



## USDA WIC Online Ordering Grant

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Fiscal Year 2020 Request for Applications (RFA)

**Catalog for Federal Domestic Assistance Number (CFDA): 10.557**

This project will be awarded as a **Cooperative Agreement**.

Release Date: July 20, 2020

Application Due Date: 11:59 PM, Eastern Standard Time (EST), August 19, 2020

Anticipated Award Date: September 2020

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## **IMPORTANT NOTICE**

**On December 31, 2017, Grants.gov officially retired the legacy .PDF application package as a method to apply for a federal grant. This changed the way many Grants.gov users completed and submitted their grant applications. More information on the Grants.gov process can be found [here](https://grants.gov/web/grants/applicants/workspace-overview.html) or by visiting: <https://grants.gov/web/grants/applicants/workspace-overview.html>**

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# APPLICATION CHECKLIST

This Application Checklist provides applicants with a list of the required documents. However, FNS expects that applicants will read the entire RFA prior to the submission of their application and comply with all requirements outlined in the solicitation. The Application Checklist is for applicant use only and should not be submitted as part of the Application Package.

Complete the following **at least four weeks** prior to submission:

- ☐ Obtain a Dun & Bradstreet Data Universal Numbering System (DUNS) number;
- ☐ Register the DUNS number in the System for Award Management (SAM); and,
- ☐ Register in Grants.gov.

When **preparing your application**, ensure:

- ☐ Application format and narrative meet the requirements included in Section IV “[Application and Submission Information](#).” This includes page limits, priorities outlined in Section IV, and all necessary attachments.

When **preparing your budget**, ensure the following information is included:

- ☐ All key staff proposed to be paid by this grant.
- ☐ The percentage of time the Project Director will devote to the project in full-time equivalents (FTEs).
- ☐ Your organization’s fringe benefit rate and amount, as well as the basis for the computation.
- ☐ The type of fringe benefits to be covered with federal funds.
- ☐ Itemized travel expenses (including type of travel), travel justifications and basis for lodging estimates.
- ☐ Types of equipment and supplies, justifications, and estimates, ensuring that the budget is in line with the project description.
- ☐ Information for all contracts and justification for any sole-source contracts.
- ☐ Justification, description and itemized list of all consultant services.
- ☐ Indirect cost information (either a copy of a Negotiated Indirect Cost Rate Agreement (NICRA) or if no agreement exists and the applicant has never been approved for a NICRA, they may charge up to 10% de minimis). If applicant is requesting the de minimis rate or indirect costs are not requested, please indicate this in the budget narrative.

When **submitting** your application, ensure you have submitted the following:

- ☐ SF-424 [Application for Federal Assistance](#) (fillable PDF in Grants.gov)
- ☐ SF-424A [Budget Information and Instruction Form](#) (fillable PDF in Grants.gov)
- ☐ SF-424B [Assurances for Non-Construction Programs](#) (fillable PDF in Grants.gov)
- ☐ SF-LLL [Disclosure of Lobbying Activities](#)
- ☐ FNS-906 [Grant Program Accounting System & Financial Capability Questionnaire](#) (Appendix B)
- ☐ Negotiated Indirect Cost Rate Agreement (PDF - Upload using the “Add Attachments” button under SF-424 item #15)

## Application Checklist (continued)

When applicable, application packages are required to include the following documents:

- ☐ AD-3030 – [Representations Regarding Felony Conviction and Tax Delinquent Status for Corporate Applicants \(fillable PDF in Grants.gov\)](#)
- ☐ AD-1047 – [Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions](#)
- ☐ AD-1048 – [Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions](#)
- ☐ AD-1049 – [Certification Regarding Drug-Free Workplace Requirements \(Grants\) Alternative I – For Grantees Other Than Individuals](#)
- ☐ AD-1050 – [Certification Regarding Drug-Free Workplace Requirements \(Grants\) Alternative II – For Grantees Who Are Individuals](#)
- ☐ AD-1052 – [Certification Regarding Drug-Free Workplace State and State Agencies, Federal Fiscal Year](#)
- ☐ AD-3031 – [Assurance Regarding Felony Conviction or Tax Delinquent Status For Corporate Applicants](#)

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# I. PROGRAM DESCRIPTION & OBJECTIVES

## Program Description

### Introduction

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), is a federal nutrition assistance program that serves low-income pregnant, postpartum, and breastfeeding women, infants, and children up to five years old who are at nutritional risk. WIC provides nutritious foods, nutrition education including breastfeeding promotion and support, and referrals to health and other social services to participants in all 50 states, 33 Indian Tribal Organizations, American Samoa, the District of Columbia, Guam, the Commonwealth Islands of the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands.

As the WIC transition to electronic benefit transfers (EBT) reaches completion, it seems appropriate to look to the next opportunity to improve the participant experience. Households that participate in WIC should have the opportunity to shop for foods, especially those needed to address nutritional deficits, the way others shop for food, by ordering online. In addition, the current events of COVID-19 have enabled USDA to push through many of the challenges experienced in the Supplemental Nutrition Assistance Program (SNAP) online ordering pilot quickly and efficiently. In a similar way, this grant will assist USDA in identifying and solving challenges to develop best practices for moving this model to the WIC program.

This is an announcement of the availability of funds for a one-time initiative cooperative agreement for fiscal years (FYs) 2020-2023 with an entity (i.e., a research institute that is public, private, or nonprofit; an accredited college or university; or a public health organization or program) that meets the technical requirements outlined in this RFA. In this funding cycle, USDA anticipates awarding up to \$2,500,000 to one selected applicant. The recipient of this cooperative agreement is referred to in this document as the Grantee.

The Grantee must work toward implementation of online ordering in WIC through the completion of the objectives described in this RFA. The Grantee must complete all objectives of this project for online ordering *with both in-store and online transactions*, and must consider both online and offline EBT systems. For the purpose of this RFA, “online ordering” means the process a customer uses to select food items for purchase via a web-based ordering system, platform, or site. “Transaction” means the process by which a WIC participant “pays” for supplemental foods with WIC benefits (e.g., curbside or at the point of delivery via a mobile POS, or fully online via the payment section of the online ordering system). Additional details on WIC requirements related to online ordering and transactions are included in the “Background” section that follows.

The objectives of this RFA, at a high level, are:

- 1) Conducting a study to determine options and recommendations for implementing online ordering (both with in-person and online transactions) in WIC in a manner that is consistent nationwide and results in secure transactions.
- 2) Using the results of the study, develop a plan to implement online ordering in WIC that includes actions that must be taken by key stakeholders before online ordering can be implemented.
- 3) Developing documents and other resources identified in the study that are necessary to implement online ordering in WIC, including an assessment of existing WIC EBT Operating Rules and Technical Implementation Guide for potential changes.

- 4) Developing and managing competitive sub-grant awards to a maximum of five WIC State agencies, which will use the implementation plan and related documentation to work toward implementation of online ordering.
- 5) Developing and implementing a plan to assess State agency sub-grantee progress toward implementation of online ordering.
- 6) Developing a report based on the sub-grantee assessments that outlines successes, remaining barriers, recommendations for overcoming such barriers, and cost estimates for all options presented, by stakeholder.

At least 50 percent of these funds shall be awarded as sub-grants through a competitive process to WIC State agencies for the purpose of implementing online ordering. No more than five sub-grants will be awarded. The Grantee will carry out the FNS-approved competitive award process to select sub-grantees, design and conduct assessments of each sub-grantee's online ordering project, and produce a report to FNS on findings and recommendations.

The legislative authority for this grant announcement is contained in the Child Nutrition Act of 1966, as amended through P.L. 111-296, effective December 13, 2010. Under this program, subject to the availability of funds, the Secretary of Agriculture may award competitive grants and cooperative agreements for the support of projects to improve the services of USDA food and nutrition assistance programs.

## **Purpose**

The purposes of this RFA are to:

- Provide background information and context related to the goals of this funding opportunity;
- Describe the type of cooperative agreement available;
- Describe which entities are eligible to apply for grant funds;
- Solicit funding applications from eligible entities;
- Describe the requirements for submitting a successful application;
- Describe how applications will be reviewed and selected; and,
- Describe the terms and conditions to which grantees must adhere.

This RFA intends to select one institution or organization (e.g. accredited college or university, non-profit research organization or center) to complete the six high level objectives of this project and to develop and deliver to FNS all associated activities, as described in this RFA. USDA FNS will work closely with the Grantee on this project. Additionally, the Grantee has the discretion to develop the competitive sub-grant in a manner that allows State agency sub-grantee subject matter experts (SMEs) to be involved during the study and/or the development of materials.

## **Background**

Established in 1974, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is administered by the Food and Nutrition Service (FNS) of the U.S. Department of Agriculture (USDA). WIC provides nutritious foods, nutrition education, and breastfeeding promotion and support, and referrals to health and other social services to participants at no charge. WIC serves low-income

pregnant, postpartum and breastfeeding women, infants, and children up to age five who are at nutritional risk.<sup>1</sup>

### WIC Participants

In April 2018, according to the WIC Participant and Program Characteristics Report (WIC PC 2018), 53% of WIC participants were children (ages 1 to 4), and infants and women accounted for 23.8% and 23.2% of participants, respectively. Women participants were categorized as pregnant (8.6%), postpartum (6.6%), or breastfeeding (8%). Most (84.6%) pregnant women receiving WIC were between 18 and 34 years of age. Among all WIC participants in WIC PC 2018 58.8% were identified as White only, 21.5% as Black or African American only, 8.9% as American Indian or Alaska Native only, and 4.6% as either Asian only or Native Hawaiian or Other Pacific Islander. In 2018, 41.3% of WIC participants were reported as Hispanic/Latino.<sup>2</sup>

### WIC Food Benefit Delivery

As of June 2020, 58 of 89 WIC State agencies have statewide Electronic Benefit Transfer (EBT) systems. Another 23 are in the process of implementation, and nine are planning for EBT implementation. As of June 2020, over 67% of WIC participants are receiving benefits via EBT and over 68% of the authorized vendors are processing WIC EBT. The Healthy Hunger-Free Kids Act of 2010 (HHFKA) amended provisions of the Child Nutrition Act (CNA) of 1966 (42 U.S.C. 1771 et seq.),<sup>3</sup> requiring that by October 1, 2020 all State agencies implement statewide EBT systems.

