

# Welcome! We'll begin soon.

## Meeting Administration



Participants enter the meeting on mute



To ask a question, use the Q&A function



Participate in poll questions



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Safe Streets and Roads for All

# Quarterly Reporting Overview

May 23, 2024



U.S. Department of Transportation  
Federal Highway Administration

**ZERO** IS OUR GOAL  
A SAFE SYSTEM IS HOW WE GET THERE

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# Disclaimer

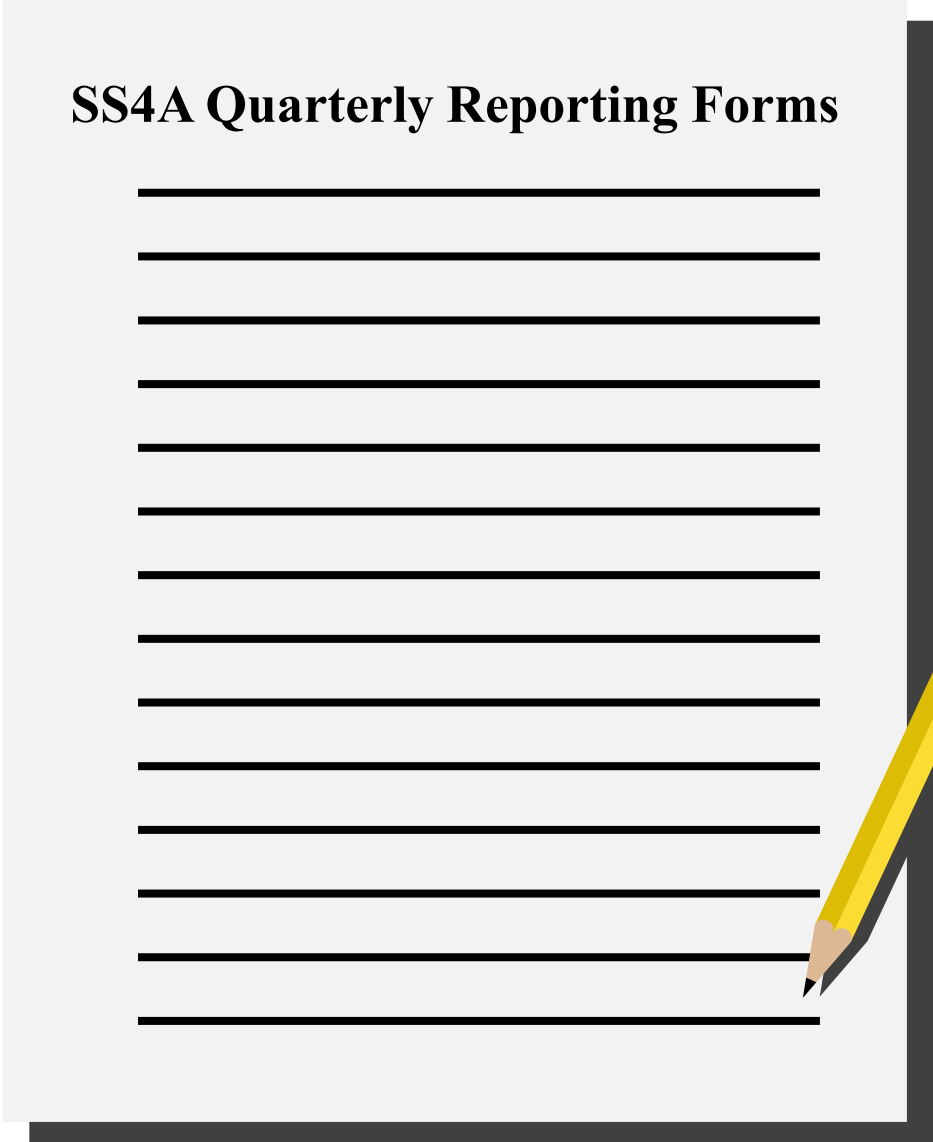
Except for any statutes and regulations cited, the contents of this presentation do not have the force and effect of law and are not meant to bind grant recipients in any way.

