



BROADBANDUSA
CONNECTING AMERICA'S COMMUNITIES

State Broadband Initiative

Detailed Guidance on Completing Closeout Documentation

December 2014





Agenda & Objectives

Agenda

- Presentation of Closeout Process
- Overview of Closeout Documents
- Questions and Answers

Objectives

- Define Closeout and Stakeholder Roles
- Understand the Timing Related to Closeout Activities
- Provide Guidance for Completing Forms





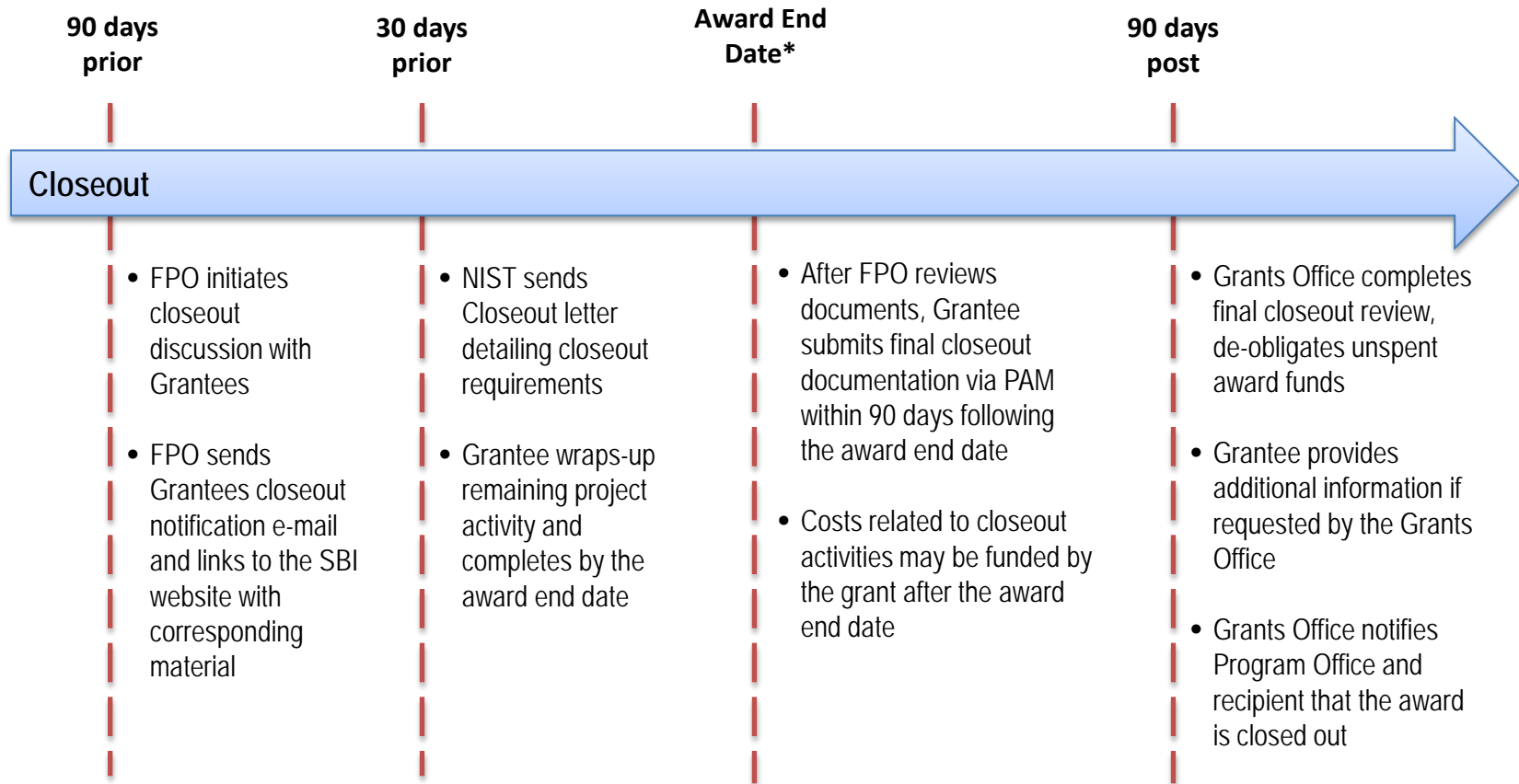
Closeout Points of Contact

- **NTIA Federal Program Officer (FPO)**
 - Your FPO continues to be your first point of contact throughout the closeout process
 - We prefer you to email your closeout documents to your FPO for review **BEFORE** you submit anything in PAM
- **NIST Grants Specialist**
 - Performs final review and evaluation of reports and documentation





