

FINANCIAL STATUS REPORT*(Short Form)***File the SF-269a report online at <https://grants.ojp.usdoj.gov>**

1. Federal Agency and Organizational Element to which Report is Submitted U.S. Dept. of Justice Office of Justice Programs (OJP)		2. Grant or Award Number Assigned by OJP		OMB Approval No. 1121-0264 Expires: 03/31/2009	Page 1	of 1 page
3. Recipient Organization (Name and complete address, including ZIP code)						
4. Vendor Number		5. Recipient Internal Code or Identifying Number (If Any)		6. Final Report <input type="checkbox"/> Yes <input type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input type="checkbox"/> Accrual	
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) To: (Month, Day, Year)			9. Period Covered by this Report From: (Month, Day, Year) To: (Month, Day, Year)			
10. Transactions:			I Previously Reported	II This Period	III Cumulative	
a. Total outlays						
b. Recipient share of outlays						
c. Federal share of outlays						
d. Total unliquidated obligations						
e. Recipient share of unliquidated obligations						
f. Federal share of unliquidated obligations						
g. Total Federal share (Sum of lines c and f)						
h. Total Federal funds authorized for this funding period						
i. Unobligated balance of Federal funds (Line h minus line g)						
11. Indirect Expense	a. Type of Rate (place "x" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
	b. Rate	c. Base	d. Total Amount		e. Federal Share	
12. Remarks: attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.						
a. Block/Formula Passthrough \$			PROGRAM INCOME:		d. Other \$	
b. Federal Funds Subgranted \$			c. Forfeit \$		e. Expended \$	
					f. Unexpended \$	
13. Certification I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.						
Typed or Printed Name and Title				Telephone (Area code, number, and extension)		
Signature of Authorized Certifying Official				Date Report Submitted		

Standard Form 269a (REV 2002)

Paperwork Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. You can write to the Office of Justice Programs, U.S. Department of Justice, 810 Seventh Street, NW., Washington, DC 20531.

Once the SF-269a is submitted online, DO NOT FAX or MAIL paper copies to OJP unless requested to do so.

OFFICE OF JUSTICE PROGRAMS INSTRUCTIONS
FOR FINANCIAL STATUS REPORTING (SF269A)

APPENDIX II

The quarterly Financial Status Report (FSR) is due no later than 45 days after the end of the calendar quarter. Please be reminded that this is a report of expenditures not a request for reimbursement. To request reimbursement, use your assigned OJP payment system.

This FSR should be filed on-line at <https://grants.ojp.usdoj.gov>. The attached form and instructions are provided for information. When filing on-line, you will not need to fill in each box on the form, as previously reported information is pre-populated on-line. The on-line system will calculate cumulative data for you. You can change or modify only the most recent report shown on-line. Without a current FSR on file, requests for funds will not be approved and funds will not be disbursed.

1. Pre-printed as: **U.S. Dept. of Justice, Office of Justice Programs**
2. OJP grant number found on your grant award document. For example, 2005-AB-CD-0000.
3. Current name and address of the award recipient.
4. OJP assigned 9 digit vendor number as recorded on your grant award document.
5. Enter any identifying number assigned by your organization for your internal use. If none, leave blank.
6. If you have finished expending funds and recording your required match related to this award, regardless of whether they have been or will be reimbursed by the Federal Government, check "Yes." Otherwise, check "No."
7. Indicate whether your accounting system uses a CASH or an ACCRUAL basis for recording transactions related to this award. For reports prepared on a CASH basis, outlays are the sum of actual cash disbursement for direct purchases of goods and services at the lowest funding level. For reports prepared on an ACCRUAL basis, outlays are the sum of actual cash disbursement at the lowest funding level. Unpaid obligations represent the amount of obligations that you incurred at the lowest funding level but have not yet paid out.
8. The begin and end dates of the award period.
9. The current reporting calendar quarter as listed below.

Reporting Quarter	Reports Due Not Later than
Jan 1 through Mar 31	May 15
Apr 1 through Jun 30	Aug 14
Jul 1 through Sep 30	Nov 14
Oct 1 through Dec 31	Feb 14

Note: Data for more than one calendar quarter may be rolled up into one report for the first report submitted.

10. Lines [10a](#), [10b](#), and [10c](#) refer to your **cash outlays** including the value of in-kind match contributions for this award at the lowest funding level (i.e., monies you have spent). [Column I](#) is the cumulative total of expenditures for the prior reported calendar quarter. Amounts in this column came from your previous report. [Column II](#) is for the current reporting calendar quarter's outlays and for any corrections needed. Column III is for the result when adding across the amounts reported in [Columns I and II](#). **The total of lines [10b](#) and [10c](#) should equal the amount reported on line [10a](#) for each column.**

Lines [10d](#), [10e](#), and [10f](#) should only be completed if you indicated in [Box 7](#) that you are on an accrual basis of accounting. Lines [10d](#), [10e](#), and [10f](#) refer to the amount of unpaid obligations or accounts payable you have incurred. Items such as payroll (which has been earned, but not yet paid) is an example of an accrued expense. Line [10d](#) is the total of your unpaid obligations to date.

Line [10e](#) is your share of these unpaid obligations. Line [10f](#) is the Federal share of unpaid obligations. **The total of lines [10e](#) and [10f](#) should equal the amount on line [10d](#).**

Line [10g](#) is the total Federal share of your cash outlays and unpaid obligations regardless of whether you have received reimbursement. It will be the total of Column III, Lines [10c](#) and [10f](#). Line [10h](#) is the total amount of your award. Change this amount only if you have received a supplemental award. Line [10i](#) is the amount of your total award which has not either been expended through a cash outlay or encumbered by an unpaid obligation. **It is the difference between Column III, Lines [10h](#) minus [10g](#) equals Line [10i](#).**

11. Please refer to your award documents to complete this section. This section will only be completed if you have a Negotiated Indirect Cost Rate with your cognizant agency.

Line [11a](#) Indicate the type of rate that you have. Line [11b](#) is the indirect cost rate in effect during this current reporting period. Line [11c](#) is the amount of the base against which the cost rate is applied. Line [11d](#) is the total amount of indirect costs charged during this current reporting period. Line [11e](#) is the Federal Government share of the amount reported on Line [11d](#). ($11b \times 11c = 11d$)

11e Note: If more than one rate was in effect during this reporting period, add the additional rate amounts in Box 12 in the Remarks Section.

12. Line [12A](#) is the cumulative amount of Federal funds your State agency has passed-through to local units of government, other specified groups or organizations as directed by the legislation of the program.

Line [12B](#) is the cumulative amount of Federal funds subgranted including amounts subgranted to State agencies and amounts reported on Line [12A](#).

Line [12C](#) is the cumulative Federal portion of forfeited assets to be used in this grant whether the assets were forfeited as a result of this grant or another grant.

Line [12D](#) is the cumulative Federal portion of program income earned from other than forfeited assets. This is income from sources such as registration fees, tuition, and royalties. This amount should not be included in Box 10.

Line [12E](#) is the cumulative amount of program income from all sources, including forfeited assets and interest earned, which have been expended by your organization. This amount should not be included in Box 10.

Line [12F](#) is the balance of unexpended program income ($12C + 12D - 12E$).

13. Type your name, title, phone number. A written signature is not required on-line. However, if a paper copy is submitted, please remember to sign and date it, and print your name and telephone number.

If you submit your SF269 on-line, DO NOT fax or mail a paper copy to OJP unless requested to do so by OJP.