Once the transition to EBT is complete nationwide, all WIC State agencies will operate one of two EBT payment processing types: online or offline. An offline system uses a WIC EBT card with an embedded smart chip and requires vendors to submit claim files to the State agency and/or the EBT processor for settlement. An online system uses a WIC EBT card with a magnetic stripe; transactions are completed using the exchange of real-time messages between vendor Point of Service Device (POS) and the EBT processor.

Despite the differences between the technology used for online and offline EBT systems, the details of the WIC transaction at the register are similar. In a WIC EBT transaction, Universal Product Codes (UPCs) and/or Price Look-Up Codes (PLUs) are scanned and assessed against a WIC State agency's Authorized Product List (APL). If the scanned food items are authorized on the APL and available on the household's prescription benefit balance, the purchases are approved and the benefit balance on the EBT card is reduced to reflect the use of the benefits.

### Online Ordering in WIC

The retail grocery industry has changed over the past several years. Online shopping has become an increasingly common method for purchasing groceries. Over the past few years, USDA FNS's Supplemental Nutrition Assistance Program (SNAP) has been working toward online ordering with an online transaction to expand the Program's reach. Similar to the goals of the SNAP Online pilot, pursuing online ordering in WIC will ensure that WIC participants have access to a broader array of

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<sup>1</sup> Food and Nutrition Service (2014). "Nutrition Program Facts: WIC – The Special Supplemental Nutrition Program for Women, Infants and Children." United States Department of Agriculture. <http://www.fns.usda.gov/sites/default/files/WIC-Fact-Sheet.pdf>,

<sup>2</sup> Kline, N., Thorn, B., Bellows, D., Wroblewska, K., & Wilcox-Cook, E. (2020). WIC Participant and Program Characteristics 2018. Alexandria, VA: U.S. Department of Agriculture, Food and Nutrition Service. Project Officer: Grant Lovellette.

<sup>3</sup> HHFKA, Public Law 111-296 Healthy Hunger-Free Kids Act of 2010 (HHFKA) amended provisions of the Child Nutrition Act (CNA) of 1966 (42 U.S.C. 1771 et seq.)

shopping options and are not left behind as the industry continues to innovate. While the WIC Program currently does not allow for online transactions, online ordering with in-person payment is allowable; and, prudent long-term Program planning would include identifying ways for online transactions in the future.

Online shopping has the potential to enhance the WIC shopping experience for participants in many ways, including the added benefit of providing access to those with limited transportation or other issues impeding participant's ability to physically go to a grocery store.

Although online ordering is currently allowable under WIC regulations, online transactions are not currently allowed. WIC regulations require that a WIC shopper (participant, parent or caretaker of an infant or child participant, or proxy) sign a food instrument in the presence of the cashier, a requirement from when food instrument specifically referred to paper vouchers that required wet signatures. In EBT systems, a Personal Identification Number (PIN) is required to be used in lieu of a signature. WIC regulations still require PIN entry occurs in the presence of a cashier.

Although online ordering is allowed with a transaction in the presence of a cashier, it is not yet widely available to WIC participants. The Grantee will do work necessary to move toward broad availability of online ordering in WIC, as well as work to prepare for when online transactions become allowable in the Program. Key stakeholders in WIC vendor management and EBT include, but are not limited to: USDA FNS, WIC State agencies, WIC local agencies and clinics, WIC EBT processors, third party processors, and WIC authorized vendors and their system providers.

## Key Objectives

In the interest of providing the best possible customer service to participants, FNS strives to foster innovation and reduce barriers to WIC Program services, including access to WIC supplemental foods. This grant announcement supports the WIC Program through building the capacity to implement online ordering nationwide. Increasing access to online ordering is particularly important to rural communities, communities served by stores with limited stock of fresh foods, and populations facing barriers to accessing traditional retail grocery stores (e.g., participants with disabilities, participants without transportation).

Below is a list of high level WIC Program objectives for this grant announcement, which is aligned with the Activities/Indicators Tracker beginning on page 19 of this RFA. The Grantee must complete the objectives of this RFA for both in-person and online transactions, and must consider both online and offline EBT systems, as described above.

| # | Objective                                                                                                                                                                                                                                   |
|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Conduct a study to determine options and recommendations for implementing online ordering (both with in-person and online transactions) in WIC in a manner that is consistent nationwide and results in secure transactions.                |
| 2 | Using the results of the study, develop a plan to implement online ordering in WIC that includes actions that must be taken by key stakeholders before online ordering can be implemented.                                                  |
| 3 | Develop documents and other resources identified in the study that are necessary to implement online ordering in WIC, including an assessment of existing WIC EBT Operating Rules and Technical Implementation Guide for potential changes. |

|   |                                                                                                                                                                                                                |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 | Develop and manage competitive sub-grant awards to a maximum of five WIC State agencies, which will use the implementation plan and related documentation to work toward implementation of online ordering.    |
| 5 | Develop and implement a plan to assess State agency sub-grantee progress toward implementation of online ordering.                                                                                             |
| 6 | Develop a report based on the sub-grantee assessments that outlines successes, remaining barriers, recommendations for overcoming such barriers, and cost estimates for all options presented, by stakeholder. |

## II. FEDERAL AWARD INFORMATION

The grant will be awarded on a competitive basis, subject to the availability of federal funds. Approximately \$2,500,000 is available for funding this opportunity. FNS will accept only one application package per applicant. The Grantee will be responsible for utilizing their awarded amount to meet the objectives of this RFA listed above.

Please note: Grant awards are subject to the availability of funding and/or appropriations of funds. FNS reserves the right to use this solicitation and competition to award additional grants this year or the subsequent fiscal year, should additional funds become available.

### Cooperative Agreement

This grant will be awarded in the form of a cooperative agreement. This agreement is a legal instrument reflecting a relationship between the federal government and the Grantee. Cooperative agreements will allow more involvement and collaboration by FNS in the project compared to a grant, and they provide less direction of project activities than a contract. The roles and responsibilities of both the Grantee and FNS will be stated in the terms and conditions of the cooperative agreement.

FNS's involvement in this cooperative agreement will largely entail serving as subject matter experts (SMEs) to provide key input and information to the team, reviewing and providing feedback on deliverables, and providing input on the sub-grantee process and selections. FNS will approve both the sub-grantee selection criteria and final selection of State agency sub-grantees.

### Purpose of Cooperative Agreement

To the extent practicable, FNS is available to provide policy and technical consultation to the Grantee on an as needed basis, preferably through a series of pre-planned feedback sessions and/or standing meetings/calls. FNS will comment on major project aspects and issues in advance of their implementation in a manner and timeframe agreed upon between the Grantee and FNS. At FNS's discretion, FNS involvement with the Grantee may include:

1. Providing comments on and having ongoing conversations with the Grantee regarding plans to meet this RFA's requirements;
2. Reviewing administration, dissemination, and evaluation plans associated with projects performed at WIC State agencies funded by this cooperative agreement;
3. Reviewing and/or co-authoring documents;
4. Receiving files for all Grantee-produced documents (e.g., study plan, resources, Request for Proposal (RFP) for sub-grantees, final report), as well as data collected (e.g., raw data from assessment of sub-grantee projects) as a result of this cooperative agreement.

## **Funding**

Funding of this award will be provided through the Grant Award/Letter of Credit process. The award will be made via cooperative agreement between FNS and the Grantee. The grant will be awarded on a competitive basis, subject to the availability of federal funds. Approximately \$2,500,000 is available to one selected eligible entity for funding to accomplish the goals and deliverables described in this RFA. The award will be on a competitive basis, based on the review of all proposals according to the technical evaluation criteria outlined in this RFA.

FNS may elect to fund an application in its entirety, may limit funding to specific items of the proposals contained in an application, and/or may negotiate with proposed applicants to stay within available funding.

The Grantee will be responsible for utilizing their awarded amount to carry out a competition to award sub-grants to WIC State agencies, in collaboration with the Grantee, to implement the objective of this project.

## **Award Period and Project Timeline**

FNS plans to announce and award funds for a period of performance beginning no later than September 30, 2020 and ending no later than September 30, 2023. The Grantee will be allowed to use the funds consistent with the plans it submits with its application. Applicants may apply for funds for **three years** with an end date no later than September 30, 2023.

## **Program Specific Requirements**

Applicants must provide a plan that demonstrates that they meet the following requirements:

1. Experience with and/or capacity for designing, implementing, and coordinating a competitive RFP process that solicits proposals from WIC State agencies. All applications must clearly articulate an administration plan for awarding competitive sub-grants to WIC State agencies;
2. Experience conducting high-quality evaluations related to implementing technological innovation in public health, as evidenced by reports, publications, and/or other materials (while an evaluation plan is not required in the proposal to this RFA, the Grantee will be required to submit a formal evaluation plan to FNS once competitive sub-grants are awarded to State agencies);
3. Knowledge of or capacity to quickly learn about the WIC Program and WIC EBT transactions (from both a policy and technical standpoint).
4. Experience working with WIC State agencies and using or applying the WIC EBT Operating Rules and Technical Implementation Guide.
5. Knowledge of and/or experience in implementing technological innovations in public health programs, as evidenced by previous projects that include research on technical feasibility, policy options and implications, and development of and/or implementation of technical specifications and/or system requirements;
6. Experience with and/or capacity for providing high-quality, evaluation-based technical assistance to WIC and/or other public health agencies and key stakeholders;
7. Description of the expected set of final deliverables that will be submitted and/or published by the Grantee during and at the end of the Cooperative Agreement. All reports or products generated by efforts funded through this Cooperative Agreement are subject to review by FNS before publication. This includes review of manuscripts (with inclusion of the FNS point-of-contact as a co-author where appropriate based on authorship guidelines) before submission, communications materials meant for general and WIC audiences about the project and findings, and other items;

8. A dissemination plan that presents broad dissemination strategies as well as specific information on how products of research and/or resources developed as deliverables could be disseminated to and used with key stakeholders;
9. All applications must address how the findings will be disseminated to stakeholder (policy officials, State and local agencies and their staff) and the academic community, and dissemination plans must meet the requirements as specified in this RFA.
10. All applications must provide a clear timeline for carrying out all proposed activities and demonstrate evidence of planning to meet other requirements as specified in this RFA.