**This presentation is intended only to provide information and clarity on existing requirements under the law or agency policies.**

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# Webinar Purpose

- ✔ Review the quarterly reporting requirements for SS4A grant recipients



# Today's Speakers



**Jason Broehm**  
Team Leader  
Office of Safety, FHWA



**Christie Dawson**  
Transportation Specialist  
Office of Safety, FHWA

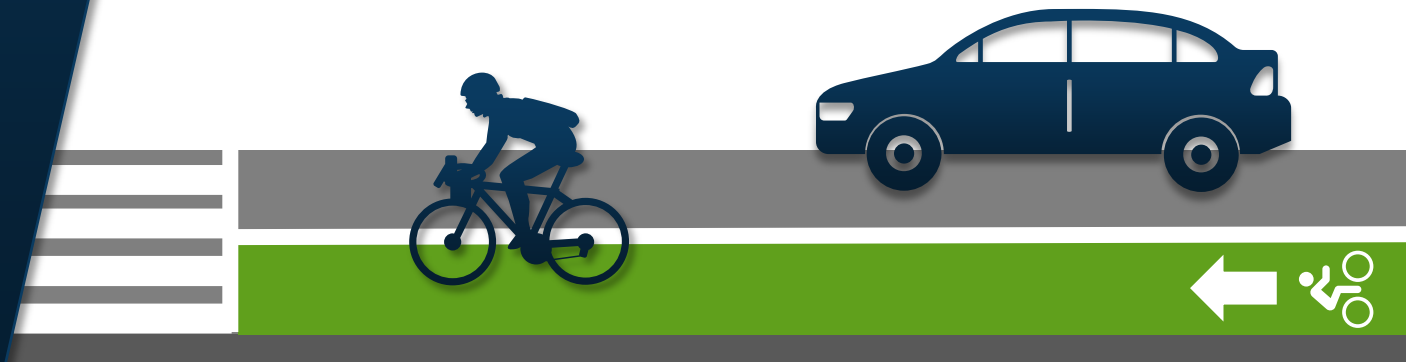


**Steve Parker**  
Transportation Specialist  
Office of Safety, FHWA



# Today's Agenda

-  1. Reporting Requirements
-  2. Standard Reporting Forms
-  3. Questions





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# Reporting Requirements



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# As an SS4A grant recipient, what are my reporting responsibilities?

Reporting responsibilities on grant activities include:



## Quarterly performance progress reports

Using the Performance Progress Report (PPR)



## Quarterly financial status reports

Using the Federal Financial Report (SF-425 or FFR)





# Reporting Requirements



## **Per 2 CFR 200.329(a)**

The recipient “**must monitor its activities** under Federal awards **to assure compliance with applicable Federal requirements and performance expectations** are being achieved. Monitoring by the non-Federal entity must cover each program, function or activity.”

# Reporting Requirements



## **Per Article 13 of the grant agreement Terms and Conditions: 13.1 Quarterly Performance Progress Reports.**

Quarterly, on or before the 20th day of the first month of each calendar year (e.g., reports due on or before January 20th, April 20th, July 20th, and October 20th) and until the end of the period of performance, the Recipient shall submit to the USDOT a Quarterly Performance Progress Report in the format and with the content described in Exhibit C. If the date of this agreement is in the final month of a calendar year, then the Recipient shall submit the first Quarterly Performance Progress Report in the second calendar year that begins after the date of this agreement.

## **13.2 Quarterly Financial Status.**

Quarterly, on or before the 20th day of the first month of each calendar year (e.g., reports due on or before January 20th, April 20th, July 20th, and October 20th) and until the end of the period of performance, the Recipient shall submit a Federal Financial Report using SF-425.