Standard Project Closeout Timeline



*Contact your FPO if you are considering ending your award before its scheduled end date





Prior to Award End Date

- FPOs will notify you of your upcoming award end date and provide links to closeout documentation posted on the SBI website. This information includes a checklist that must be completed for the closeout
- Discuss your project's closeout requirements with your FPO
- Review and identify any intellectual property created as a part of your project, for example
 - Annual reports
 - Training materials
 - Outreach materials
 - Planning documents
 - Research analysis
 - Data (no personally identifiable information)
 - Survey data
 - Address files as part of your approved project
- Watch for the official closeout letter from NIST, sent 30 days prior to project period end date.





Prior to Award end date: **Budget Amendment**

- Did your Q3 2014 PPR indicate that your project needs a budget amendment?
- If you have any questions on your project's budget status, contact your FPO for guidance

Immediate Budget Facts to Consider

- If you are simply coming in under budget likely no issue
- If there are wide variances between (approx. 10% or greater) approved and actual budget line items contact your FPO
- Budget amendments must be complete to initiate close-out





How To Complete and Submit Closeout Materials

- Use email to review your closeout documents with your FPO
- Upload the final PPR and FFR in their respective report packages in PAM by their due date – April 30, 2015 for most grantees
- Attach closeout documents to the Final Closeout Award Action Request (AAR) and upload in PAM by the end of the 90 day closeout period
- You may use grant funds for closeout related costs. Allowable costs during the closeout period include preparing necessary closeout documents, conducting required audits, and making payments on invoices for costs of project work completed and/or billed prior to the award end date





Submit the following documents for closeout

Document	Submission vehicle	Due date
Final FFR (SF-425)	PAM	April 30, 2015
Final PPR	PAM	April 30, 2015
Final Closeout AAR	PAM	May 1, 2015
Final SF-424A with actuals	PAM attached to AAR	
Patent Report	PAM attached to AAR	
List of Intellectual Property acquired or developed using SBI funds	PAM attached to AAR	
SF-428 & SF-428B tangible personal property report (SF-428S if applicable)	PAM attached to AAR	
SF-429 real property report	PAM attached to AAR	
UCC-1 Filing (if applicable your FPO will contact you)	PAM attached to AAR	
Intellectual Property Documents	PAM attached to POR	





PPR and SF-425 Submission Deadlines

- For awards ending on January 31, 2015, final PPRs and SF-425s are due April 30, 2015
- All other closeout documents are due May 1, 2015 – 90 days after the award end date
- If you are considering ending your award before the award date contact your FPO





Overview of Closeout Documents





Final FFR (SF-425)

FEDERAL FINANCIAL REPORT						
(Follow form instructions)						
1. Federal Agency and Organizational Element to Which Report is Submitted		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment)			Page 1 of 1 pages	Reset Form
3. Recipient Organization (Name and complete address including Zip code)						
4a. DUNS Number	4b. EIN	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final		7. Basis of Accounting Cash <input type="checkbox"/> Accrual	
8. Project/Grant Period From: (Month, Day, Year)		To: (Month, Day, Year)		9. Reporting Period (Month, Day, Year)		
10. Transactions						Cumulative
(Use lines a-c for single or multiple grant reporting)						
Federal Cash (To report multiple grants, also use FFR Attachment):						
a. Cash Receipts						
b. Cash Disbursements						
c. Cash on Hand (line a minus b)						
(Use lines d-o for single grant reporting)						
Federal Expenditures and Unliquidated Balance:						
d. Total Federal funds authorized						
e. Federal share of expenditures						
f. Federal share of unliquidated obligations						
g. Total Federal share (sum of lines e and f)						
h. Unliquidated balance of Federal funds (line d minus g)						
Recipient Share:						
i. Total recipient share required						
j. Recipient share of expenditures						
k. Remaining recipient share to be provided (line i minus j)						
Program Income:						
l. Total Federal program income earned						
m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative						
o. Unexpended program income (line l minus line m or line n)						
11. Indirect Expenses						
a. Type						
b. Rate						
c. Period From						
d. Period To						
e. Base						
f. Amount Charged						
g. Federal Share						
h. Total						
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:						
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)						
14. Typed or Printed Name and Title of Authorized Certifying Official					15. Telephone (Area code, number and extension)	
16. Signature of Authorized Certifying Official					17. Email address	
18. Date Report Submitted (Month, Day, Year)					19. Agency use only	
<small>Revised Form 425 OMB Approval Number: 32-99-0281 Expiration Date: 12/31/2011</small>						
<small>Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control number for this information collection (0348-0281). Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0281), Washington, DC 20503.</small>						

