>middle name, and suffix. Enter title, telephone number, fax number, and email. Fax number is not required. A copy of the governing body’s authorization for you to sign this application as the official representative must be on file in the applicant’s office. (Certain federal agencies may require that this authorization be submitted as part of the application.) If the application is submitted via Grants.gov, the signature of the authorized representative and the date signed are completed upon submission. Required.</p>	
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**3. Project Narrative Attachment**

**Project Narrative File(s)**

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\* Mandatory Project Narrative File Filename:

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To add more Project Narrative File attachments, please use the attachment buttons below.

Field Name	Project Narrative Attachment Instructions (V1.2)	FPAC Agency Guidance
Mandatory Project Narrative File Filename	Click here to add mandatory Project Narrative File. Required.	Refer to section D.3.b. of the NOFO and section <a href="#">III.2.1</a> for any formatting, page limitations, and content requirements.
To add more Project Narrative File attachments, please use the attachment buttons below	Click here to add optional Project Narrative File. Optional.	Refer to section D.3.b of the NOFO for any restrictions of additional Project Narrative File attachments.

**FPAC-BC Grant Application Package Instructions**

**4. Project Abstract**

OMB Number: 4040-0010  
 Expiration Date: 12/31/2026

### Project Abstract

The Project Abstract must not exceed one page and must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This Abstract must not include any proprietary/confidential information.

\* Please click the add attachment button to complete this entry.

The Project Abstract must not exceed one page and must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This Abstract must not include any proprietary/confidential information.

Project Abstract Instructions (V1.2)	FPAC Agency Guidance
Attach a file using the appropriate buttons. This attachment is required. Required.	Adhere to the instructions included on the form (see above). Refer to section D.4.b. of the NOFO for any formatting, page limitations, and content requirements.

**FPAC-BC Grant Application Package Instructions**

**5. Budget Information for Non-Construction Programs (SF-424A)**

View Burden Statement		<b>BUDGET INFORMATION - Non-Construction Programs</b>				OMB Number: 4040-0006 Expiration Date: 02/28/2025	
<b>SECTION A - BUDGET SUMMARY</b>							
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget			
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)	
1.		\$	\$	\$	\$	\$	
2.							
3.							
4.							
<b>5. Totals</b>		\$	\$	\$	\$	\$	

Standard Form 424A (Rev. 7-97)  
Prescribed by OMB (Circular A-102) Page 1

<b>SECTION A - BUDGET SUMMARY</b>			
Column	Field Name	SF-424A Instructions (V1.0)	FPAC Agency Guidance
1(a)	Grant Program Function or Activity	Enter the name of the activity or function. At least one is required.	FPAC agencies do not require the project budget be broken down into separate programs, functions, or activities on this form. That level of detail, if desired, is reserved for the Budget Narrative (see section <a href="#">V.6.</a> ) which is a related, but separate document. Enter “Federal” in 1(a) and, if cost-share/match is required, enter “Non-Federal” in 2(a). Leave the remaining rows blank.
1(b)	Catalog of Federal Domestic Assistance Number	Enter the Catalog of Federal Domestic Assistance Number. At least one is required.	If not automatically populated, leave blank. Leave the remaining rows blank.
1(c-d)	Estimated	For new applications, leave Column (c) and	Leave all rows of columns (c) and (d)

**FPAC-BC Grant Application Package Instructions**

	<p>Unobligated Funds: Federal and NonFederal</p>	<p>(d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of nonfederal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.</p>	<p>blank.</p>
<p>1(e)</p>	<p>New or Revised Budget: Federal</p>	<p>For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period.</p>	<p>Enter the total amount of the Federal funds requested in Row 1, column (e). Leave the remaining rows column (e) blank. This amount must be consistent with the amount in Block 18a of the SF-424.</p>

**FPAC-BC Grant Application Package Instructions**

		<p>The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of nonfederal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.</p>	
1(f)	New or Revised Budget: Non-Federal	<p>For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of nonfederal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.</p>	<p>Enter the total amount of the required Non-Federal cost share/match, if applicable, in Row 2, column (f) and leave the remaining rows of column (f) blank. This amount must be consistent with the total amount of Blocks 18b through 18f of the SF-424.</p>
1(g)	Total	Total for Row 1(a) – 1(f). If using electronic	This auto-calculates and must be

**FPAC-BC Grant Application Package Instructions**

		form, these numbers are auto calculated. Required.	consistent with the total amount in Block 18(a) of the SF424.
5	Totals	Total for each column. IF using electronic form, these numbers are auto calculated. Required.	This auto-calculates. Block 5(g) is the total proposed application budget.