# Reporting Requirements

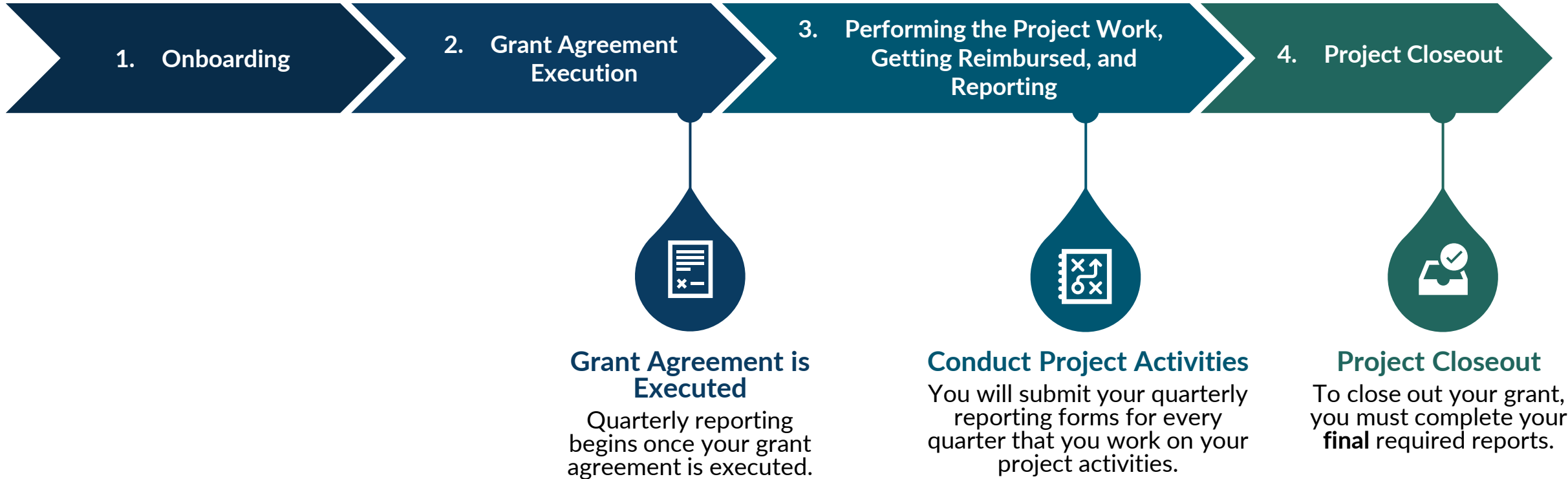


**Per statutory requirement under section 872 of Pub. L. No.110–417, as amended (41 U.S.C. § 2313).**

If the total value of a selected applicant's currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then the applicant during that period of time must maintain the currency of information reported in SAM that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)) about civil, criminal, or administrative proceedings described in paragraph 2 of this award term and condition.

# When does Quarterly Reporting Begin?

## SS4A Grant Recipient Roadmap



# Quarterly Reporting Due Dates



## First Quarterly Report

Your first quarterly report is due after the first full quarter of grant activities.

For example, if your grant agreement was executed on March 13<sup>th</sup>, you would provide your first quarterly report by July 20<sup>th</sup>.



## Ongoing Quarterly Reports

Then, all following reports are due within 20 days of the end of the quarter, for every quarter until the end of your period of performance.

### Key Takeaway!

You must fill out reports for **every quarter** after your grant agreement is executed.

### Quarterly Reporting Due Dates

| Calendar Quarter | Months Reported On  | Due Date   | GA's Exempt from Reporting for this Quarter if Signed on or after... |
|------------------|---------------------|------------|--|
| Quarter 1 (Q1)   | January to March    | April 20   | March 2024   |
| Quarter 2 (Q2)   | April to June       | July 20    | June 2024  |
| Quarter 3 (Q3)   | July to September   | October 20 | September 2024   |
| Quarter 4 (Q4)   | October to December | January 20 | December 2024  |



# Reporting Processes



## 1. Obtain Forms

Each FHWA POC will provide the required PPR and SF-425 forms and reporting schedule to all SS4A grant recipients in their State.



## 2. Complete and Submit Forms

On a quarterly basis, each grant recipient will complete and submit the PPR and SF-425 forms to their FHWA POC by the reporting deadline.



## 3. Review and File Forms

Each FHWA POC will review the submitted quarterly report forms and save them in the recipient's grant folder for grant tracking and record keeping purposes.