- The FFR details all financial transactions from award inception to the completion of the award, including administrative costs that may be incurred during closeout
- This report will include expenses incurred in January 2015 and all close-out costs
- Final FFR may not include any unliquidated obligations
- Recipients should mark this “Final”
- The end date for most grants is January 31, 2015





Final PPR

U.S. DEPARTMENT OF COMMERCE			2. Award or Grant Number			
Performance Progress Report			53-S0-M09018			
			4. Report Date (MM/DD/YYYY)			09-27-2012
1. Recipient Name Washington State Department of Information Services (DIS)			6. Reporting Period End Date: 06-30-2012			
3. Street Address 1110 Jefferson Street, SE, P.O. Box 42445,						
5. City, State, Zip Code Olympia, WA 98504-2445						
7a. Project / Grant Period Start Date: (MM/DD/YYYY) 11-01-2009	7b. End Date: (MM/DD/YYYY) 10-30-2014	8. Designated Entity on Behalf of: [Redacted]	9. Is this the last report of this Award Period? <input checked="" type="radio"/> Yes <input type="radio"/> No			
3. List the individual projects in your approved project plan						
	Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)	Project Name (if different from Project Type)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding amount expended	
1						
2	N/A					
3	N/A					
4	N/A					
5	N/A					
10. Personnel						
10a. If the project is not fully staffed, describe how any lack of staffing may impact the project's timeline and when the project will be fully staffed. [Redacted]						
10b. Staffing Table						
Job Title		FTE %	Project(s) Assigned	Change		
[Redacted]				[Redacted]		
Add Row		Remove Row				

- The Final PPR is a summary of the project's performance against its milestones and objectives from inception to end using the detailed project plan is a guide.
- Be sure to mark the report as "Final" by clicking YES





Final Closeout AAR

U.S. DEPARTMENT OF COMMERCE	
Award Action Request	
1. Award Number 13-43-B10E76	2. Award Period From Sep 1, 2010
3. Recipient Name GEORGIA PARTNERSHIP FOR TELEHEALTH INC	4. Award Period To Aug 31, 2013
5. Project Title ARRA 1 DBA - TeleConnect Georgia for Better Health	6. CPDA Number 11.557
7. Report Type <input type="text" value="Other"/> 7a. If Other, please describe Submitting final closeout documentation.	
8. Justification All documentation for early closeout of Teleconnect Georgia for Better Health.	
Submit the Final Closeout AAR to include: <ul style="list-style-type: none">- Final SF-424A w/Actuals- Patent Report- Intellectual Property List- SF-428- SF-428B- SF-428S- SF-429	
9. Submitted By Lloyd Simons	10. Date Submitted (MMDDYYYY) 12-29-2012

- The Final Closeout AAR is created like previous AAR packages and specifies in the description that the attached documents are being submitted for closeout
- All file descriptions should be noted as “Final” in PAM
- Include a list of attached documents under Section 8 (Justification) in the AAR

The screenshot shows the 'Add New File' form in the PAM system. The form includes fields for Award Information, Report Package Information, and File. The 'File Description' field is highlighted with a red circle and contains the text 'Final'. The 'File' field is also highlighted with a red circle and contains a 'Browse...' button.