**The Grantee shall:**

1. Select and hire appropriately credentialed personnel to manage and operate project components. This must include staff who are able to conduct research, manage a large project, manage a large budget, develop a sub-grant project, and staff who have appropriate WIC and/or EBT expertise to complete the objectives of the grant;
2. Delegate responsibilities to staff or other partners as appropriate;
3. Conduct appropriate training and provide necessary support for staff and other partners to successfully handle project responsibilities. These responsibilities include, but are not limited to:
  - a. Providing data on participating WIC agencies and organizations to FNS;
  - b. Coordinating site visits to participating sites for FNS if requested; and,
  - c. Fulfilling obligations to FNS.
4. Obtain FNS approval on the management plan and evaluation plans prior to implementing;
5. Keep FNS informed on critical junctures and checkpoints after award of cooperative agreement, including development and operationalization of management plan, budget, administration plan, dissemination plan submitted in preliminary form in the application, as well as evaluation plans once developed after award of sub-grants, and the management and staffing plans discussed in this RFA;
6. Meet specific obligations and approval points as specified by the cooperative agreement;
7. Submit timely progress reports, financial reports, and annual reports throughout the award period, and submit a final progress report and final financial report;
8. Attend progress meetings via teleconference as needed;
9. Ensure that WIC State agencies account for project funds separately from federal food and nutrition assistance administrative funds and establish financial and managerial reporting and controls to assure project funds are not commingled or used inappropriately. A separate and distinct audit trail must be established and maintained for the expenditure of project funds. This audit trail must clearly demonstrate that funds are used solely for project purposes;
10. Provide FNS with any data files created and used to generate reports, presentations, and publications resulting from this grant. Such data shall be accompanied with analytic code, output files, and codebooks and other applicable documentation sufficient for FNS to replicate analyses;
11. Carry out all activities necessary to fulfill the items as described in the “Purpose of Cooperative Agreement” section;
12. Coordinate other grant-related dissemination activities;

13. For internal use and informational purposes, provide FNS with an electronic copy of all manuscripts resulting from this work at the time of submission for publication and in final form when published.

### **Regular Conference Calls**

Monthly conference calls shall provide an overview of the activities conducted during the previous month, major accomplishments with completion dates and budget, deviations from the proposed plan, difficulties encountered, solutions developed to overcome difficulties, assistance needed from FNS on technical issues, and major planned activities for the next month. Should a major issue arise between calls, the Grantee should contact the FNS Grants and Program Officers immediately. During key stages in the project, conference calls with FNS shall occur weekly; i.e. at the start of the agreement, leading up to the release of the RFP and selecting sub-grantees, etc. The Grantee shall provide FNS with an agenda 3 business days prior to each call. The Grantee shall also prepare minutes for each call and distribute to FNS no later than 5 business days after the call.

### **Interim Deliverables**

Once awarded, the Grantee will provide quarterly progress reports and financial reports to identified FNS contact persons. The Grantee will also produce an annual report (not to exceed 10 pages) for FNS to publish. Annual reports will include a description of the focus area, the implemented projects by sub-grantees, and status of implementation and evaluation for that year and, in subsequent years, since the last annual reporting. The annual report will be due by December 31 of each year.

### **Final Deliverables**

The project description shall address how the findings will be disseminated to program stakeholders. At a minimum, the Grantee shall prepare and deliver to FNS one final report integrating all the information learned from all work funded by this project in an acceptable format for FNS to publish. All materials must be 508-compliant. Please see [www.section508.gov](http://www.section508.gov) for more information.

### **Allowable Costs**

Among other costs, budgets may include expenses related to personnel, contractors, equipment and supplies, meeting expenses, travel, and trainings.

**Equipment and Supplies:** Expenditures for both equipment (i.e., items of personal property having a useful life of more than one year and a cost of \$5,000 or more) and supplies are allowable expenses for the Grantee and sub-grantees. Equipment and supplies purchased using USDA WIC Online Ordering Initiative grant funds must be used during the grant period for the sole purpose of accomplishing the stated project objective. If purchased equipment or supplies are not fully dedicated to the grant project objective, including beyond the grant period end date, the applicant must determine what percentage of the good's time or space will be dedicated to project activities when developing a proposed budget. WIC State agencies must appropriately account for these funds.

**Food Expenses:** Food purchases should be covered by State agencies' food grant and accounted for appropriately.

### **III. ELIGIBILITY INFORMATION**

#### **Eligible Applicants**

Eligible entities: A research institute that is public, private, or nonprofit; an accredited college or university; or a public health organization or program that meets the technical requirements outlined in this RFA.

In addition, applicants must meet the following requirements: (1) have experience in: (i) designing, implementing, and coordinating a competitive RFP process, (ii) conducting high-quality evaluations related to implementing technological innovation in public health, and (iii) providing high-quality technical assistance to WIC and/or other public health agencies and key stakeholders; (2) knowledge of or capacity to quickly learn about the WIC Program and WIC EBT transactions (from both a policy and technical standpoint); and (3) experience working with WIC State agencies and using or applying the WIC EBT Operating Rules and Technical Implementation Guide.

A nonprofit entity is any organization or institution with IRS 501(c) status or accredited institutions of higher education, where no part of the net earnings benefit any private shareholder or individual. All applicant organizations must be domestic entities and shall be owned, operated, and located within the 50 States, 33 Indian Tribal Organizations that administer the WIC Program, American Samoa, the District of Columbia, Guam, the Commonwealth of the Northern Mariana Islands, Puerto Rico, or the United States Virgin Islands.

#### **Cost Sharing or Matching Considerations**

There are no cost sharing or matching requirements. Any matching or cost sharing offered is at the discretion of the Applicant. Any cost sharing or matching may be presented in a percentage amount, but applicants must also indicate the total match in dollars in the budget and budget narrative.

#### **Other Eligibility Criteria**

Suspended or debarred organizations are ineligible to submit applications in response to this grant solicitation. Only one application per agency will be considered.

#### **Pre-Award Screening Requirements**

In reviewing applications in any discretionary grant competition, prior to making a federal award, Federal Awarding Agencies, in accordance with 2 CFR 200.205, are required to review information available through any OMB-designated repositories of government-wide eligibility qualifications or financial integrity information, and to have in place a framework for evaluating the risks posed by applicants before they receive federal awards. The evaluation of the information obtained from the designated repository systems and the risk assessment may result in FNS imposing special conditions that correspond to the degree of risk assessed. FNS review of risk posed by applicants will be based on the following:

1. SAM.gov, the *System for Award Management*, the Official U.S. Government system that consolidated the capabilities of CCR/FedReg, ORCA, and EPLS.
2. FAPIIS, the *Federal Awardee Performance and Integrity Information System* that has been established to track contractor misconduct and performance.

3. Dun & Bradstreet, the system where applicants establish a DUNS number that is used by the federal government to better identify related organizations that are receiving funding under grants and cooperative agreements.
4. U.S. Department of Agriculture, AD-3030, Representations Regarding Felony Conviction and Tax Delinquent Status for Corporate Applicants.

Applicants must also respond to the application assessment questions to allow FNS to evaluate aspects of the applicant's financial stability, quality of management systems, and history of performance, reports and findings from audits. A questionnaire containing these questions has been provided to facilitate the process and can be found in Appendix B. Applicants must answer all the application questions. While answering "yes" may be an indicator of risk, the consideration and evaluation of these questions is only an indicator of potential risk and may or may not result in additional oversight requirements or special conditions placed on an award should an award be made. Decisions regarding additional oversight requirements will take into consideration the total number of risks identified.

The evaluation of the information obtained from the designated systems and the risk assessment questionnaire may result in FNS imposing special conditions or additional oversight requirements that correspond to the degree of risk assessed.

## **Acknowledgement of USDA Support**

As outlined in 2 CFR 415.2, grant recipients shall include acknowledgement of USDA FNS support on any publications written or published with grant support and, if feasible, on any publication reporting the results of, or describing, a grant-supported activity. Recipients shall include acknowledgement of USDA FNS support on any audiovisual which is produced with grant support and which has a direct production cost of over \$5,000.

- When acknowledging USDA support, use the following language: "This material is based upon work that is supported by the Food and Nutrition Service, U.S. Department of Agriculture." Grantees should follow the [USDA Visual Standards Guide](#) when using the USDA logo.
- Grant recipients *may* be asked to host USDA officials for a site visit during the course of their grant award. All costs associated with the site visit will be paid for by USDA and are not expected to be included in grant budgets.

## **IV. APPLICATION AND SUBMISSION INFORMATION**

### **Address to Request Application Package**

Applicants may request a paper copy of this solicitation and required forms by contacting:

Carla Garcia, Grant Officer  
Grants and Fiscal Policy Division  
U.S. Department of Agriculture, FNS  
[Carla.Garcia@usda.gov](mailto:Carla.Garcia@usda.gov)

### **Content and Form of Application Submission**

FNS strongly encourages eligible applicants interested in applying to this grant opportunity to adhere to the following applicant format. The proposed project plan should be presented on 8 ½" x 11" white paper with at least 1-inch margins on the top and bottom. All pages should be single-spaced, in 12-

point font. The project description with relevant information should be captured on no more than 30 pages, not including the cover sheet, table of contents, resumes, letter of commitment(s), endorsement letter(s), budget narrative(s), appendices, and required forms. All pages, excluding the form pages, must be numbered.

### **Cover Sheet**

The cover page should include, at a minimum:

- Applicant's name and mailing address.
- Primary contact's name, job title, mailing address, phone number, and e-mail address.
- Grant program title and subprogram title (if applicable).

### **Table of Contents**

Include relevant sections and subsections as well as associated page numbers

### **Application Project Summary**

The application should clearly describe the proposed project activities and anticipated outcomes that would result if the proposal were to be funded.

### **Project Narrative**

The project narrative should clearly identify what the applicant is proposing and how it will address the solution, the expected results and/or benefits once the solution is achieved, and how it will meet the RFA program scope and objectives. The proposed project methodology should describe the project design, address program specific methodology needs, procedures, timetables, monitoring/oversight, and the organization's project staffing. The management plan should describe administrative procedures, staffing, quality assurance, and other activities as described below, including any additional specific RFA requirements.

The project narrative should also clearly identify what the applicant is proposing for the competitive RFP process and how it will solicit, evaluate, and select sub-grant proposals submitted by WIC State agencies. The applicant will also describe its capacity to provide evaluation-based technical assistance to WIC State agency sub-grant recipients. The project narrative should also indicate plans for disseminating all project deliverables.

In preparing the project narrative, provide the information requested below, in the order presented below.