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# Quarterly Reporting Forms



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# What to Expect During Today's Webinar

## Today...

We'll provide a high-level overview of the PPR and SF-425 forms and walk through:

- A summary of what information is included in each form
- Review common mistakes and errors
- Share tips and tricks for successful completion



## Going forward...

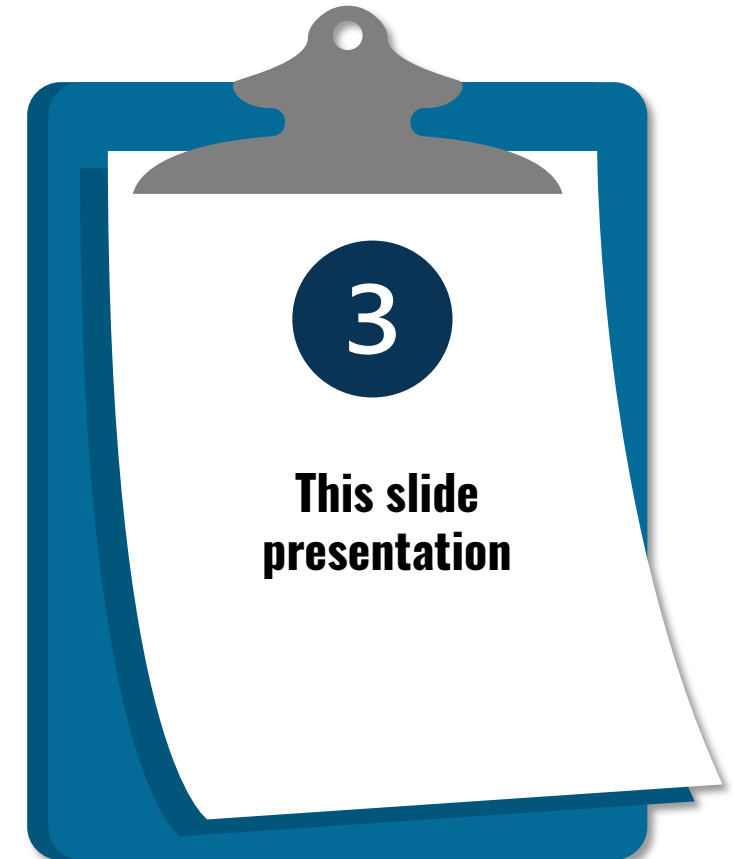
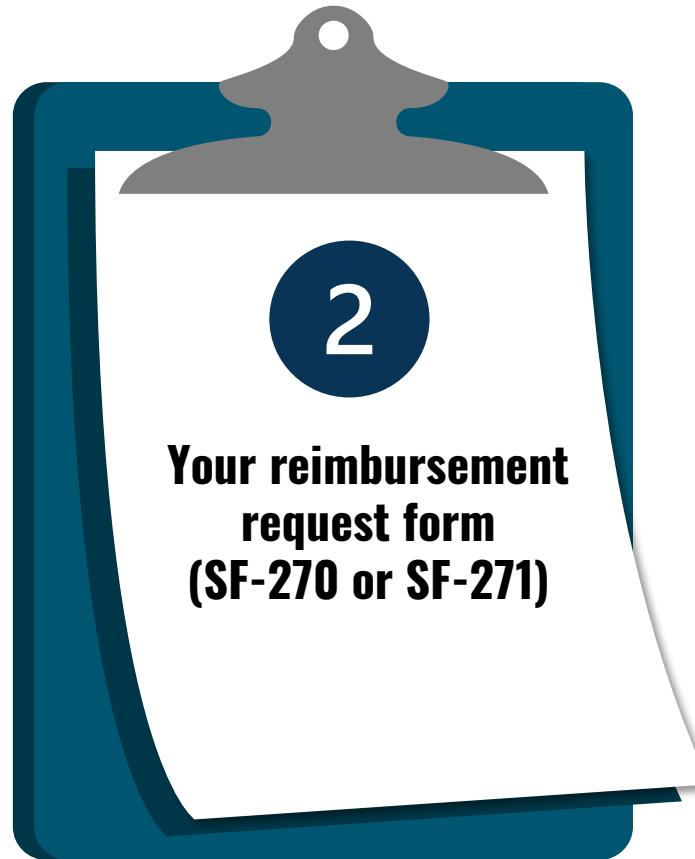
We'll share these slides with you to use as a step-by-step reference as you complete your quarterly reports.