Final SF-424A

BUDGET INFORMATION - Non-Construction Programs OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1.		\$	\$	\$	\$	0.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY					Total (5)
	(1)	(2)	(3)	(4)	(5)	
a. Personnel	\$	\$	\$	\$	\$	0.00
b. Fringe Benefits						0.00
c. Travel						0.00
d. Equipment						0.00
e. Supplies						0.00
f. Contractual						0.00
g. Construction						0.00
h. Other						0.00
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	0.00	0.00	0.00
j. Indirect Charges						0.00
k. TOTALS (sum of 6i and 6j)	\$	0.00	0.00	0.00	0.00	0.00
7. Program Income	\$	\$	\$	\$	\$	0.00

Previous Edition Usable Authorized for Local Reproduction Standard Form 424A (Rev. 7-97)
Prescribed by OMB Circular A-102

- Submit a Final SF-424A detailing actual expenditures from award inception to the completion of the grant period, inclusive of closeout costs incurred after the award end date
- The SF-424A totals must align with the total federal expenditures and total match contributions (non-federal expenditures) listed in the Final FFR and PPR

Final Financial Reporting:

- All final financial figures must match across all forms including the final PPR, SF-425 and SF-424A





SF-428

TANGIBLE PERSONAL PROPERTY REPORT SF-428		Page	of Pages
1. Federal Agency and Organization Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned by Federal Agency	3a. DUNS	3b. EIN
4. Recipient Organization (Name and complete address including zip code)		5. Recipient Account or Identifying Number	
6. Attachment (Check applicable) <input type="checkbox"/> Annual Report (SF-428-A) <input type="checkbox"/> Final (Award Closeout) Report (SF-428-B) <input type="checkbox"/> Disposition Report/Request (SF-428-C)		7. Supplemental Sheet <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Comments			
9a. Typed or Printed Name and Title of Authorized Certifying Official		9c. Telephone (area code, number, extension)	
		9d. Email address	
9b. Signature of authorized Certifying Official		9e. Date report submitted (Month, Day, Year)	
		10. Agency use only	

SF-428 Tangible Personal Property Report
OMB Approval Number: 3350-0268
EXPIRATION DATE: 04/30/2013

- Everyone must submit a SF-428 cover sheet even if there is no tangible property to report
- On the SF-428 cover sheet, check "Final" in Question 6
 - "Not Applicable" in Question 8 if there is no property to report





SF-428B

TANGIBLE PERSONAL PROPERTY REPORT Final Report SF-428- B	
Federal Grant or Other Identifying Number Assigned by Federal Agency (Block 2 on SF-428).	
1. Report (Select all that apply)	
a. <input type="checkbox"/> Federally-owned Property (List on Supplemental Sheet SF-428S or recipient equivalent and complete Section 2a below.)	
b. <input type="checkbox"/> Acquired Equipment with acquisition cost of \$5,000 or more for which the awarding agency has reserved the right to transfer title (List on Supplemental Sheet SF-428S or recipient equivalent and complete Section 2b below.)	
c. <input type="checkbox"/> Residual Unused Supplies with total aggregate fair market value exceeding \$5,000 not needed for any other Federally sponsored programs or projects. (Complete Section 2c below)	
d. <input type="checkbox"/> None of the above	
2. Complete this section only if you selected a, b, or c above.	
For Agency Use Only	
2a. Federally-owned Property (Select one or more.)	Agency response to requested disposition of Federally owned property:
(i) <input type="checkbox"/> Request transfer to Award _____	(i) Recipient request approved _____ denied _____
(ii) <input type="checkbox"/> Request Federal Agency disposition instructions	(ii) Dispose in accordance with attached instructions _____
(iii) <input type="checkbox"/> Other (Provide detail in Block 3 or attach request)	
2b. Acquired Equipment (Select one or more.)	Agency response to requested disposition of acquired equipment:
(i) <input type="checkbox"/> Request unconditional transfer of title with no further obligation to the Federal Government.	(i) Recipient request approved _____ denied _____
(ii) <input type="checkbox"/> Request Federal Agency disposition instructions	(ii) Dispose in accordance with attached instructions _____
Authorized Awarding Agency Official	
Signature: _____	Date: _____
Name: _____	Phone: _____
Title: _____	Email: _____
Note: If the awarding agency does not provide disposition instructions within 120 days the recipient may continue to use the equipment for Federally supported projects or dispose in accordance with the applicable property standards.	
2c. Reportable Residual Unused Supplies	
(i) <input type="checkbox"/> Sale proceeds or <input type="checkbox"/> Estimate of current fair market value	\$ _____
(ii) Percentage of Federal participation	_____ %
(iii) Federal share	\$ _____
(iv) Selling and handling allowance	\$ _____
(v) Amount remitted to the Federal Government.....	\$ _____
3. Comments	
FINAL REPORT ATTACHMENT TO SF-428	
Agency use only	
OMB Approval Number: 3090-0289 Expiration Date: 4/30/2013	