- **Introduction:** Provide background information on the proposed team's experience performing research and evaluation and conducting technical projects, as well as plans for administering a competitive sub-grant award system for WIC State agencies. Please note any successes, lessons learned, or challenges from previous research and evaluation efforts.
- **Background:** The Background will both describe what is known and highlight what is not known about this project.
- **Objectives, Activities, and Timeline:** Clearly state project objectives, use descriptive statements that specifically discuss what you hope to accomplish, include specific activities you will perform to accomplish the project objectives as stated in the Purpose of Cooperative Agreement section, and include deadlines. All objectives should lead to a clearly stated goal relevant to this RFA. Your project timeline should start on the award date and end 36 months later. For planning purposes, use the date of award as planned and include dates for important project milestones and deadlines and include dates for items described in the Purpose of Cooperative Agreement and Program Specific Requirements section.

- **Administration Plan:** Describe the team’s plan to administer a competitive RFP process that includes an overview of the procedures for developing the solicitation, promoting the solicitation among State agencies, and evaluation criteria for received proposals. Planned items that will be included in the solicitation beyond those stated in section I of the Purpose of Cooperative Agreement section of this RFA should be explained. The Applicant should also describe plans to manage and collaborate with sub-grant awardees.
- **Evaluation:** A key component of this work, once awarded, is evaluating implemented projects at WIC State agencies. The application should demonstrate the Applicant’s abilities in evaluating projects implemented and in practice. Please provide details of 2 to 3 evaluation projects previously performed.
- **Dissemination Plan:** Describe your plans for disseminating findings from and resources developed as a part of this grant. Describe specific plans to make project findings accessible to stakeholders, including USDA FNS, WIC State agencies, WIC authorized vendors, EBT processors and others identified throughout the course of this project. Indicate possible opportunities to present at conferences, participate in working groups, host roundtable discussions, and present webinars.
- **Technical Assistance Plan:** The Technical Assistance (TA) Plan should indicate the process, frequency, and mode by which the Grantee will interact with sub-grantees (individually or as a group) to provide assistance, including how sub-grantees will be able to request assistance and how requests for assistance will be managed. The plan should describe the personnel that will perform this function, as well as a process to document and track each technical assistance experience. The purpose of technical assistance is to support project objectives using knowledge gained and resources developed as a part of the study and implementation plan. Applicants should articulate a clear plan to communicate the RFP requirements, prior to award, to interested State agencies through webinars and individual technical assistance.
- **Management Plan:** Provide a clear description of the activities to be undertaken to manage the project to ensure that project activities are completed on time, within budget, and with quality results. Applicant should describe its organizational structure and identify the staff and/or contractors who will manage the project. Describe roles and responsibilities of these employees or contractors, as well as relevant qualifications and experience, and a level of effort specified for specific staff proposed. Note any relevant experience in managing similar activities. Explain contingency plans for staff turnover. Describe how quality assurance, recordkeeping, and accounting activities will be executed. Provide a clear description of how funds will be administered and distributed.

## Reports & Products Review

All reports or products generated by efforts funded through this cooperative agreement are subject to review by FNS before publication. This includes review of manuscripts (with inclusion of FNS points-of-contact as co-authors, where appropriate, based on authorship guidelines) before submission to peer-review for scientific journals, communications materials meant for general and WIC audiences about the research, and other items. Project timelines should factor in review of reports and products by FNS, with 3 weeks for items 30 pages or less, and 6 weeks for items greater than 30 pages in length.

## Activities/Indicators Tracker

By the end of Year 1, at a minimum, the Grantee must deliver a Final Study Report, a draft implementation plan, and a draft plan for the competitive sub-grantee awards. By the end of Year 2, at a minimum, the Grantee must deliver a final Assessment of EBT Operating Rules and Technical Implementation Guide and final resources for all key stakeholders; additionally, sub-grantee projects must be underway.

| <b>Objective 1:</b> Conduct a study to determine options and recommendations for implementing online ordering (both with in-person and online transactions) in WIC in a manner that is consistent nationwide and results in secure transactions.                                                                                                                         |                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Activity                                                                                                                                                                                                                                                                                                                                                                 | Indicator                                                                                                                                                                                                                                                    |
| Develop study plan.                                                                                                                                                                                                                                                                                                                                                      | Final study plan accepted by FNS.                                                                                                                                                                                                                            |
| Conduct study according to approved plan. Study must include cost considerations for implementation plans for all stakeholders.                                                                                                                                                                                                                                          | Quality of information gathered, as determined by sources used and presentation of options and recommendations. Completeness, as determined by all appropriate stakeholders being included and all costs/other considerations being addressed appropriately. |
| Deliver study report, which must include cost estimates for all options presented, by stakeholder.                                                                                                                                                                                                                                                                       | Final study report accepted by FNS. Completeness, as determined by all appropriate stakeholders being included and all costs/other considerations being addressed appropriately.                                                                             |
| <b>Objective 2:</b> Using the results of the study, develop a plan to implement online ordering in WIC that includes actions that must be taken by key stakeholders before online ordering can be implemented.                                                                                                                                                           |                                                                                                                                                                                                                                                              |
| Activity                                                                                                                                                                                                                                                                                                                                                                 | Indicator                                                                                                                                                                                                                                                    |
| Develop online ordering implementation plan that outlines goals and activities (with timelines) to be carried out, as well as key stakeholders, and resources to be developed as a part of Objective 3.                                                                                                                                                                  | Final implementation plan accepted by FNS.                                                                                                                                                                                                                   |
| Develop a dissemination plan for resources to be developed.                                                                                                                                                                                                                                                                                                              | Quality and reach of plan.                                                                                                                                                                                                                                   |
| <b>Objective 3:</b> Develop documents and other resources identified in the study that are necessary to implement online ordering in WIC, including an assessment of existing WIC EBT Operating Rules and Technical Implementation Guide for potential changes.                                                                                                          |                                                                                                                                                                                                                                                              |
| Activity                                                                                                                                                                                                                                                                                                                                                                 | Indicator                                                                                                                                                                                                                                                    |
| Assess existing WIC EBT Operating Rules and Technical Implementation Guide for potential changes/updates. This assessment should include recommended edits to both documents to support online ordering and online transactions (with the recommendations clearly labeled to identify which goal—ordering or transactions—would be supported by the recommended change). | Thoroughness of assessment and quality of recommendations, as determined by the presentation of information and key analyses.                                                                                                                                |
| Develop resources for each key stakeholder group, as prescribed in the implementation plan in Objective 2.                                                                                                                                                                                                                                                               | Number and quality of final resources accepted by FNS.                                                                                                                                                                                                       |
| Disseminate resources to key WIC stakeholders.                                                                                                                                                                                                                                                                                                                           | Quality and reach of resource dissemination.                                                                                                                                                                                                                 |

| <b>Objective 4:</b> Develop and manage competitive sub-grant awards to a maximum of five WIC State agencies, which will use the implementation plan and related documentation to work toward implementation of online ordering.    |                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| Activity                                                                                                                                                                                                                           | Indicator                                                                                      |
| Develop competitive RFP that clearly states the FNS-approved selection criteria for sub-grantees.                                                                                                                                  | Final RFP accepted by FNS.                                                                     |
| Disseminate and promote award opportunity, offering guidance to potential applicants.                                                                                                                                              | Number of responsive applications received and amount of high quality guidance provided.       |
| Evaluate the applications received and recommend selections.                                                                                                                                                                       | Quality of recommendations, as determined by the presentation of information and key analyses. |
| Award RFP and fund the WIC State agencies selected.                                                                                                                                                                                | Number of WIC State agencies awarded and funded.                                               |
| <b>Objective 5:</b> Develop and implement a plan to assess State agency sub-grantee progress toward implementation of online ordering.                                                                                             |                                                                                                |
| Activity                                                                                                                                                                                                                           | Indicator                                                                                      |
| Develop a basic research model to evaluate online ordering.                                                                                                                                                                        | Final research model accepted by FNS.                                                          |
| Secure Institutional Review Board (IRB) approvals, as necessary.                                                                                                                                                                   | IRB approval secured, as necessary.                                                            |
| Develop or identify validated instruments and other methods of data collection.                                                                                                                                                    | Number of instruments identified.                                                              |
| Support sub-grantees in implementing online ordering.                                                                                                                                                                              | Quality and number of technical assistance experiences.                                        |
| Track the implementation process of online ordering by each State Agency sub-grantee, including use of resources, associated costs, and any challenges encountered.                                                                | Number of online ordering processes implemented.                                               |
| Carry out data collection to inform evaluation.                                                                                                                                                                                    | Amount and quality of data collected.                                                          |
| Analyze data collected.                                                                                                                                                                                                            | Qualitative analysis of data collected.                                                        |
| <b>Objective 6:</b> Develop a report based on the sub-grantee assessments that outlines successes, remaining barriers, recommendations for overcoming such barriers, and cost estimates for all options presented, by stakeholder. |                                                                                                |
| Activity                                                                                                                                                                                                                           | Indicator                                                                                      |
| Develop a report based on assessment that outlines successes, remaining barriers, and recommendations for overcoming such barriers.                                                                                                | Final report accepted by FNS.                                                                  |
| Disseminate final report to key WIC stakeholders.                                                                                                                                                                                  | Quality and reach of dissemination.                                                            |

## Application Budget Narrative

The budget narrative should correspond with the proposed project narrative and application budget. The narrative must justify and support the bona fide needs of the budget's direct cost. If the budget includes indirect costs, the applicant must provide a copy of its most recently approved federal indirect cost rate agreement. All non-profit organizations must include their 501(c)(3) determination letter issued by the Internal Revenue Service (IRS). **All funding requests must be in whole dollars.**

## Indirect Cost Rate

A current Negotiated Indirect Cost Rate Agreement (NICRA), negotiated with a federal negotiating agency, should be used to charge indirect costs. Indirect costs may not exceed the negotiated rate. If a NICRA is used, the percentage and base should be indicated. If the applicant does not have, and has never been approved for, a NICRA, they may charge up to 10% de minimis. In this instance, the applicant must indicate they are requesting the de minimis rate. An applicant may elect not to charge indirect costs and, instead, use all grant funds for direct costs. If indirect costs are not charged, the phrase "none requested" should be stated in the budget narrative. For questions related to the indirect cost rate, please work with the Grant Officer as noted in this RFA.

## Required Grant Application Forms

Please refer to the [Application Checklist](#) for a list of required grant forms.

## Submission Date

Complete grant applications must be uploaded to [www.grants.gov](http://www.grants.gov) by 11:59 PM, Eastern Standard Time (EST), on **August 19, 2020**.