**SECTION B - BUDGET CATEGORIES**

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
b. Fringe Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Travel	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Supplies	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Contractual	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Construction	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
h. Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
i. Total Direct Charges (sum of 6a-6h)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
j. Indirect Charges	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
k. TOTALS (sum of 6i and 6j)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
7. Program Income	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

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Standard Form 424A (Rev. 7-97)  
Prescribed by OMB (Circular A-102) Page 1A

**SECTION B – BUDGET CATEGORIES**

6(1-2)	Grant Program Function or Activity 1 - 2	In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each Grant Program, Function or Activity, fill in the total requirements for funds (both federal and non-federal) by object class categories. If using the Budget Information form through Grants.gov, the Grant Program, Function, or Activity is pre-populated by	The form will auto-populate “Federal” in the heading of Column 1. See the Budget Narrative Guidance for guidance on what types of costs to include in each category; see section <a href="#">V.6</a> . The form will auto-populate “Non-Federal” in the heading of Column 2.
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**FPAC-BC Grant Application Package Instructions**

		the Grant Program Function or Activity from column (A) in Section A – Budget Summary. Required.	
6(3-4)	Grant Program Function or Activity 3 - 4	In the column headings (3) through (4), enter the titles of the same programs, functions, and activities shown on Lines 3-4, column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each Grant Program, Function or Activity, fill in the total requirements for funds (both federal and non-federal) by object class categories. If using the Budget Information form through Grants.gov, the Grant Program, Function, or Activity is pre-populated by the Grant Program Function or Activity from column (A) in Section A – Budget Summary. Required.	Leave all rows of this entire column blank.
6(a)	Personnel	Enter funds required for purpose/column heading from the selected program. If not applicable, leave blank. Optional.	Refer to Budget Narrative Guidance; see section <a href="#">V.6</a> .
6(b)	Fringe		
6(c)	Travel		
6(d)	Equipment		
6(e)	Supplies		
6(f)	Contractual		
6(g)	Construction		
6(h)	Other		
6(i)	Total Direct Charges (sum of 6(a) thru 6(h))	Sum of 6(a) thru 6(h). If using electronic form, these numbers are auto calculated. Required.	This auto-calculates.
6(j)	Indirect Charges	Enter the amount of indirect costs. If not applicable, leave blank. Optional.	Refer to Budget Narrative Guidance; see section <a href="#">V.6</a> .
6(k)	TOTALS (sum of 6(i) thru 6(j))	Enter the total of amounts on Lines 6i and 6j. (This amount is auto calculated if using Grants.gov.) For all applications for new grants and continuation grants, the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5. If using electronic form, these numbers are auto calculated. Required.	Row 6(k) of Columns (1) and (2) will auto-populate; all other columns should be blank. The total must be consistent with the Federal total in Section A (row 5 columns (e) and (f)). All costs must comply with the cost principles of <a href="#">2 CFR Part 200, Subpart E – Cost Principles</a> . All costs must be allowable ( <a href="#">2 CFR 200.403</a> ), allocable to the agreement ( <a href="#">2 CFR 200.405</a> ), and reasonable in amount ( <a href="#">2 CFR 200.404</a> ).
7	Program	Enter the estimated amount of total	If your project does not expect

**FPAC-BC Grant Application Package Instructions**

	Income	income, if any, expected to be generated from this project. If not applicable, leave blank. Optional.	<p>program income to be generated, leave this blank.</p> <p>Program income (see <a href="#">2 CFR 200.1</a>) means gross income earned by the non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award during the period of performance except as provided in <a href="#">§200.307(f)</a>. Program income includes but is not limited to income from fees for services performed, the use or rental or real or personal property acquired under Federal awards, the sale of commodities or items fabricated under a Federal award, license fees and royalties on patents and copyrights, and principal and interest on loans made with Federal award funds.</p> <p>This is the amount expected but may not necessarily be what is achievable under a resultant agreement.</p>
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**FPAC-BC Grant Application Package Instructions**

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS	
8.	\$	\$	\$	\$	
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$	\$	\$	\$	\$
14. Non-Federal	\$	\$	\$	\$	\$
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)				
	(b)First	(c) Second	(d) Third	(e) Fourth	
16.	\$	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)	\$	\$	\$	\$	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:			22. Indirect Charges:		
23. Remarks:					

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Standard Form 424A (Rev. 7-97)  
Prescribed by OMB (Circular A-102) Page 2

SECTION C - NON-FEDERAL RESOURCE			
8(a)	Grant Program Function or Activity 1	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A; but may be overwritten if called for by the instructions for this funding opportunity. Required.	This will auto-populate.
8(b)-(d)	Grant Program Function or Activity 2 - 4	Enter resources provided by the applicant for the selected program. If not applicable, leave blank. Optional.	Leave blank.
8(e)	(e) Total of Non-Federal Resources for Grant Program sum of line (a) through (d)	Total Sum of 8(b) thru 8(d). Required.	Leave blank.
12(b) thru 12(e)	Total (sum of lines 8-11)	Total for each column. If using electronic form, these numbers are auto calculated. Required.	Leave blank.
SECTION D - FORECASTED CASH NEEDS			

