

NEIGHBORHOOD INVESTMENT FUND GRANT PROGRAM Semi-Annual Report and Payment Request Form

Section 1.1 Required.						
			Proje	ect ID		
Date			(ARPA-NÎF			
Grantee Name						
Contact Person	Name:	Title:				
Contact Information	Phone:	Email:				
Reporting Period	Select one:					
Section 1.2 Semi-Annua	Report and Payment Request Schedu	le and Gui	delines	10 >		
Guidelines	 Grantee shall submit Semi-Annual Report and Payment Requist Forms every 6 (six) months for the duration of the Period of Performance or all activities, unless otherwise directed by the Department. Grantees can use this report as a request for numbursement for costs incurred or as an advance for expected costs, or as a combination request using both options. The initial Semi-Annual Report and Payment Request Form will cover both past (if any) and future sligit a expenses incurred from the start of the Period of Performance (March 3, 2021), through December 31, 2022 (the "Initial Payment Request Period"). Send-annual reports and payment requests will be required thereafter per the table telot in no event shall grantee submit a request for payment to DOA later than 90 days a tent to evid of the Program's Performance Period. Please contact program staff at NeighborhoodInvestmentFundProgram@wisconsin.gov with any questions about this process or with any requests to amend your budget, scope of work, or timeline. 					
	Reporting Period	_	submission opens	Form Due Date		
Schedule of Reports and Disbursements	Initial Request Period March 3, 2021 – December 31, 2022		nt Agreement ecution	Due within 30 days after Grant Agreement execution		
DOA processes reports on a rolling basis within 30 days of submission	January 1 through June 30	Opens I	December 1	Due by July 31		
	July 1 through December 31	Oper	ns June 1	Due by January 31		

Does the Grant have a Subaward? No - The Grant does not have a Subaward (Please continue to Section 2: Budget) ☐ Yes – The Grant has a Subaward (Please complete Section 2: Subaward Worksheet before completing Section 2: Budget) NVENTENCE CO

Section 2.1 Semi-Annual Payment Request. Complete only if the grant has a Subaward.

Semi-Annual Payment Request - Subaward Worksheet

(1) Enter Subaward Amount from Executed Agreement Attachment B – Budget, broken out by the line item for the appropriate cost categories. (2) For each line item, enter the total amount of grant funds <u>previously received</u>. (3) For each line item, enter the total actual incurred expenditures from all previously received grant funds, as of the date of this report and payment request. (4) For each line item, enter the carryover total (i.e., currently unused amount) of grant funds. (5) For each line item, enter the amount being requested as part of this report and payment request. (6) If you identified cost share in your executed agreement, Attachment B-Budget, enter the total amount of expenditure on each line as of the date of this report and payment request.

amo	unt of expenditure on each lin	e as of the date	e of this report and p		(4)	(5)	(c)
	Subaward Cost Category	(1) Budgeted Grant Amount	(2) Total Funds Previously Received	(3) Total Actual ARPA Grant Expenditures Incurred to Date	(4) Carryover Funds (Column 2 - Column 3)	(5) New Requested Amount	(6) Cost-Share Contributed to Date (e.g. Match)
SA-A	Advertising						
SA-B	Construction - New						
SA-C	Construction - Remodel/ Renovation						
SA-D	Construction - Utility						1
SA-E	Construction - Remediation						1
SA-F	Construction - Contingency					\cap	
SA-G	Depreciation						
SA-H	Equipment						
SA-I	Insurance				٧.		
SA-J	Participant Support Costs			4			
SA-K	Personnel - Salaries						
SA-L	Personnel - Fringe Benefits						
SA-M	Professional Services	4					
SA-N	Real Property Acquisition		Ar.				
SA-O	Rental of Real Property & Equipment	10	7				
SA-P	Supplies						
SA-Q	Travel						
SA-R	Vehicle cquisiti n						
SA-S	Other						
SA-T	Otrici						
SA-U	Other						
SA-V	Other						
SA-W	Other						
SA-X	Other						
SA-Y	Other						
SA-Z	Other						
SA-AA	Total Subaward Direct Costs (Sum SA-A through SA-Z)						
SA-BB	Subaward Administrative (Indirect) Costs						

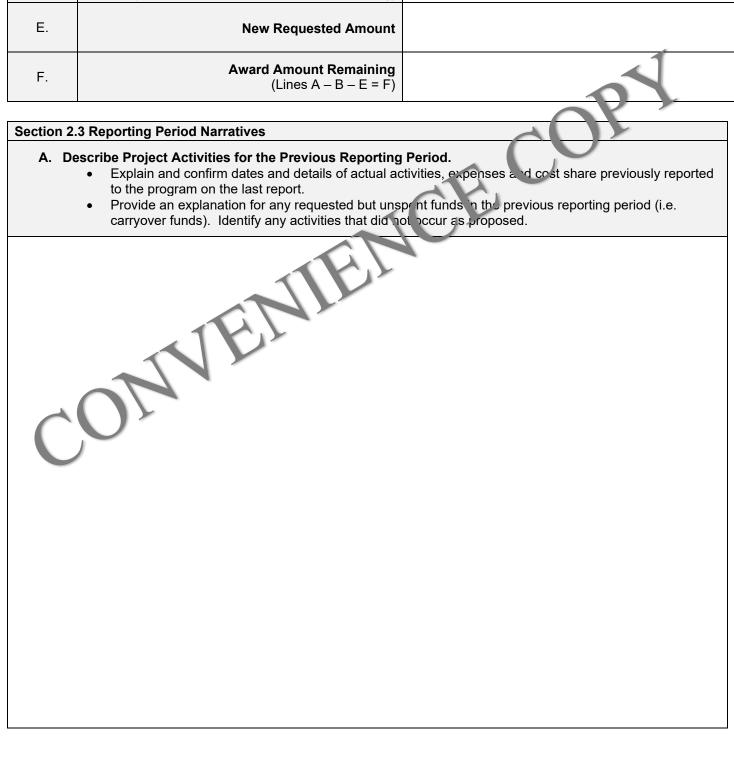
Section 2.1 Semi-Annual Payment Request. REQUIRED