- Applications must be submitted via [Grants.gov](http://Grants.gov). Mailed, e-mailed, or hand-delivered application packages will not be accepted.
- Late or incomplete applications will not be considered.
- FNS will not consider additions or revisions to applications unless they are submitted via Grants.gov by the deadline. No additions or revisions will be accepted after the deadline.
- If multiple application packages are submitted through Grants.gov by the same applicant in response to this solicitation, FNS will accept the latest application package successfully. All other packages submitted by the applicant will be removed from this competition.

FNS strongly encourages applicants to begin the registration process at least four weeks before the due date and to submit applications to Grants.gov at least one week before the deadline to allow time to troubleshoot any issues, should they arise. Please note that upon submission, Grants.gov may send multiple confirmation notices; applicants should ensure receipt of confirmation that the application was accepted. Applicants experiencing difficulty submitting applications to Grants.gov should contact the Grant Officer noted in the [Agency Contacts](#) section of this RFA. FNS will evaluate submission issues on a case-by-case basis.

## Preparing for Electronic Application Submission through Grants.gov

Applicants must register with [Grants.gov](http://Grants.gov), Dun and Bradstreet, and Sam.gov in order to submit an application to FNS via Grants.gov, as required. FNS strongly encourages applicants to begin the registration process at least four weeks before the due date.

In order to submit an application, you must:

1. Obtain a DUNS number

- If your organization does not have a DUNS number, or if you are unsure of your organization's DUNS, contact Dun & Bradstreet at <https://fedgov.dnb.com/webform/> or by calling 1-888-814-1435, Monday thru Friday, 8am-9pm ET. There is no fee associated with obtaining a DUNS number.
- It may take 2-3 business days to obtain a DUNS number.

## 2. Register in the System for Award Management (SAM)

- SAM.gov combines Federal procurement systems and the Catalog of Federal Domestic Assistance into one system. For additional information regarding SAM.gov, see the following link: <https://beta.sam.gov/>
- Must have your organization's DUNS, entity's Tax ID Number (TIN), and taxpayer name (as it appears on last tax return). **It may take 3-5 business days to register in SAM.gov; however,** in some instances the SAM process to complete the migration of permissions and/or the renewal of the entity record will require **5-7 days or more**.
- All applicants must have current SAM status at the time of application submission and throughout the duration of a Federal Award in accordance with two CFR Part 25.
- We strongly encourage applicants to begin the process **at least 3 weeks** before the due date of the grant solicitation.

## 3. Create a Grants.gov Account:

The next step in the registration process is to create an account with Grants.gov. Applicants must know their organization's DUNS number to complete this process. Completing this process automatically triggers an email request for applicant roles to the organization's E-Business Point of Contact (EBiz POC) for review. The EBiz POC is a representative from your organization who is the contact listed for SAM.gov. To apply for grants on behalf of your organization, you will need the Authorized Organizational Representative (AOR) role.

For more detailed instructions about creating a profile on Grants.gov, refer to <https://www.grants.gov/web/grants/applicants/organization-registration/step-3-username-password.html>.

## 4. Authorize Grants.gov Roles:

After creating an account on Grants.gov, the EBiz POC receives an email notifying them of your registration and request for roles. The EBiz POC will then log in to Grants.gov and authorize the appropriate roles, which may include the AOR role, thereby giving you permission to complete and submit applications on behalf of the organization. You will be able to submit your application online any time after you have been approved as an AOR. For more detailed instructions about creating a profile on Grants.gov, refer to

<https://www.grants.gov/web/grants/applicants/organization-registration/step-4-aor-authorization.html>.

## 5. Track Role Status: To track your role request, refer to

<https://www.grants.gov/web/grants/applicants/organization-registration/step-5-track-aor-status.html>.

*Electronic Signature:* When applications are submitted through Grants.gov, the name of the organization's AOR that submitted the application is inserted into the signature line of the application, serving as the electronic signature. The EBiz POC **must** authorize individuals who are able to make

legally binding commitments on behalf of the organization as an AOR; **this step is often missed and it is crucial for valid and timely submissions.**

## How to Submit an Application via Grants.gov

Grants.gov applicants can apply online using Workspace. Workspace is a shared, online environment where members of a grant team may simultaneously access and edit different web forms within an application. For each funding opportunity announcement (FOA), you can create individual instances of a workspace. Below is an overview of applying on Grants.gov. For access to complete instructions on how to apply for opportunities, refer to:

<https://www.grants.gov/web/grants/applicants/apply-for-grants.html>

1. *Create a Workspace:* Creating a workspace allows you to complete it online and route it through your organization for review before submitting.
2. *Complete a Workspace:* Add participants to the workspace, complete all the required forms, and check for errors before submission.
3. *Adobe Reader:* If you decide not to apply by filling out web forms you can download individual PDF forms in Workspace so that they will appear similar to other Standard forms. The individual PDF forms can be downloaded and saved to your local device storage, network drive(s), or external drives, then accessed through Adobe Reader.

NOTE: Visit the Adobe Software Compatibility page on Grants.gov to download the appropriate version of the software at: <https://www.grants.gov/web/grants/applicants/adobe-software-compatibility.html>

4. *Mandatory Fields in Forms:* In the forms, you will note fields marked with an asterisk and a different background color. These fields are mandatory fields that must be completed to successfully submit your application.
  - *Complete SF-424 Fields First:* The forms are designed to fill in common required fields across other forms, such as the applicant name, address, and DUNS number. To trigger this feature, an applicant must complete the SF-424 information first. Once it is completed, the information will transfer to the other forms.
5. *Submit a Workspace:* An application may be submitted through workspace by clicking the Sign and Submit button on the Manage Workspace page, under the Forms tab. Grants.gov *recommends submitting your application package at least 24-48 hours prior to the close date to provide you with time to correct any potential technical issues that may disrupt the application submission.*
6. *Track a Workspace:* After successfully submitting a workspace package, a Grants.gov Tracking Number (GRANTXXXXXXXX) is automatically assigned to the package. The number will be listed on the Confirmation page that is generated after submission.

For additional training resources, including video tutorials, refer to:

<https://www.grants.gov/web/grants/applicants/applicant-training.html>

*Applicant Support:* Grants.gov provides applicants 24/7 support via the toll-free number 1-800-518-4726 and email at [support@grants.gov](mailto:support@grants.gov). If you are experiencing difficulties with your submission, it is

best to call the Grants.gov Support Center and get a ticket number. The Support Center ticket number will assist the Center with tracking your issue and understanding background information on the issue. For questions related to the specific grant opportunity, please contact the agency contacts for this opportunity, as listed [here](#).

### **Grants.gov Receipt Requirements and Proof of Timely Submission**

All applications must be received by August 19, 2020 Eastern time, as detailed [here](#). Proof of timely submission is automatically recorded by Grants.gov. An electronic date/time stamp is generated within the system when the application is successfully received by Grants.gov. The applicant AOR will receive an acknowledgement of receipt and a tracking number (GRANTXXXXXXXX) from Grants.gov with the successful transmission of their application. Applicant AORs will also receive the official date/time stamp and Grants.gov Tracking number in an email serving as proof of their timely submission.

When FNS successfully retrieves the application from Grants.gov and acknowledges the download of submissions, Grants.gov will provide an electronic acknowledgment of receipt of the application to the email address of the applicant with the AOR role. Again, proof of timely submission shall be the official date and time that Grants.gov receives your application. Applications received by Grants.gov after the established due date for the program will be considered late and will not be considered for FNS funding.

Applicants using slow internet, such as dial-up connections, should be aware that transmission could take some time before Grants.gov receives your application. Again, Grants.gov will provide either an error or a successfully received transmission in the form of an email sent to the applicant with the AOR role. The Grants.gov Support Center reports that some applicants end the transmission because they think that nothing is occurring during the transmission process. Please be patient and give the system time to process the application.

Additional Information on Grants.gov and the Registration Process:

### **NOTICE: Special Characters not Supported**

All applicants **MUST** follow grants.gov guidance on file naming conventions. To avoid submission issues, please follow the guidance provided in the grants.gov Frequently Asked Questions (FAQ):

Are there restrictions on file names for any attachment I include with my application package?

File attachment names longer than approximately 50 characters can cause problems processing packages. Please limit file attachment names. Also, do not use any special characters (examples: & – \* % / # ' -). This includes periods (.) and spacing followed by a dash in the file. To separate words in naming a file, use underscore, as in the following example: Attached\_File.pdf. Please note that if these guidelines are not followed, your application will be rejected. FNS will not accept any application rejected from [www.grants.gov](http://www.grants.gov) portal due to incorrect naming conventions.

Additional information and applicant resources are available at:

<https://www.grants.gov/web/grants/applicants/workspace-overview.html>

<https://www.grants.gov/web/grants/grantors/grantor-standard-language.html>

## V. APPLICATION REVIEW INFORMATION

### REVIEW CRITERIA

#### Evaluation of Grant Application Criteria

FNS will pre-screen all applications to ensure the applicants are eligible entities, are in compliance with all program regulations, and contain the required documents and information, including but not limited to the project and budget narratives and all supporting documentation. Complete applications will need to be submitted by eligible applicants, meet all other eligibility requirements stated in this RFA submitted on or before the required deadlines, and be in the required format. If an application does not include all appropriate information, FNS will consider the application to be non-responsible and will eliminate it from further evaluation. FNS will notify those applicants selected to receive an award.