- Everyone must submit a SF-428 Attachment B even if there is no tangible property to report
- On the Attachment B:
 - Question 1: Select option "b" and/or "c" as applicable
 - Question 2a: Leave blank
 - Question 2b: Select option (ii)
 - Question 2c: Complete this section
 - If no property to report, select option 1d (none of the above)
- Recipients with equipment to report would check option 1b, complete section 2b selecting option (ii), and fill-in an SF-428S
- Recipients with unused supplies whose total **aggregate** FMV exceeds \$5,000 AND who will not use those supplies for other Federally sponsored programs should check option 1c and complete section 2c





SF-428S: Additional form for recipients reporting equipment

TANGIBLE PERSONAL PROPERTY REPORT Supplemental Sheet SF-428S							
Federal Grant or Other Identifying Number Assigned by Federal Awarding Agency (Block 2 of SF-428)				Attachment Type ___ Annual Report ___ Final (Award Closeout) Report ___ Disposition Request/Report		Page	Of Pages
Complete one row for each item:							
Award Number (a)	GP or ACQ (b)	Description of Item (c)	Identification Number (d)	Acq. Date (e)	Cond. Code (f)	Acq. Cost (g)	Disp. Req. (h)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

SF-428S Supplemental Sheet - Attachment to SF-428
OMB Approval Number: 3090-0089
Expiration Date: 4/30/2013

- Attachment S is used to provide detailed information on individual items with a per-unit acquisition cost of \$5,000 or more
- Only list equipment purchased with Federal funds
- If you selected option 1b on Attachment B, you must complete Attachment S or submit an equivalent document





SF-429 and SF-429A

OMB Control No.: 3096-0296
Revision: 07/31/2014

REAL PROPERTY STATUS REPORT SF-429 (COVER PAGE)

Page: _____ of: _____ Pages

1. Federal Agency and Organizational Element to Which Report is Submitted: _____

2. Federal Grant(s) or Other Identifying Number(s) Assigned by Federal Agency(ies): _____

3. Recipient Organization (name and complete address including zip code): _____

4a. DUNS Number: _____ 4b. EIN: _____ 5. Recipient Account or Identifying Number: _____ 6. Contact Person for this Name: _____
Phone: _____
Email: _____
Fax: _____

7. Report End Date: (MM/DD/YYYY) _____

8. Real Property Status Report - Attachments: (check the applicable block(s)):
 Attachment A (General Reporting) attached
 Attachment B (Request to Acquire, Improve or Furnish) attached
 Attachment C (Disposition Request) attached

9. Comments (attach additional sheets if necessary): _____

10. Certification: I certify to the best of my knowledge and belief that all information presented in this report and complete and constitutes a material representation of fact upon which the Federal government may rely

11a. Typed or Printed Name and Title of Authorized Certifying Official: _____
11c. Telephone (area code, number): _____
11d. Email Address: _____
11e. Date Report Submitted (MM/DD/YYYY): _____

12. Agency use only

Standard Form 429

OMB Control No.: 3096-0296
Revision: 07/31/2014

Real Property Status Report ATTACHMENT A (General Reporting) SF-429A

Page: _____ of: _____ Pages

Complete the applicable blocks below for each parcel of real property being reported (duplicate this page to provide information for each parcel of real property being reported under the Federal financial assistance award identified in section 2):

13. Period and type of Federal Interest (MM/DD/YYYY): From: _____ To: _____
 Occupation _____ Reclamation _____ Construction _____ Government Furnished Property _____

14a. Description of Real Property: _____

14b. Address of Real Property (legal description and complete address including zoning information): _____

14c. Land Acreage or Square Units: Enter Amount: _____ Acres _____ Square Feet
 Select Units: _____ Square Kilometers _____ Square Meters

14d. Gross and Usable Square Footage/Meters (i.e., of building, house, etc.): Enter Amounts: Gross _____ Usable _____
 Select Units: _____ Square Feet _____ Square Meters