**FPAC-BC Grant Application Package Instructions**

13	Federal Total for 1 <sup>st</sup> Year	Sum of Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	Leave blank.
	Federal Forecasted Cash Needs for 1 <sup>st</sup> Quarter – 4 <sup>th</sup> Quarter	Enter the forecasted cash needs from federal sources for each quarter of the first program year. If not applicable, leave blank. Optional.	Leave blank.
14	Non-Federal for 1st Year	Sum of Non-Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	Leave blank.
	Non-Federal Forecasted Cash Needs for 1 <sup>st</sup> Quarter – 4 <sup>th</sup> Quarter	Enter the forecasted cash needs from nonfederal sources for each quarter of the first program year. If not applicable, leave blank. Optional.	Leave blank.
15	TOTAL (sum of lines 13 and 14)	Total for each column. If using electronic form, these numbers are auto calculated. Required.	Leave blank.
	Total Forecasted 1 <sup>st</sup> Year	Total Sum of 1st Year Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	Leave blank.
	Total Forecasted 1 <sup>st</sup> Quarter – 4 <sup>th</sup> Quarter	Total each Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Optional.	Leave blank.
<b>SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT</b>			
16(a)	Grant Program	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A; but may be overwritten if called for by the instructions for this funding opportunity. Required.	This will auto-populate.
16(b-d)	First Future Funding Period (year) – Third Future Funding Period (year)	Enter the estimated federal funds that will be required in each of the additional funding years for the selected program. Optional.	Leave blank.
16(e)	Fourth Future Funding Period (year)	Enter the estimated federal funds that will be required in the fourth funding year for the selected program. Optional.	Leave blank.
20	Total (sum of lines 16-19)	Total Sum of Estimated Federal Funds needed for balance of project per year. Auto calculated. Required.	Leave blank.
<b>SECTION F – OTHER BUDGET INFORMATION</b>			
21	Direct Charges	Use this space to explain amounts for individual	Leave blank.

**FPAC-BC Grant Application Package Instructions**

		direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.	
22	Indirect Charges	Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.	Leave blank.
23	Remarks	Provide any other explanations or comments deemed necessary.	Leave blank.

**6. Budget Narrative Attachment Form**

**Budget Narrative File(s)**

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\* Mandatory Budget Narrative Filename:

Add Mandatory Budget Narrative

Delete Mandatory Budget Narrative

View Mandatory Budget Narrative

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To add more Budget Narrative attachments, please use the attachment buttons below.

Add Optional Budget Narrative

Delete Optional Budget Narrative

View Optional Budget Narrative

Field Name	Budget Narrative Attachment Form Instructions (V1.2)	FPAC Agency Guidance
Mandatory Budget Narrative Filename	Click here to add the mandatory Budget Narrative. Required.	See FPAC Budget Narrative Guidance below.
To add more Budget Narrative attachments, please use the attachment buttons below.	Click here to add an optional Budget Narrative. Optional.	No additional guidance.

**FPAC Budget Narrative Guidance**

See [Budget Narrative Guidance](#)

**7. Other Attachment**

**FPAC-BC Grant Application Package Instructions**

**Other Attachment File(s)**

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\* Mandatory Other Attachment Filename:

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To add more "Other Attachment" attachments, please use the attachment buttons below.

Field Name	Other Attachment Form Instructions (V1.2)	FPAC Agency Guidance
Mandatory Other Attachment Filename:	Click here to add the mandatory Budget Narrative. Required.	Current and Pending Support is to be included as Mandatory Other Attachment. See <a href="#">7.1</a> that follows for instructions.
To add more "Other Attachment" attachments, please use the attachment buttons below.	Click here to add an optional Other Attachment. Optional.	Include GADSUM-9, Applicant Contact(s) Information; see <a href="#">7.2</a> that follows. Include NICRA, as applicable; see <a href="#">7.3</a> that follows. Include additional congressional districts as necessary; <a href="#">see block 16b of SF-424</a> . Include other information as instructed by the NOFO.

**FPAC-BC Grant Application Package Instructions**

**7.1 Current and Pending Support**

Farm Production and Conservation - Grants and Agreements Division  
 Organizational Commitment Table

This worksheet helps FPAC agencies and Federal-financial-assistance applicants document the allocation of award recipient personnel time across awards, subawards, and contracts in accordance with 2 CFR 200.430.