### EVALUATION FACTORS AND CRITERIA

The following selection criteria will be used to evaluate applications for this RFA. The total number of possible points is 100.

| <b>Staffing</b>                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>25 Points</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Plan describes and clearly demonstrates: (1) the roles and responsibilities of key personnel and other partners and staff involved in the proposed project, (2) key personnel and their relevant education, skills, and experience as it relates to the WIC Program, WIC EBT transactions, and online ordering for their proposed roles on the project, and (3) staff experience with research, writing, critical analysis, and policy development. |                  |
| Documentation of the time commitment of key personnel is appropriate, complete, and sufficient for the project roles.                                                                                                                                                                                                                                                                                                                               |                  |
| <b>Basic Research Model</b>                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>10 Points</b> |
| Proposed plan includes a detailed framework of the intended research methodology and study plan that demonstrates expertise in research methodologies to evaluate outcomes.                                                                                                                                                                                                                                                                         |                  |
| Research model demonstrates relevant data collection, research, and project implementation tracking experience.                                                                                                                                                                                                                                                                                                                                     |                  |
| Proposed approach to disseminating insights and findings from work to key WIC stakeholders, as well as sharing resources, is sufficient.                                                                                                                                                                                                                                                                                                            |                  |
| <b>Sub-grant Competition, Collaboration, and Evaluation</b>                                                                                                                                                                                                                                                                                                                                                                                         | <b>15 Points</b> |
| Evaluation experience, skills in designing and carrying out program evaluations, and experience collaborating with program stakeholders are relevant.                                                                                                                                                                                                                                                                                               |                  |
| Proposed platform and technology Grantee will use to carry out and communicate the RFP process for sub-grantees is adequate. Grantee recognizes FNS reserves the right to approve the platform/technology to be used.                                                                                                                                                                                                                               |                  |
| Proposed administration plan for executing the competitive RFP process is clearly demonstrated.                                                                                                                                                                                                                                                                                                                                                     |                  |

|                                                                                                                                                                                                                                                                                                   |                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Proposed approach to collaboratively designing evaluations with sub-grantees demonstrates familiarity with common challenges specific to WIC and online shopping.                                                                                                                                 |                  |
| Proposed approach outlines the criteria to be used to critique sub-grantee applications. Grantee recognizes FNS reserves the right to make the final decision on sub-grantee selection.                                                                                                           |                  |
| Timeline for delivery of project milestones and deliverables is reasonable.                                                                                                                                                                                                                       |                  |
| <b>Management Plan</b>                                                                                                                                                                                                                                                                            | <b>15 Points</b> |
| Proposed communication plan demonstrates a plan for disseminating all information and resources to key WIC stakeholders.                                                                                                                                                                          |                  |
| Management plan articulates how the applicant will provide the oversight necessary to ensure high-quality research, technical assistance, and deliverables to keep the funded project on time and within budget.                                                                                  |                  |
| Presented project timeline is practical and presented milestones and deadlines are realistic and achievable.                                                                                                                                                                                      |                  |
| Management plan demonstrates effective internal controls of funds that are provided to partners and State agencies and ensures funds are used only for project purposes, with an accounting record and audit trail.                                                                               |                  |
| Plan includes managing personnel associated with the project and addresses any contingencies, such as loss of key personnel.                                                                                                                                                                      |                  |
| Management plan shows potential for strong interrelationships, teamwork, and cooperation between the Grantee and stakeholders, including partnering researchers and collaborating WIC State agencies.                                                                                             |                  |
| <b>Budget</b>                                                                                                                                                                                                                                                                                     | <b>10 Points</b> |
| Total funding amount requested on the budget and budget narrative is appropriate for the scope of the project.                                                                                                                                                                                    |                  |
| Proposed costs are reasonable, necessary, and allocable to carry out the project's goals and objectives.                                                                                                                                                                                          |                  |
| Budget considers all implementation and operational costs that are necessary to accomplish the objectives of this project.                                                                                                                                                                        |                  |
| Budget specifically describes how the Grantee will allocate its awarded amount to: (1) carry out a competition to award a maximum of five sub-grants to WIC State agencies to implement online ordering, (2) provide technical assistance to sub-grant recipients; and (3) evaluate the outcomes. |                  |
| Budget includes a line item description for allowable costs and shows how each supports the project goals.                                                                                                                                                                                        |                  |
| Budget calculations and documentation are complete and clearly shows how the budget components were developed and costs were estimated.                                                                                                                                                           |                  |
| <b>Technical Assistance</b>                                                                                                                                                                                                                                                                       | <b>25 Points</b> |
| Previous experiences providing technical assistance to public, service-providing agencies or similar agencies, including but not limited to WIC State and/or local agencies are described and documented.                                                                                         |                  |
| Proposed technical assistance approach supports sub-grantees in implementing online ordering.                                                                                                                                                                                                     |                  |
| Familiarity and experience with WIC vendor management and WIC EBT are demonstrated.                                                                                                                                                                                                               |                  |

|                                                                                                                                                                                                          |                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Interest and knowledge of the retail grocery industry are demonstrated.                                                                                                                                  |                   |
| Clear articulation of applicant's plan to communicate the RFP requirements to interested State agencies through multiple webinars and individual technical assistance prior to, during, and after award. |                   |
| <b>Total</b>                                                                                                                                                                                             | <b>100 Points</b> |

## REVIEW AND SELECTION PROCESS

Following the initial screening process, FNS will assemble a panel group to review and determine the technical merits of each application. The panel will evaluate the proposals based on how well they address the required application components and array the applications from highest to lowest score. The panel members will recommend applications for consideration for a grant award based on the evaluation scoring. The selecting official reserves the right to accept the panel's recommendation or to select an application for funding out of order to meet agency priorities, program balance, geographical representation, or project diversity. FNS reserves the right to use this solicitation and competition to award additional grants in the next fiscal year should additional funds be made available.

**NOTE:** If a discrepancy exists between the total funding request (submitted on SF-424, SF-424A, and budget or budget narrative) within the application package in response to this solicitation, FNS will only consider and evaluate the estimated funding request contained on SF-424.

## VI. FEDERAL AWARD ADMINISTRATION INFORMATION

### FEDERAL AWARD NOTICE

The Government is not obligated to make any award as a result of this RFA. Unless an applicant receives a signed award document with terms and conditions, any contact from a FNS Grants or Program Officer should not be considered as a notice of a grant award. No pre-award or pre-agreement costs incurred prior to the effective start date are allowed unless approved and stated on FNS' signed award document (FNS-529). Only the recognized FNS authorized signature can bind USDA FNS to the expenditure of funds related to an award's approved budget.

## ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS

### Confidentiality of an Application

When an application results in an award, it becomes a part of the record of FNS transactions, available to the public upon specific request. Information that the Secretary determines to be of a confidential, privileged, or proprietary nature will be held in confidence to the extent permitted by law. Therefore, any information that the applicant wishes to have considered as confidential, privileged, or proprietary should be clearly marked within the application. Any application that does not result in an award will not be released to the public. An application may be withdrawn at any time prior to the final action thereon.

### Safeguarding Personally Identifiable Information

Personally Identifiable Information (PII) is any information that can be used to distinguish or trace an individual's identity, such as name, social security number, date and place of birth, mother's maiden name, or biometric records, and any other information that is linked or linkable to an individual, such

as medical, educational, financial, and employment information (National Institute of Standards and Technology (NIST) SP 800-122, Guide to Protecting the Confidentiality of Personally Identifiable information, April 2010).

Applicants submitting applications in response to this RFA must recognize that confidentiality of PII and other sensitive data is of paramount importance to USDA FNS. All federal and non-federal employees (e.g., contractors, affiliates, or partners) working for or on behalf of FNS are required to acknowledge understanding of their responsibilities and accountability for using and protecting FNS PII in accordance with the Privacy Act of 1974; Office of Management and Budget Memorandum M-06-15, *Safeguarding Personally Identifiable Information*; M-06-16, *Protection of Sensitive Agency Information*; M-07-16, *Safeguarding Against and Responding to the Breach of Personally Identifiable Information*; and the NIST Special Publication (SP) 800-122, *Guide to Protecting the Confidentiality of Personally Identifiable Information*.

By submitting an application in response to this RFA, applicants are assuring that all data exchanges conducted throughout the application submission and pre-award process (and during the performance of the grant, if awarded) will be conducted in a manner consistent with applicable federal laws. By submitting a grant application, applicants agree to take all necessary steps to protect such confidentiality, including the following: (1) ensuring that PII and sensitive data developed, obtained or otherwise associated with USDA FNS funded grants is securely transmitted. Transmission of applications through Grants.gov is secure; (2) ensuring that PII is not transmitted to unauthorized users, and that PII and other sensitive data is not submitted via email; and (3) Data transmitted via approved file sharing services (WatchDox, ShareFile, etc.), CDs, DVDs, thumb drives, etc., must be encrypted.

## **Conflict of Interest and Confidentiality of the Review Process**

The agency requires all panel reviewers to sign a conflict of interest and confidentiality form to prevent any actual or perceived conflicts of interest that may affect the application review and evaluation process. Names of applicants, including States and tribal governments, submitting an application will be kept confidential, except to those involved in the review process, to the extent permitted by law. In addition, the identities of the reviewers will remain confidential throughout the entire process. Therefore, the names of the reviewers will not be released to applicants.

## **Administrative Regulations**

### **Federal Tax Liabilities Restrictions**

None of the funds made available by this or any other Act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, make a grant to, or provide a loan or loan guarantee to, any corporation that has any unpaid federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability, where the awarding agency is aware of the unpaid tax liability, unless a federal agency has considered suspension or debarment of the corporation and has made a determination that this further action is not necessary to protect the interests of the Government.

### **Felony Crime Conviction Restrictions**

None of the funds made available by this or any other Act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, make a grant to, or provide a loan or loan guarantee to, any corporation that was convicted of a felony criminal violation under any federal law within the preceding 24 months, where the awarding agency is aware of the conviction, unless a

federal agency has considered suspension or debarment of the corporation and has made a determination that this further action is not necessary to protect the interests of the Government.

### **Debarment and Suspension 2 CFR Part 180 and 2 CFR Part 417**

A recipient chosen for an award shall comply with the non-procurement debarment and suspension common rule implementing Executive Orders (E.O.) 12549 and 12669, “Debarment and Suspension,” codified at 2 CFR Part 180 and 2 CFR Part 417. This common rule restricts sub-awards and contracts with certain parties that are debarred, suspended or otherwise excluded from or ineligible for participation in federal assistance programs or activities. The approved grant recipient will be required to ensure that all sub-contractors and sub-grantees are neither excluded nor disqualified under the suspension and debarment rules prior to approving a sub-grant award by checking the System for Award Management (SAM) at [www.sam.gov](http://www.sam.gov).

### **Universal Identifier and Central Contractor Registration 2 CFR Part 25**

Effective October 1, 2010, all grant applicants must obtain a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number as a universal identifier for Federal financial assistance. Active grant recipients and their direct sub-recipients of a sub-grant award also must obtain a DUNS number. To request a DUNS number visit: <https://fedgov.dnb.com/webform/>.

The grant recipient must also register its DUNS number in the Systems for Award Management (SAM.gov). If you were registered in the CCR, your company’s information should be in SAM and you will need to set up a SAM account. To register in SAM you will need your entity’s DUNS and your entity’s Tax ID Number (TIN) and taxpayer name (as it appears on your last tax return). Registration should take **3-5 days**. If you do not receive confirmation that your SAM registration is complete, please contact SAM at <https://www.fsd.gov/app/answers/list>.