14e. Real Property Ownership Type(s):
 A. Owned _____ B. Co-Owned _____ C. Fee Simple _____
 D. Corporate _____ E. Joint Tenancy _____ F. Partnership _____ G. Limited Liability Partnership _____ H. Co-Operative _____
 I. Government Furnished Property _____ J. Other (Specify): _____

14f. Real Property Cost: \$ _____ Share Percentage %: _____

Federal Share: \$ _____ [%]
 Non-Federal Share: \$ _____ [%]
 Total (sum of Federal and Non-Federal Share): \$ _____ [%]

14g. Has a deed, lien, covenant, or other related documentation been recorded to establish Federal interest in this real property?
 Yes No N/A
 If yes (unless previously reported), describe the instrument used and enter the date and jurisdiction in which it was recorded: _____

14h. Has Federally required insurance coverage been secured for this real property? Yes No
 See instructions for more details.

14i. Are there any Uniform Relocation Act (URA) requirements applicable to this real property? Yes No

14j. Are there any environmental compliance requirements related to the real property? Yes No
 If yes, describe them (attach additional sheets if necessary): _____

14k. In accordance with the National Historic Preservation Act (NHPA), does the property possess historic significance, and/or is it listed or eligible for listing in the National Register of Historic Places? Yes No
 If yes, describe them (attach additional sheets if necessary): _____

14l. Has a significant change occurred with the real property, or is there an anticipated change expected during the next reporting period? Yes No
 If yes, describe the change (attach additional sheets if necessary): _____

15. Real Property Disposition Status:
 A. Sold _____ B. Transferred to different award _____ C. Used in other Federally sponsored program _____
 D. Transferred title _____ E. Retained Title _____ F. N/A

I. If the Federal agency provided the recipient disposition instructions to sell or retain title to the real property, enter the amount of funds owed to the Federal government: _____

II. If applicable, enter the amount of any net proceeds from the sale of the real property and describe how the proceeds were distributed: _____

III. If the Federal agency directed the recipient to transfer title to the real property, enter the amount of funds the Federal Agency owes: _____

17. Indicate the cumulative energy consumption for the previous 12 months:
 A. Electric (kWh) _____ or (Btu) _____ B. Petroleum (Btu) _____ C. Natural Gas (cu ft) _____ D. Other (Specify) _____

18. Remarks (attach additional sheets if necessary): _____

Attachment A (General Reporting) to Real Property Status Report SF-429

11
Standard Form 429 (9/2011)

- All recipients must submit a SF-429 cover sheet even if there is no real property to report
- If a recipient does have property to report, **both** the SF-429 and Attachment A must be submitted
- On the SF-429, fill-in Questions 1-7 with the appropriate information
 - If there is property to report, select option A in Question 8
 - If there is no property to report, leave Question 8 blank
- For Question 9, if there is no property to report, write “No real property to report”
- On the Attachment A, provide the requested information in Questions 13-18 for each parcel of real property purchased or contributed AND if significant improvements were made to land or buildings





Federal Interest Requirement (UCC-1)

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

For your convenience, this form has been designed to be completed online. The information typed on the first page will automatically update to the other pages. Please be sure all pertinent information is completed before printing. Once the form is completed, select 'Print' to print the form. Selecting 'Reset' will clear the entire form.

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME (insert only deb; debtor name (1a or 1b) - do not abbreviate or capitalize names)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2a. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2b. TAX ID# SSN OR EIN ADDL. INFO OR ORGANIZATION ORIGINATOR 2c. TYPE OF ORGANIZATION 2d. JURISDICTION OF ORGANIZATION 2e. ORGANIZATIONAL STATE 2f. FILING OFFICE STATE

2. ADDITIONAL CREDITOR'S EXACT FULL LEGAL NAME (insert only deb; creditor name (2a or 2b) - do not abbreviate or capitalize names)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. TAX ID# SSN OR EIN ADDL. INFO OR ORGANIZATION ORIGINATOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL STATE 2h. FILING OFFICE STATE