Semi-Annual Payment Request - Budget

(1) Enter Grant Amount from Executed Agreement Attachment B – Budget for each line item. (2) For each line item, enter the total amount of grant funds <u>previously received</u>. (3) For each line item, enter the total actual incurred expenditures from all previously received grant funds, as of the date of this report and payment request. (4) The carryover total (i.e., currently unused amount) of grant funds is calculated based on amounts from Column 2 and Column 3. (5) For each line item, enter the amount being requested as part of this report and payment request. (6) If you identified cost-share in your executed agreement, Attachment B-Budget, enter the total amount of expenditure on each line as of the date of this report and payment request.

an	nount of expenditure on each line a	s of the date of this re			T	ı	
	Cost Category	(1) Budgeted Grant Amount	(2) Total Funds Previously Received	(3) Total Actual ARPA Grant Expenditures Incurred to Date	(4) Carryover Funds (Column 2 - Column 3)	(5) New Requested Amount	(6) Cost-Share Contributed to Date
Α	Advertising						
В	Construction - New						
С	Construction - Remodel/Renovation						
D	Construction - Utility						
Ε	Construction - Remediation						
F	Construction - Contingency						
G	Depreciation					4	
Н	Equipment						1
1	Insurance						
J	Participant Support Costs				_		
Κ	Personnel - Salaries						
L	Personnel - Fringe Benefits						
М	Professional Services				12.		
Ν	Real Property Acquisition						
0	Rental of Real Property &			- 1	1		
P	Equipment Supplies			1			
	Travel			1.6			
Q R	Vehicle Acquisition		$-\leftarrow$				
S	Other						
J T	Other		1				
U	Other	4 1 X					
V	Other						
W	Other						
X	Other						
Y	Other						
Z	Other						
	Subtotal						
AA	Subawards (e.g. subrecipients)- Total Direct						
ВВ	Subawards (e.g. subrecipients)- Total Indirect						
CC	Program Income						
DD	Administrative (Indirect) Costs						
EE	Total Direct (Sum A through AA)						
FF	Total Indirect						
ГГ	(Sum rows BB and DD)						
GG	Project Total (gross) (Sum EE, FF and CC)						
НН	Project Total (net)						

Section 2.2 Budget Table Financial Summary				
A.	Total Award Amount (from Grant Agreement)			
В.	Total Payment Amount Received To-Date			
C.	Total Actual Expenditures Incurred To-Date			
D.	$\begin{array}{c} \textbf{Carryover Funds} \\ (\text{Lines B} - \text{C = D}) \\ (\text{funds received but not expended as of reporting}) \end{array}$			
E.	New Requested Amount			
F.	Award Amount Remaining (Lines $A - B - E = F$)			



B. Describe Expected Project Activities for the Next Reporting Period

- Information should include expected activities and expenses or those completed at the time of filing.
- If you are using this report to request advance funds for activities expected to occur during the next reporting period, identify those expected activities and expenses.
- Provide explanations and date ranges of expenses listed in the budget table and, where applicable, include specifics such as dates, outcomes, census tract information, etc.
- If this is your Final Payment Request, identify remaining grant-related activities and expenses.



Section 4. LOBBYING REPORTING & DISCLOSURE. Required.						
If the amount of the grant award is greater than \$100,000.00, grantee is required to answer the following questions:						
1. Has grantee, or the undersigned by or on behalf of grantee, paid or does it expect to pay any funds, other than Federal appropriated funds, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress, in connection with this Federal grant?						
	□ Yes □ No					
	If the answer to question 1 is "yes," has grantee complied with the disclosure requirements set forth in 31 C.F.R. Part 21? If grantee answered "no" to question 1, check the box marked "N/A."					
[□ Yes □	□ No □ N/A				
Section 5. MONITORING AC	KNOWLED	GEMENT. Required.				
Grantee acknowledges that pursuant to Sections 18 and 19 of the grant agreemer, gointee is required to provide, upon request, any financial documentation or other information related to expenditures funded with the Grant Award or other compliance obligations to the Department of Administration, or its designee, as part of routine financial and program monitoring. Documentation may include that is not limited to invoices, contracts, evidence of services provided, policies and projectures.						
Section 6. CERTIFICATION.						
	Grantee must certify to all conditions listed below before a payrent request will be processed. Failure to do so may result in delayed payment to the grantee.					
The signatory below certifies to the best of his/b ir/th vir knowledge and belief that: the information contained in this Ser. i Annual is eport and Payment Request Form is true, accurate and complete; any funds sought for reimbursement are to a ligible goods and services, the costs of which have been incurred and paid for; any advance funds so light are limited to eligible expenses for the payment request period selected on this form; there is no duplication or a yment or reimbursement from another funding source for the funds being requested; and use of any fundation in accordance with applicable law, regulations, and the terms and conditions of the grant agreement.						
Se tion 7 Required.						
Authorized Representative Signature (typed signature acceptable)						
Print Name						
Title						
	Date					
OFFICE USE ONLY	Date Rece	eived: Date Reviewed:				
Approved, amount						
Approved, with conditions						
Denied, reason						