# Before You Get Started

There are three helpful documents you should have up and ready to reference as you complete your SS4A quarterly reporting forms. You will need them to help ensure that your information is consistent across all your documents.

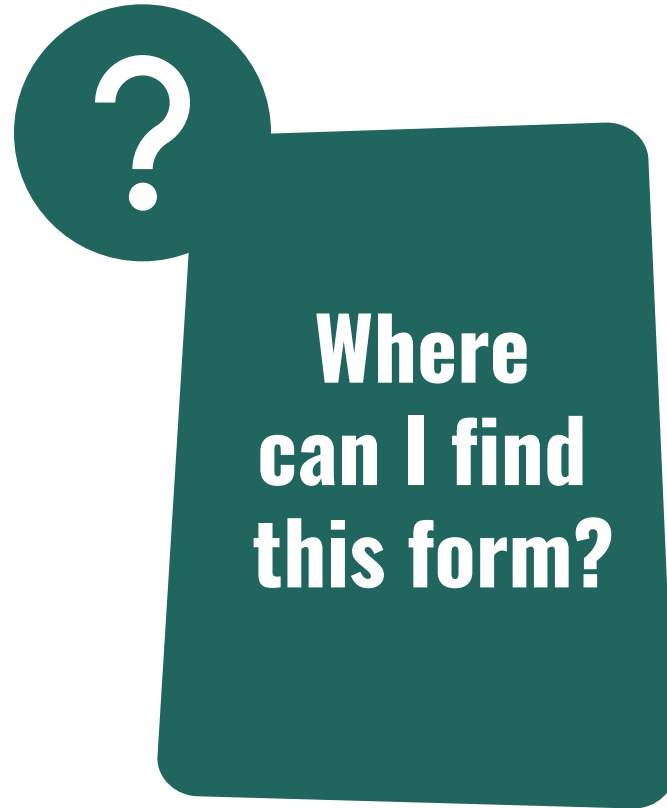


# Performance Progress Report (PPR)



The purpose of this form is to provide FHWA with performance information regarding scope, schedule, and budget for your project, and help demonstrate your progress.

# Performance Progress Report (PPR)



The PPR is not available under Post Award Reporting Forms on the Grants.gov site.

**Your FHWA POC will provide this form to you.**



# PPR Section 1: Project Information

**Project Name**  
Input your project name as listed on your executed grant agreement.

**State**  
Input your state.

**Name of Grant Recipient**  
Input the exact Agency/Organization name as it appears on line 4. Award To in your executed grant agreement.

**Submission Date**  
Input the date the report is being submitted to FHWA. This submission date prompts the screening and review of your quarterly reports for the appropriate quarter.

**Award Number**  
Input the number listed on line 1. Federal Award No. in your executed grant agreement.

| Project Information            |   |                         |                   |
|--------------------------------|---|-------------------------|-------------------|
| PROJECT NAME                   | Agency/Organization and Project Name        |                         |                   |
| STATE                          | FEDERAL AGENCY TO WHICH REPORT IS SUBMITTED | SUBMISSION DATE         | AWARD NUMBER      |
| Recipient State                | FHWA (pre-populated)                        |                         |                   |
| NAME OF GRANT RECIPIENT        |   | REPORT YEAR AND QUARTER | NOFO FUNDING YEAR |
| Exact Agency/Organization name |   | Ex. Q4 2023             | Ex. 2022          |

**Report Year and Quarter**  
This field is a drop down with options for the report year and quarter. Select the quarter and year on which you are reporting.

| Quarter | Months in Quarter Being Reported On |
|---------|-------------------------------------|
| Q1      | January to March                    |
| Q2      | April to June                       |
| Q3      | July to September                   |
| Q4      | October to December                 |

**NOFO Funding Year**  
This field is a drop down with options for the NOFO funding years. Select the fiscal year for which you received funding.

# PPR Section 2: Project Overall Status

## Project Overall Status

Input any deviations or changes to your Scope, Schedule, and/or Budget that occurred during the reporting quarter.