3. SECURED PARTY'S NAME (or NAME OF TOTAL ASSIGNOR OF ASSIGNOR NP-1 - insert only deb; secured party name (3a or 3b))

3a. ORGANIZATION'S NAME

OR

3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

5. ALTERNATIVE DESIGNATION (if applicable) 5a. SERIAL DESIGN 5b. CONSIGNMENT/CONSIGNOR 5c. BULK SHIPMENT 5d. BULK RECEIPT 5e. BULK RECEIPT 5f. BULK RECEIPT 5g. BULK RECEIPT 5h. BULK RECEIPT 5i. BULK RECEIPT 5j. BULK RECEIPT 5k. BULK RECEIPT 5l. BULK RECEIPT 5m. BULK RECEIPT 5n. BULK RECEIPT 5o. BULK RECEIPT 5p. BULK RECEIPT 5q. BULK RECEIPT 5r. BULK RECEIPT 5s. BULK RECEIPT 5t. BULK RECEIPT 5u. BULK RECEIPT 5v. BULK RECEIPT 5w. BULK RECEIPT 5x. BULK RECEIPT 5y. BULK RECEIPT 5z. BULK RECEIPT

6. FEDERAL FILE NUMBER (DATA)

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/2009)
FORM SHOULD BE TYPEWRITTEN OR COMPUTER GENERATED

- NTIA will contact grantees who may be required to file a UCC-1 to complete their closeout package





List of Intellectual Property

Recipient Name:
Grant Number:
Program Contact Name:
Program Contact Email:

Category	Type	Resource Name	Description	Format	URL	Organization <small>If external organization manages resource, specify organization name</small>	Contact Name <small>If external organization manages resource, specify contact name</small>	Contact Email <small>If external organization manages resource, specify contact email</small>
Planning / Project Management	Eg: Project Plans, Templates, etc.			Eg: pdf, PowerPoint, Word, website				
Research / Evaluation	Eg: Research Plans, Surveys, Data Collection Tools, Reports			Eg: pdf, PowerPoint, Word, website				
Training	Eg: Curricula, Training plans, Directories of training sites			Eg: pdf, PowerPoint, Word, website				
Outreach	Eg: Newsletters, Flyers, Ads			Eg: pdf, jpg, Word, website, etc.				
Press / Publications	Eg: Press Releases, Articles			Eg: pdf, jpg, Word, website, etc.				
Media	Eg: Website, Videos, Photos, Social Networks			Eg: pdf, jpg, mp3, Word, website, Facebook, Flickr, etc.				

- Upload a list of materials created, acquired, or developed using SBI funds, including studies, publications, curriculum, and/or work products (e.g., links on website)
- NTIA requests copies of these materials to be submitted as a POR in PAM during the close-out process
- Information to include:
 - Category (i.e., planning / project management, research / evaluation, training, outreach, publications, or media)
 - Type (such as project plans, newsletters, for example)
 - Resource name
 - Intellectual property description
 - File format (such as, PowerPoint Word, website, Facebook, for example)
 - URL if applicable
 - Author of the resource, contact name, and email address





Recipient Audit Responsibilities

A-133 Audits

- Recipients may be required to submit an A-133 audit after the award closes
- Recipients should submit their audit in accordance with their typical reporting timeline
- If there are audit findings or questioned costs the NIST Grants Office may follow-up with SBI award recipients





After the Program Office reviews and submits closeout documentation, NIST Grants Office conducts a final review and takes the remaining steps to close the grant

- NIST Grants Office will reconcile project finances and notify the recipient that the award has been satisfactorily closed
- If a recipients has any remaining unused Federal funds, the Grants Office will de-obligate the unused balance of the award
- Recipients must maintain records relating to the grant for at least three years after the recipient submits its final federal expenditure report
- Recipients must continue to comply with any ongoing audit and property management requirements





Closed Award – Recipient Responsibilities

Thank you!



- After the award is closed, recipients must continue to:
 - Use SBI-funded equipment for the purposes under the award
 - Retain grant file and related records for at least three years
 - Maintain an inventory of grant-funded equipment
 - (If applicable) Update UCC-1 filings every five years for the estimated useful life of the equipment





Additional Resources

- [15 CFR § 14.71](#) – Closeout Procedures for Non-Profit and Commercial Entities and Institutions of Higher Education
- [15 CFR § 24.50](#) – Closeout Procedures for State, Local, and Tribal Entities
- Department of Commerce Office of Acquisition Management Updated Grants Manual, Chapter 12 – Award Close-out, available at http://www.osec.doc.gov/oam/grants_management/policy/doc_grants_manual/default.htm.
- Closeout documents are available on NTIA's website under Award Closeout Requirements at <http://www2.ntia.doc.gov/compliance>





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Questions