Complete entries for all application key personnel.  
 Key personnel have the primary responsibility for the leadership of the project and actively participate in its development, delivery, and management. Key personnel may include the Program Contact, Program Director, and staff whose contributions are essential to the success of the project. Direct questions about key personnel to your agency contact.

Active							
Name of Key Personnel	Funding Agency	Agreement/Contract Number	Total Obligation	Period of Performance		% of time committed	Project Title
				Start Date	End Date		

Pending							
Name of Key Personnel	Funding Agency	Application Number (if available)	Requested Amount	Period of Performance		% of time committed	Project Title
				Start Date	End Date		

- **FPAC-BC Instructions**
  - The above template is available for your use; see [https://www.fpacbc.usda.gov/Assets/fpacbc/files/application-resources/current\\_and\\_pending\\_support\\_table\\_20230404-1.xlsx](https://www.fpacbc.usda.gov/Assets/fpacbc/files/application-resources/current_and_pending_support_table_20230404-1.xlsx).
  - Follow instructions at the top of the template.
  - If a key person does not have an active or pending Federal financial assistance entry, include the individual’s name and “N/A” in Funding Agency column.
  - Submit a Statement of Current and Pending Support for each key personnel who will participate in the project.
  - Convert file into one portable document format (pdf) file and upload as the Mandatory Other Attachment.

**7.2 GADSUM9, Applicant Contact(s) Information**

**FPAC-BC Grant Application Package Instructions**

Grants and Agreements Division Submission Memo (GADSUM9)  
Applicant Contact(s) Information **(to be completed by the applicant)**

Expiration Date: 09/30/2025  
Previous versions will not be accepted

1. Applicant Organization Name

2. Unique Official Project Title

3. Applicant Unique Entity Identifier (UEI)

Individuals who will be designated as person(s) responsible on behalf of the applicant's organization.

See instructions for descriptions of these roles.

Complete boxes 4 - 7. To ensure adequate internal controls, a minimum of two different people must be identified.

**4. Administrative Contact**

Name  Phone

Title  Email

**5. Program Contact**

Name  Phone

Title  Email

**6. Program Director**

Name  Phone

Title  Email

**7. Signatory Official**

Name  Phone

Title  Email

**8. Key Personnel:**

This section must list key personnel by name, title, role, and responsibilities, including specific tasks and subtasks designated to them in the project proposal. If there are no key personnel, enter "NONE" below.

Changes in key personnel require prior approval. Direct questions about key personnel to your agency contact.

The GADSUM9, Applicant Contact(s) Information, is available at:  
[https://www.fpacbc.usda.gov/Assets/fpacbc/files/about/grants-agreements/GADSUM9\\_20240927withoutguidance.pdf](https://www.fpacbc.usda.gov/Assets/fpacbc/files/about/grants-agreements/GADSUM9_20240927withoutguidance.pdf)

Field	FPAC-BC Agency Guidance
1.	Enter the applicant organization name. If you are an individual, enter your first and last name.
2.	Enter a brief title describing the project or work that will be covered by the agreement.
3.	Enter the 12-digit Alpha-Numeric Unique Entity Identifier (UEI) assigned by SAM.gov. If

**FPAC-BC Grant Application Package Instructions**

	you are an individual without an active SAM registration, leave this box blank.
4. through 7.	<p>Complete all boxes 4-7. Enter the name, phone, title, and email for each contact in accordance with the following descriptions:</p> <p><b>Administrative Contact:</b> The individual responsible for administrative functions to manage the agreement. This individual is typically the main point of contact for the agreement and will receive auto-generated emails from the grants management system regarding actionable items. This individual is typically responsible for the content of the financial reporting for the project.</p> <p><b>Program Contact:</b> This individual typically provides direct supervision and day-to-day oversight of the project. This individual will receive auto-generated emails from the grants management system regarding actionable items. This individual is typically responsible for the content of the performance reporting for the project.</p> <p><b>Program Director:</b> This individual is responsible for overall responsibility for the project but may or may not be personally involved with the day-to-day oversight of the project.</p> <p><b>Signatory Official:</b> The individual with legal authority to commit the organization to financial and other responsibilities.</p>
8.	<p>This section must list key personnel by name, title, role, and responsibilities, including specific tasks and subtasks designated to them in the project proposal. If there are no key personnel, enter "NONE" below. Key personnel have the primary responsibility for the leadership of the project and actively participate in the development, delivery, and management of the project. Key personnel may include the Program Contact, Program Director, Principal Investigator, and/or staff whose contributions are essential to the success of the project. Changes in key personnel require prior approval. Direct questions about key personnel to your agency contact.</p>

**7.3 Negotiated Indirect Cost Rate (NICRA)**

Refer to section [V.6](#) for information about indirect costs and NICRAs and refer to the Budget Narrative section of the NOFO (see section D.3.) to determine if there are any limitations to indirect costs. If indirect costs are allowable and the organization has a NICRA, attach the current NICRA as an optional attachment.