FNS may not make an award to an applicant until the applicant has complied with the requirements described in 2 CFR 25 to provide a valid DUNS number and maintain an active SAM registration with current information.

### **Reporting Sub-award and Executive Compensation Information 2 CFR Part 170**

The Federal Funding Accountability and Transparency Act (FFATA) of 2006 (Public Law 109–282), as amended by Section 6202 of Public Law 110–252, requires primary grantees of Federal grants and cooperative agreements to report information on sub-grantee obligations and executive compensation. FFATA promotes open government by enhancing the Federal Government’s accountability for its stewardship of public resources. This is accomplished by making Government information, particularly information on federal spending, accessible to the general public.

Primary grantees, including State agencies, are required to report actions taken on or after October 1, 2010, that obligates \$25,000 or more in federal grant funds to first-tier sub-grantees. This information must be reported in the Government-wide FFATA Sub-Award Reporting System (FSRS). In order to access FSRS a current SAM registration is required. A primary grantee and first-tier sub-grantees must also report total compensation for each of its five most-highly compensated executives. Every primary and first-tier grantee must obtain a DUNS number prior to being eligible to receive a grant or sub-grant award. Additional information will be provided to grant recipients upon award.

### **Duncan Hunter National Defense Authorization Act of Fiscal Year 2009, Public Law 110-417**

Section 872 of this Act requires the development and maintenance of a federal Government information system that contains specific information on the integrity and performance of covered Federal agency contractors and grantees. The Federal Awardee Performance and Integrity Information System (FAPIIS) is designed to address these requirements. FAPIIS contains integrity and

performance information from the Contractor Performance Assessment Reporting System, information from SAM.gov, and suspension and debarment information from the SAM. FNS will review and consider any information about the applicant reflected in FAPIIS when making a judgment about whether an applicant is qualified to receive an award.

### **Freedom of Information Act (FOIA) Requests**

The Freedom of Information Act (FOIA), 5 U.S.C. 552, provides individuals with a right to access records in the possession of the federal Government. The Government may withhold information pursuant to the nine exemptions and the three exclusions contained in the Act.

Application packages submitted in response to this grant solicitation may be subject to FOIA by requests by interested parties. In response to these requests, FNS will comply with all applicable laws and regulations, including departmental regulations.

FNS will forward a Business Submitter Notice to the requested applicant's point-of-contact. Applicants will need to review requested materials and submit any recommendations within 10 days from the date of FNS notification. FNS will redact Personally Identifiable Information (PII).

For additional information on the Freedom of Information (FOIA) process, please contact the FNS Freedom of Information Act officer at [FOIA@usda.gov](mailto:FOIA@usda.gov).

### **Privacy Policy**

The USDA Food and Nutrition Service does not collect any personal identifiable information without explicit consent. To view the Agency's Privacy Policy, visit: [www.fns.usda.gov/privacy-policy](http://www.fns.usda.gov/privacy-policy).

### **Code of Federal Regulations and Other Government Requirements**

This grant will be awarded and administered in accordance with the following regulations 2 Code of Federal Regulations (CFR), Subtitle A, Chapter II. Any Federal laws, regulations, or USDA directives released after this RFA is posted will be implemented as instructed.

#### **Government-wide Regulations**

- 2 CFR Part 25: "Universal Identifier and System for Award Management"
- 2 CFR Part 170: "Reporting Sub-award and Executive Compensation Information"
- 2 CFR Part 175: "Award Term for Trafficking in Persons"
- 2 CFR Part 180: "OMB Guidelines to Agencies on Government-wide Debarment and Suspension (Non-Procurement)"
- 2 CFR Part 200: "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards"
- 2 CFR Part 400: USDA's implementing regulation of 2 CFR Part 200 "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards"
- 2 CFR Part 415: USDA "General Program Administrative Regulations"
- 2 CFR Part 416: USDA "General Program Administrative Regulations for Grants and Cooperative Agreements to State and Local Governments"
- 2 CFR Part 417: USDA "Non-Procurement Debarment and Suspension"
- 2 CFR Part 418 USDA "New Restrictions on Lobbying"
- 2 CFR Part 421: USDA "Requirements for Drug-Free Workplace (Financial Assistance)"
- 7 CFR Part 16: "Equal Opportunity for Religious Organizations"
- 41 U.S.C. Section 22 "Interest of Member of Congress"

- Freedom of Information Act (FOIA). Public access to Federal Financial Assistance records shall not be limited, except when such records must be kept confidential and would have been excepted from disclosure pursuant to the “Freedom of Information” regulation (5 U.S.C. 552)

General Terms and Conditions (T&Cs) of FNS grant awards may be obtained electronically in advance of an award. For a copy of T&Cs, please contact the Grant Officer at:

Carla Garcia, Grant Officer  
Grants and Fiscal Policy Division  
U.S. Department of Agriculture, FNS  
[Carla.Garcia@usda.gov](mailto:Carla.Garcia@usda.gov)

## **REPORTING REQUIREMENTS**

### **Financial Reports**

The award recipient will be required to enter the SF-425 (Financial Status Report) into the FNS Food Program Reporting System (FPRS) on a quarterly basis. In order to access FPRS, the grant recipient must obtain USDA e-authentication certification and access to FPRS. For additional information on FPRS, visit: <https://fprs.fns.usda.gov/>.

### **Performance Progress Report (PPR)**

Grantees will be required to submit progress reports to FNS 30 days following the end of each quarterly period, using the FNS-908 PPR form that will be sent to grantees at the time of award. The reports should cover the preceding period of activity. A final report identifying the accomplishments and results of the project will be due 90 days after the end date of the award. For reference, a blank copy of the FNS-908 PPR form can be found [here](#).

Please note: the FNS-908 PPR form specific to this opportunity will be sent to grantees at the time of award. Use of the FNS-908 PPR form for progress reports is required.

## **VII. FEDERAL AWARDING AGENCY CONTACTS**

For questions regarding this solicitation, please contact the Grant Officer at:

Carla Garcia, Grant Officer  
Grants and Fiscal Policy Division  
U.S. Department of Agriculture, FNS  
[Carla.Garcia@usda.gov](mailto:Carla.Garcia@usda.gov)

## **VIII. OTHER INFORMATION**

### **Debriefing Requests**

Non-selected applicants may request a debriefing to discuss the strengths and weaknesses of submitted proposals. This information may be useful when preparing future grant proposals. Additional information on debriefing requests will be forwarded to non-selected applicants. FNS reserves the right to provide this debriefing orally or in written format.

## APPENDIX A

### RFA Budget Narrative Checklist

FOR GRANT APPLICANT USE ONLY. DO NOT RETURN THIS FORM WITH THE APPLICATION.

This checklist will assist you in completing the budget narrative portion of the application. Please review the checklist to ensure the items below are addressed in the budget narrative.

NOTE: The budget and budget narrative, as well as forms SF-424 and SF-424A must be in line with the proposal project description bona fide need. FNS reserves the right to request information not clearly addressed. All funding requests must be in whole dollars.

| ITEM                                                                                                                                                                            | YES | NO |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| Personnel                                                                                                                                                                       |     |    |
| Did you include all key employees paid for by this grant under this heading?                                                                                                    |     |    |
| Are employees of the applicant's organization identified by name and position title?                                                                                            |     |    |
| Did you reflect percentage of time the Project Director will devote to the project in full-time equivalents (FTE)?                                                              |     |    |
| Fringe Benefits                                                                                                                                                                 |     |    |
| Did you include your organization's fringe benefit amount along with the basis for the computation?                                                                             |     |    |
| Did you list the type of fringe benefits to be covered with Federal funds?                                                                                                      |     |    |
| Travel                                                                                                                                                                          |     |    |
| Are travel expenses itemized? For example origination/destination points, number and purpose of trips, number of staff traveling, mode of transportation and cost of each trip. |     |    |
| Are the Attendee Objectives and travel justifications included in the narrative?                                                                                                |     |    |
| Is the basis for the lodging estimates identified in the budget? For example, include excerpt from travel regulations.                                                          |     |    |
| Equipment                                                                                                                                                                       |     |    |
| Is the need for the equipment justified in the narrative?                                                                                                                       |     |    |
| Are the types of equipment, unit costs, and the number of items to be purchased listed in the budget?                                                                           |     |    |
| Is the basis for the cost per item or other basis of computation stated in the budget?                                                                                          |     |    |
| Supplies                                                                                                                                                                        |     |    |
| Are the types of supplies, unit costs, and the number of items to be purchased reflected in the budget?                                                                         |     |    |

| ITEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | YES | NO |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| Is the basis for the costs per item or other basis of computation stated?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |    |
| <b>Contractual:</b> (FNS reserves the right to request information on all contractual awards [including sub-grantee contracts and amendments] and associated costs after the contract is awarded.)                                                                                                                                                                                                                                                                                                                                                                                                       |     |    |
| Has the bona fide need been clearly identified in the project description to justify the cost for a contract or sub-grant expense(s) shown on the budget?                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |    |
| A justification for all Sole-source contracts must be provided in the budget narrative prior to approving this identified cost.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |    |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |    |
| <p>Consultant Services –</p> <p>Has the bona fide need been clearly identified in the project description to justify the cost shown on the budget? The following information must be provided in the justification: description of service, the consultant’s name and an itemized list of all direct cost and fees, number of personnel including the position title (specialty and specialized qualifications as appropriate to the costs), number of estimated hours and hourly wages per hour, and all expenses and fees directly related to the proposed services to be rendered to the project.</p> |     |    |
| <p>For all other line items listed under the “Other” heading –</p> <p>List all items to be covered within “Other” along with the methodology on how the applicant derived the costs to be charged to the program.</p>                                                                                                                                                                                                                                                                                                                                                                                    |     |    |
| Indirect Costs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |     |    |
| Has the applicant obtained a Negotiated Indirect Cost Rate Agreement (NICRA) from a federal Agency? If yes, a copy of the most recent and signed negotiated rate agreement must be provided along with the application.                                                                                                                                                                                                                                                                                                                                                                                  |     |    |
| If no negotiated agreement exists, the basis and the details of the indirect costs to be requested should also be reflected in the budget.                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |    |

## APPENDIX B

### Grant Program Accounting and Financial Capability Questionnaire

#### Purpose

Recipients of federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302 [Standards for Financial and Program Management](#). The responses to this questionnaire are used to assist in the Food and Nutrition Service Agency's (FNS) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of federal funds. Failure to comply with the criteria outlined in the regulations above may preclude your organization from receiving an award. This form applies to FNS' competitive and noncompetitive grant programs. Please submit this questionnaire along with your application package.