**FPAC-BC Grant Application Package Instructions**

**8. Attachments**

**ATTACHMENTS FORM**

**Instructions:** On this form, you will attach the various files that make up your grant application. Please consult with the appropriate Agency Guidelines for more information about each needed file. Please remember that any files you attach must be in the document format and named as specified in the Guidelines.

**Important:** Please attach your files in the proper sequence. See the appropriate Agency Guidelines for details.

1) Please attach Attachment 1	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
2) Please attach Attachment 2	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
3) Please attach Attachment 3	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
4) Please attach Attachment 4	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
5) Please attach Attachment 5	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
6) Please attach Attachment 6	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
7) Please attach Attachment 7	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
8) Please attach Attachment 8	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
9) Please attach Attachment 9	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
10) Please attach Attachment 10	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
11) Please attach Attachment 11	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
12) Please attach Attachment 12	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
13) Please attach Attachment 13	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
14) Please attach Attachment 14	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment
15) Please attach Attachment 15	<input type="text"/>	Add Attachment	Delete Attachment	View Attachment

Field Number	Field Name	Attachment Form Instructions (V1.2)	FPAC Agency Guidance
Fields 1) through 15)	Please attach Attachment	Click to add this attachment. Optional.	Refer to sections <a href="#">8.1</a> and <a href="#">8.2</a> that follow. If more than 15 Attachments are needed, combine the attachments exceeding number 15 with number 15 into one PDF document and attach as Attachment 15.

**FPAC-BC Grant Application Package Instructions**

**8.1 Subawards**

If the organization intends to have subawards, the following is to be completed and provided for **each** subaward.

- Subaward Budget Detail - See section [8.1.1](#). for instructions and link to template.
- Budget narrative - See section [V.6](#). of this document for instructions.

For each subaward, combine the above files into one portable document format (PDF) file, and Add Attachment to the Attachment Form.

**8.1.1 Subaward Budget Detail**

Subaward Budget Detail							
Subawardee Organization							
Budget Categories		Year 1	Year 2	Year 3	Year 4	Year 5	Total
1.	Personnel						\$ 0.00
2.	Fringe Benefits						\$ 0.00
3.	Travel						\$ 0.00
4.	Equipment						\$ 0.00
5.	Supplies						\$ 0.00
6.	Contractual						\$ 0.00
7.	Construction						\$ 0.00
8a.	Other - Subawards						\$ 0.00
8b.	Other - Describe below						\$ 0.00
8c.	Other - Describe below						\$ 0.00
8d.	Other - Describe below						\$ 0.00
8e.	Other - Not included in 8a. - 8d.						\$ 0.00
9.	Total Direct Charges (sum of 1-8)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
10.	Indirect Charges						\$ 0.00
11.	Totals (sum of 9-10)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
<b>CAUTION!</b> <input type="button" value="Clear all"/> This will permanently delete all entries							
Program income							\$ 0.00

The above template is available for your use; see [https://www.fpacbc.usda.gov/Assets/fpacbc/files/application-resources/SubAwardBudgetV3\\_20241008.pdf](https://www.fpacbc.usda.gov/Assets/fpacbc/files/application-resources/SubAwardBudgetV3_20241008.pdf)

Field Number	Field Name	FPAC Agency Guidance
N/A	Subawardee Organization	Enter the name of the subaward organization
Fields 1. - 11.	Budget Categories as shown	Enter amounts for each proposed year of the subaward. Breakout the Other category to the extent possible including self-identified subcategories as appropriate. The total column and rows 9. and 11. will automatically calculate.

**FPAC-BC Grant Application Package Instructions**

**8.2 Letters of Support**

Refer to the applicable Attachment section of section D.3. of the NOFO to determine if Letters of Support are required. If required, provide evidence (e.g., letter of support) that the identified collaborators agree to render the noted services. Letters of support must:

- Include the project name and name, address, and telephone number of the organization
- Include the signature of the authorized organizational representative of the organization
- Be combined into one portable document form (PDF) file and attached.
- Be accurate as the agency may conduct reference checks to ensure that organizations identified are supportive of the project.

**9. Certification Regarding Lobbying Form**

OMB Number: 4040-0013  
Expiration Date: 02/28/2025

**CERTIFICATION REGARDING LOBBYING**

**Certification for Contracts, Grants, Loans, and Cooperative Agreements**

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**Statement for Loan Guarantees and Loan Insurance**

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION	
<input type="text"/>	
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Prefix: <input type="text"/>	* First Name: <input type="text"/> Middle Name: <input type="text"/>
* Last Name: <input type="text"/>	Suffix: <input type="text"/>
* Title: <input type="text"/>	
* SIGNATURE: <input type="text"/>	* DATE: <input type="text"/>

**FPAC-BC Grant Application Package Instructions**

**Certification for Contracts, Grants, Loans, and Cooperative Agreements**

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents. for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**Statement for Loan Guarantees and Loan Insurance**

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Field Name	Certification Regarding Lobbying Instructions (V1.1)	FPAC Agency Guidance
Applicant's Organization	This is the legal name of the organization that will undertake the assistance activity. This should normally be the name under which the organization has registered with the Business Partner Network. Pre-populated from the SF 424 if submitted through Grants.gov. Required.	No additional instructions.
Prefix	This is the prefix (e.g., Mr., Mrs., Rev.) for the name of	No additional instructions.

**FPAC-BC Grant Application Package Instructions**

	the Authorized Representative. Pre-populated from the SF 424 if submitted through Grants.gov. Optional.	
First Name	This is the first (given) name of the Authorized Representative who is signing this form. Pre-populated from the SF 424 if submitted through Grants.gov. Required.	No additional instructions.
Middle Name	This is the middle name of the Authorized Representative. Pre-populated from the SF 424 if submitted through Grants.gov. Optional.	No additional instructions.
Last Name	This is the last (family) name of the Authorized Representative signing this form. Pre-populated from the SF 424 if submitted through Grants.gov. Required.	No additional instructions.
Suffix	This is the suffix (e.g., Jr, Sr, PhD) for the name of the Authorized Representative. Pre-populated from the SF 424 if submitted through Grants.gov. Optional	No additional instructions.
Title	This is the title of the Authorized Representative who is signing this form. Pre-populated from the SF 424 if submitted through Grants.gov. Required.	No additional instructions.
Signature	It is the organization's responsibility to assure that only properly authorized individuals sign in this capacity and/or submit the application to Grants.gov. If this application is submitted through Grants.gov leave blank. If a hard copy is submitted, the AOR must sign this block. Required.	No additional instructions.

**FPAC-BC Grant Application Package Instructions**

**10. Disclosure of Lobbying Activities Form**

<b>DISCLOSURE OF LOBBYING ACTIVITIES</b>		
Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352		OMB Number: 4040-0013 Expiration Date: 02/28/2025
<b>Review Public Burden Disclosure Statement</b>		
<b>1. * Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. * Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. * Report Type:</b> <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name: <input style="width: 60%; border: 1px solid red;" type="text"/> * Street 1: <input style="width: 60%; border: 1px solid red;" type="text"/> Street 2: <input style="width: 30%; border: 1px solid red;" type="text"/> * City: <input style="width: 20%; border: 1px solid red;" type="text"/> State: <input style="width: 30%; border: 1px solid red;" type="text"/> Zip: <input style="width: 10%; border: 1px solid red;" type="text"/> Congressional District, if known: <input style="width: 40%; border: 1px solid red;" type="text"/>		
<b>5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:</b>   		
<b>6. * Federal Department/Agency:</b> <input style="width: 90%; border: 1px solid red;" type="text"/>	<b>7. * Federal Program Name/Description:</b> <input style="width: 90%; border: 1px solid red;" type="text"/> CFDA Number, if applicable: <input style="width: 60%; border: 1px solid red;" type="text"/>	
<b>8. Federal Action Number, if known:</b> <input style="width: 90%; border: 1px solid red;" type="text"/>	<b>9. Award Amount, if known:</b> \$ <input style="width: 60%; border: 1px solid red;" type="text"/>	
<b>10. a. Name and Address of Lobbying Registrant:</b> Prefix: <input style="width: 10%; border: 1px solid red;" type="text"/> * First Name: <input style="width: 20%; border: 1px solid red;" type="text"/> Middle Name: <input style="width: 30%; border: 1px solid red;" type="text"/> * Last Name: <input style="width: 40%; border: 1px solid red;" type="text"/> Suffix: <input style="width: 10%; border: 1px solid red;" type="text"/> * Street 1: <input style="width: 40%; border: 1px solid red;" type="text"/> Street 2: <input style="width: 40%; border: 1px solid red;" type="text"/> * City: <input style="width: 20%; border: 1px solid red;" type="text"/> State: <input style="width: 30%; border: 1px solid red;" type="text"/> Zip: <input style="width: 10%; border: 1px solid red;" type="text"/>		
<b>b. Individual Performing Services (including address if different from No. 10a)</b> Prefix: <input style="width: 10%; border: 1px solid red;" type="text"/> * First Name: <input style="width: 20%; border: 1px solid red;" type="text"/> Middle Name: <input style="width: 30%; border: 1px solid red;" type="text"/> * Last Name: <input style="width: 40%; border: 1px solid red;" type="text"/> Suffix: <input style="width: 10%; border: 1px solid red;" type="text"/> * Street 1: <input style="width: 40%; border: 1px solid red;" type="text"/> Street 2: <input style="width: 40%; border: 1px solid red;" type="text"/> * City: <input style="width: 20%; border: 1px solid red;" type="text"/> State: <input style="width: 30%; border: 1px solid red;" type="text"/> Zip: <input style="width: 10%; border: 1px solid red;" type="text"/>		
<b>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the fter above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b>		
<b>* Signature:</b> <input style="width: 60%; border: 1px solid red;" type="text"/> <b>*Name:</b> Prefix: <input style="width: 10%; border: 1px solid red;" type="text"/> * First Name: <input style="width: 20%; border: 1px solid red;" type="text"/> Middle Name: <input style="width: 30%; border: 1px solid red;" type="text"/> * Last Name: <input style="width: 40%; border: 1px solid red;" type="text"/> Suffix: <input style="width: 10%; border: 1px solid red;" type="text"/> <b>Title:</b> <input style="width: 30%; border: 1px solid red;" type="text"/> <b>Telephone No.:</b> <input style="width: 20%; border: 1px solid red;" type="text"/> <b>Date:</b> <input style="width: 30%; border: 1px solid red;" type="text"/>		
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