#### Organization Information

Legal Organization Name:

DUNS Number:

#### Financial Stability and Quality of Management Systems

| Requirement                                                                                                                                        | Yes                      | No                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. Has your organization received a federal award within the past 3 years?                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                    |                          |                          |
| 2. Does your organization utilize accounting software to manage your financial records?                                                            | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                    |                          |                          |
| 3. Does your accounting system identify the receipt and expenditure of program funds separately for each grant?                                    | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                    |                          |                          |
| 4. Does your organization have a dedicated individual responsible for monitoring organizational funds, such as an accountant or a finance manager? | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                    |                          |                          |

|                                                                                                                                                            |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| <b>5. Does your organization separate the duties for staff handling the approval of transactions and the recording and payment of funds?</b>               | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                            |                          |                          |
| <b>6. Does your organization have the ability to specifically identify and allocate employee effort to an applicable program?</b>                          | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                            |                          |                          |
| <b>7. Does your organization have a property /inventory management system in place to track location and value of equipment purchased under the award?</b> | <input type="checkbox"/> | <input type="checkbox"/> |

### Audit Reports and Findings

| Requirement                                                                                                                                                                                                                                                                                                                                                            | Yes                      | No                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| <b>1. Has your organization been audited within the last 5 fiscal years? (If the answer is “Yes” and this report was issued under the Single Audit Act please note this in the box below marked “Additional Information” and if not issued under the “Single Audit Act”, please attach a copy or provide a link to the audit report in the Hyperlink space below).</b> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |
| <b>2. If your organization has been audited within the last 5 fiscal years, was there a “Qualified Opinion” or an “Adverse Opinion”?</b>                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |
| <b>3. If your organization has been audited within the last 5 fiscal years, was there a “Material Weakness” disclosed?</b>                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |
| <b>4. If your organization has been audited within the last 5 fiscal years, was there a “Significant Deficiency” disclosed?</b>                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |
| <b>Hyperlink (if available):</b>                                                                                                                                                                                                                                                                                                                                       |                          |                          |
| <b>Additional information including expanding on responses in previous sections:</b>                                                                                                                                                                                                                                                                                   |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |

## **Applicant Certification**

I certify that the above information is complete and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

Name of Authorized  
Representative:

Phone Number:

Email:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## APPENDIX C

### FNS-908 Performance Progress Report (PPR) – For Reference Only

The following pages contain screenshots of the PPR form that grantees are required to use for progress and final reports submitted to FNS. Upon award, a PPR PDF form, customized for the specific FNS program, will be included in award packages.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| <input type="button" value="Print"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <input type="button" value="Submit by Email"/> |                                                                                                          | UNITED STATES DEPARTMENT OF AGRICULTURE<br>Food and Nutrition Service                                                                                                                                                |                         |
| <b>PERFORMANCE PROGRESS REPORT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
| <small>The public burden statement: According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0512. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584 - 0512*). Do not return the completed form to this address.</small> |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
| <b>1. Recipient Organization</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                | <b>2. Program Information:</b>                                                                           |                                                                                                                                                                                                                      |                         |
| a. Organization Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                | Program Area:                                                                                            |                                                                                                                                                                                                                      |                         |
| b. Street Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                | Federal Fiscal Year of Award:                                                                            |                                                                                                                                                                                                                      |                         |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                | Program:                                                                                                 |                                                                                                                                                                                                                      |                         |
| State:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                | Tag:                                                                                                     |                                                                                                                                                                                                                      |                         |
| Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                | <b>4. Federal Award Identification Number (FAIN):</b>                                                    |                                                                                                                                                                                                                      |                         |
| <b>3. Primary POC:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                | <b>5. Type of Report (Select One):</b>                                                                   |                                                                                                                                                                                                                      |                         |
| a. First Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Last Name:                                     | Quarterly <input checked="" type="radio"/> Semi-Annual <input type="radio"/> Final <input type="radio"/> |                                                                                                                                                                                                                      |                         |
| c. Telephone (Area Code & Number):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | b. Title:                                      |                                                                                                          | Reporting Fiscal Year: Period:                                                                                                                                                                                       |                         |
| d. Email Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Original/Revision:                             |                                                                                                          |                                                                                                                                                                                                                      |                         |
| <b>6. Federal Grant Agreement Number:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
| <b>7. Additional POC (Optional)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
| a. First Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Last Name:                                     | b. Title:                                                                                                |                                                                                                                                                                                                                      |                         |
| c. Telephone (Area Code & Number):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | d. Email Address:                              |                                                                                                          |                                                                                                                                                                                                                      |                         |
| <b>8. Report Submitted By:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |
| a. First Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Last Name:                                     | b. Title:                                                                                                |                                                                                                                                                                                                                      | <b>9. Certification</b> |
| c. Telephone (Area Code & Number):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | d. Email Address:                              |                                                                                                          | <input checked="" type="checkbox"/> I certify by checking this box that, to the best of my knowledge and belief, this report is correct and complete for performance of activities set forth in the award documents. |                         |
| <b>10. Date Report Submitted:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                |                                                                                                          |                                                                                                                                                                                                                      |                         |

Form FNS-908  
Version Number: 1.0 (5-19)

SBU

Electronic Form Version Designed in Adobe AEM 6.4 Version

|                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Program Management Information</b>                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>1. Progress Summary</b><br>Provide summary of progress this reporting period, highlighting your greatest achievements and challenges to date in this reporting period. For challenges, how did you resolve or overcome them? (Max 2000 characters):                                                                                                                                                                                   |
| <b>2. Personnel Information</b>                                                                                                                                                                                                                                                                                                                                                                                                          |
| a. Number of FTEs: b. Were there any changes in key personnel? <input checked="" type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                                                                             |
| c. If yes, please describe the changes in key personnel, including the individual leaving/joining the project as well as the name and contact information (email address, phone number, and name of organization) of the individual. Note: This information does not serve as a formal request to approve the change in key personnel. This request must be forwarded to the Grants Officer in a separate request (Max 2000 Characters): |
| <b>3. Projected Amendments (Cost and No-Cost)</b>                                                                                                                                                                                                                                                                                                                                                                                        |
| a. Number of amendments projected this upcoming quarter? <input checked="" type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                                                                                   |
| b. Do the projected amendment(s) require FNS approval? <input checked="" type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                                                                                     |
| c. Please describe the type of amendment(s) projected and justification for each. Note: This information does not serve as a formal request to approve amendments. This request must be forwarded to the Grants Officer in a separate request (Max 2000 characters):                                                                                                                                                                     |
| <b>4. Expenditures/Purchases:</b>                                                                                                                                                                                                                                                                                                                                                                                                        |
| a. Were there any significant expenditures or purchases, including any contracts entered during this reporting period? <input checked="" type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                     |
| b. If so, please describe (Max 2000 Characters):                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>5. Deviations (Changes this quarter outside of the agreed upon budget, timeline, or scope):</b>                                                                                                                                                                                                                                                                                                                                       |
| a. Have there been any deviations? <input checked="" type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                                                                                                         |
| b. Type: <input type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                            |
| c. Describe any deviation(s), including a justification and impacts to budget/timeline (Max 2000 characters):                                                                                                                                                                                                                                                                                                                            |
| d. Please describe proposed activities to mitigate the impact of the deviation(s) (Max 2000 characters):                                                                                                                                                                                                                                                                                                                                 |

## FNS-908 Performance Progress Report (PPR) – For Reference Only (Continued)

| Program Management Information (Continued)                                                                                                      |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 6. Upcoming Activities and Anticipated Changes                                                                                                  |  |
| a. Please describe activities planned for next quarter (Max 2000 Characters):                                                                   |  |
|                                                                                                                                                 |  |
| b. Do you anticipate any changes in your project timeline, activities or cost? <input type="checkbox"/> Yes <input type="checkbox"/> No         |  |
| c. If yes, please explain the anticipated changes (Max 2000 Characters):                                                                        |  |
|                                                                                                                                                 |  |
| 7. Final Reporting Summary (Final Reporting Period Only)                                                                                        |  |
| a. Are all goals and objectives completed at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No                                |  |
| b. If no to answer 7a, briefly describe the goals and objectives that were not completed and why they were not completed (Max 2000 Characters): |  |
|                                                                                                                                                 |  |
| c. Was the project budget sufficient for meeting the project goals? <input type="checkbox"/> Yes <input type="checkbox"/> No                    |  |
| d. If no to answer 7c, briefly describe why the budget was insufficient for meeting the project goals (Max 2000 Characters):                    |  |
|                                                                                                                                                 |  |
| 8. Additional Comments (Max 2000 Characters)                                                                                                    |  |
|                                                                                                                                                 |  |

**Instructions:** Complete this section by adding all Activities and Indicators as listed on your submitted proposal for each listed objective. For each reporting period, update these Activities/Indicators with the most up to date information. **Note:** Objectives will be added by FNS and should not be altered. Additionally, note that indicator values vary by Indicator Type selected.

| Program Activities |   |                                |                |                             |                        |          |                                 |
|--------------------|---|--------------------------------|----------------|-----------------------------|------------------------|----------|---------------------------------|
| Objective 1        |   |                                |                |                             |                        |          |                                 |
| -                  | 1 | Activity                       | Type           | Anticipated Completion Date | Actual Completion Date | Location | Optional Beneficiaries/Audience |
| +                  |   |                                |                |                             |                        |          | Topic (if training)             |
|                    |   | Indicator Description          | Indicator Type | Target                      | Actual (Cumulative)    | Comments |                                 |
| -                  | 1 |                                |                |                             |                        |          |                                 |
| +                  |   |                                |                |                             |                        |          |                                 |
|                    |   | Add Objective Remove Objective |                |                             |                        |          |                                 |

**Instructions:** Only complete this section if the prompts have been completed in the provided PPR. For some Programs this section IS NOT required.

| Final Program Metrics (Final Reporting Period Only) |                            |
|-----------------------------------------------------|----------------------------|
| Metric 1                                            | Type: <input type="text"/> |
| Prompt:                                             |                            |
|                                                     |                            |
| Answer Value 1: <input type="text"/>                |                            |
| Item 1                                              |                            |
| Add Item                                            | Remove Item                |
| Comments:                                           |                            |
|                                                     |                            |
| Add Metric                                          | Remove Metric              |