**FPAC-BC Grant Application Package Instructions**

Field Number	Field Name	Disclosure of Lobbying Activities Instructions (V2.0)	FPAC Agency Guidance
1	Type of Federal Action:	Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action. Required.	Do <b>NOT</b> complete and submit the report if lobbying activities have not occurred. If completing, select 1a, grant or 1b, cooperative agreement.
2	*Status of Federal Action	Identify the status of the covered Federal action. Required.	Select a, application.
2-a	a. Bid/Offer/ Application	Click if the Status of Federal Action is a bid, an offer or an application.	
2-b	b. Initial Award	Click if the Status of Federal Action is an initial award.	Leave blank.
2-c	c. Post-Award	Click if the Status of Federal Action is a post-award.	Leave blank.
3	*Report Type	Identify the appropriate classification of this report.	Select a, initial filing.
3-a	a. Initial filing	Check if Initial filing.	
3-b	b. Material change	If this is a follow up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the previously submitted report by this reporting entity for this covered Federal action. Required.	Leave blank.
	Material Change Year	If this is a follow up report caused by a material change to the information previously reported, enter the year in which the change occurred.	Leave blank.
	Material Change Quarter	If this is a follow up report caused by a material change to the information previously reported, enter the quarter in which the change occurred.	Leave blank.
	Material Change Date of Last Report	Enter the date of the previously submitted report by this reporting entity for this covered Federal action.	Leave blank.
4	Name and Address of Reporting Entity	Provide the information for Name and Address of Reporting Entity.	No additional instructions.
	Prime	Click to designate the organization filing the report as the Prime Federal recipient.	Click as prime recipient.
	Subawardee	Click to designate the organization filing the report as the SubAwardee Federal recipient. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.	Leave blank.
	Tier if known:	Identify the tier of the subawardee, e.g.,	Leave blank.

**FPAC-BC Grant Application Package Instructions**

		the first subawardee of the prime is the 1st tier.	
	Name Street 1 Street 2 City State ZIP	Enter the name and address of reporting entity. Required.	No additional instructions.
	Congressional District, if known	Enter the primary Congressional District of the reporting entity. Enter in the following format: 2 character state abbreviation – 3 characters district number, e.g., CA-005 for California 5th district, CA-012 for California 12th district, NC-103 for North Carolina’s 103rd district. Optional.	District numbers can be found at <a href="https://www.house.gov/representatives/find-your-representative">https://www.house.gov/representatives/find-your-representative</a>
5.	If Reporting Entity in No. 4 is Subaward, Enter Name, Address, and Congressional District of Prime.	If Reporting Entity in No. 4 is Subaward, provide the information for the Name, Address, and Congressional District of Prime. Conditionally required.	Leave blank.
6.	Federal Department/ Agency	Enter the name of the Federal Department or Agency making the award or loan commitment. Required.	Enter the acronym for the funding agency (e.g., NRCS, FSA, RMA).
7.	CFDA Number	Enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans and loan commitments. Pre-populated from SF-424 if using Grants.gov. Required.	No additional instructions.
	CFDA Title	Enter the Federal program name or description for the covered Federal action. Pre-populated from SF-424 if using Grants.gov. Required.	No additional instructions.
8.	Federal Action Number	Enter the most appropriate Federal identifying number available for the Federal action, identified in item 1 (e.g., Request for Proposal (RFP) number, invitation for Bid (IFB) number, grant announcement number, the contract, grant, or loan award number, the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001". Optional.	Enter the Notice of Funding Opportunity Number (NOFO). See section A.3. of the NOFO.
9.	Award Amount	For a covered Federal action where there has been an award or loan commitment by	Leave blank.

**FPAC-BC Grant Application Package Instructions**

		the Federal agency, enter the Federal amount of the award/loan commitment of the prime entity identified in item 4 or 5.	
10a	Name and Address of Lobbying Registrant	Provide the information for the Name and Address of Lobbying Registrant. Required.	No additional instructions.
10b	Individual Performing Services	Enter the name and address of the Individual Performing Services.	No additional instructions.
11	Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		No additional instructions.
	Signature	Completed by Grants.gov upon submission. Required	No additional instructions.
	Name	Provide the information for the Name of the Certifying Official. Required.	No additional instructions.

**VI. APPLICATION PREPARATION CHECKLIST**

It is strongly recommended that you conduct an administrative review to ensure that the application is responsive to the NOFO and this guide prior to its submission. This checklist is not intended to be an all-inclusive repetition of the application preparation instructions nor will each item be applicable to every application. It is, however, meant to bring awareness to items as a way to assist you in a successful submission of an application.

**General:**

- Was the Grants.gov registration process completed (see [II.1.](#) of this Guide)?
- Application is being submitted ahead of the established deadline (see section A.6. of NOFO).
- The eligibility criteria in Part B. of the NOFO is met.
- Proposal is responsive to the program description/announcement/solicitation in Part C. of the NOFO.
- A cover letter or letter of intent is not included.

**Application for Federal Assistance (SF-424):**

- There are no supporting documents attached in the last area of the SF-424.

**Project Narrative:**

**FPAC-BC Grant Application Package Instructions**

Does it meet the attachment requirements in section [III.2.1](#) of this Guide?

Ensure that it does not exceed any page limitation specified in section D.3. of the NOFO.

Does it include all the components specified in the NOFO?

**Budget:**

Were sections C, D, E, and F of the budget left blank with the exception of auto-populated information (see section [V.5.](#))?

Do the totals in Section B. of the budget agree with the amounts listed in block 18 of the SF-424?

**Budget Narrative:**

Does the budget narrative provide sufficient detail to clearly understand the basis for amounts requested?

For personnel costs, does the narrative include positions, not individual names?

If indirect costs are allowed, is the calculation included for how the indirect costs were determined? Does the calculation factor in any applicable statutory or other limitations?

If there is required cost share, does the narrative include the source and sufficient detail of amounts?

**Other Attachment:**

Is a Current and Pending Support provided for each key person (see section [V.7.1](#))? Is the Current and Pending Support one pdf file included as the mandatory attachment?

Is the GADSUM-9, Applicant Contact(s) Information completed and attached as an optional attachment (see section [V.7.2](#))? Are key personnel or none identified in the key personnel portion of the GADSUM-9?

If indirect costs are allowable and being requested, is the organization's Negotiated Indirect Cost Rate (NICRA) included, if applicable?

**Attachment:**

If the applicant's budget includes funding for a subaward(s), is a PDF attachment included for each subaward that contains a Subaward Budget Detail (see section [V.8.1.1](#)) and a budget narrative?

If required by section D.3. of the NOFO, are Letters of Support included? Are they included as one PDF document? Does each Letter of Support contain the criteria noted in section [V.8.2](#)?

Is the Certification Regarding Lobbying attached (see section [V.9.](#))?

If lobbying activities associated with the project were conducted, is a Disclosure of Lobbying Activities included (see section [V.10.](#))?

**FPAC-BC Grant Application Package Instructions**

## **VII. ADMINISTRATION OF AWARDS**

Information regarding the administration of awards, including relevant award conditions, is available on the FPAC-BC Grants and Agreements Division web site: <https://www.fpacbc.usda.gov/about/grants-and-agreements/index.html>.

## **VIII. GRANTS AND AGREEMENTS DIVISION (GAD) CORRESPONDENCE**

Subscribe to receive correspondence issued by FPAC-BC GAD; audience will largely be financial assistance award recipients but may include applicants. Topics may include highlighting award management issues, implementation of new policies or procedures, announcements, etc.

[https://public.govdelivery.com/accounts/USDAFARMERS/subscriber/new?topic\\_id=USDAFARMERS\\_4170](https://public.govdelivery.com/accounts/USDAFARMERS/subscriber/new?topic_id=USDAFARMERS_4170)