This includes any changes to what is described in **Article 3.1. Summary of Project's Statement of Work** or **Attachment B** in your executed grant agreement.

## Key Takeaway!

If there are no deviations or changes, input "N/A" or "None".

Do not leave this field blank.

| Project Overall Status   |  |
|--|--|
| Below, please describe any deviations from the scope, schedule, and budget in the grant agreement: |  |
| Scope  |  |
| Schedule   |  |
| Budget   |  |
| Project Significant Activities and Issues:   |  |
|  |  |
| Action Items/Outstanding Issues:   |  |
|  |  |

# PPR Section 2: Project Overall Status

## Project Significant Activities and Issues

Provide a short overview of the work you completed during the reporting quarter.

Provide high-level descriptions of any significant project activities, administrative items, major milestones, and/or resolved issues from the previous quarter that no longer need monitoring.

You must also note if any of your reported activities or issues could have a significant or adverse effect on the project's scope, schedule, or budget.

Status, responsible person(s), and due dates should be included for each action item/issue.

| Project Overall Status   |  |
|--|--|
| Below, please describe any deviations from the scope, schedule, and budget in the grant agreement: |  |
| Scope  |  |
| Schedule   |  |
| Budget   |  |
| <b>Project Significant Activities and Issues</b>   |  |
|  |  |
| Action Items/Outstanding Issues:   |  |
|  |  |

# Common Mistake

for Project Significant Activities and Issues

## Inconsistency with Project Significant Activities and Issues Fields

### Key Takeaway!

Providing sufficient detail and transparency in your deviation or issue descriptions will allow FHWA to support you in solving them, as needed!

## What a good report looks like:



If you have any deviations noted in the previous Scope, Schedule, or Budget lines, make sure to provide additional details in this section.

### Example Level of Detail for Major Milestone That May Have an Effect on Schedule and Cause a Deviation

*The [grant recipient organization] released an RFP and did not get any responses, the procurement specialist [name] has made changes to the RFP. We expect to release the updated RFP on June 12th, 2024. If no responses are received, an amendment to the schedule may be needed.*

### Example Level of Detail for Major Milestones

*The [grant recipient organization] has procured a consultant to assist with the completion of items within the scope of work.*

# PPR Section 2: Project Overall Status

| Project Overall Status   |  |
|--|--|
| Below, please describe any deviations from the scope, schedule, and budget in the grant agreement: |  |
| Scope  |  |
| Schedule   |  |
| Budget   |  |
| Project Significant Activities and Issues:   |  |
|  |  |
| <b>Action Items/Outstanding Issues:</b>  |  |
|  |  |

## Action Items/Outstanding Issues

List upcoming actions and next steps you plan to take place in the next quarter.

Include any outstanding issues that have not yet been resolved or require further monitoring.

The action items or outstanding issues may be moved from this section to the previous section (“Project Significant Activities”) upon full completion or implementation of the remedial action, and upon no further monitoring anticipated.





# Common Mistake

for Action Items/Outstanding Issues

## Lack of Information

### Key Takeaway!

Providing sufficient detail for your action items and next steps will ensure proper documentation for all the amazing project work you complete from quarter to quarter.

## What a good report looks like:

### Example Level of Detail for Action Items/Next Steps

*The [grant recipient organization] will identify stakeholders, public meeting locations, target dates and define agenda for community planning sessions to be held in Summer 2024.*

### Example Level of Detail for Outstanding Issue

*Sent out survey to parents from [x] high school on January 13th, 2024, to gather qualitative data on the safety of the crosswalk in front of the school. Some respondents found the open-ended questions confusing, resulting in less helpful answers than anticipated. We are working on finding an alternative to the open-ended questions.*

# PPR Section 3: Project Milestones

**ONLY** fill the milestone tables that apply to your grant.

You can leave the tables that are not applicable to your grant blank.

| Action Plan Project Milestones  |                                 |                                     |                      |
|---|---------------------------------|-------------------------------------|----------------------|
| Milestone   | Baseline Date (Grant Agreement) | Latest Amended Date (If applicable) | Actual/Expected Date |
| Planned Draft Action Plan Completion Date:  |                                 |                                     |                      |
| Planned Action Plan Completion Date:  |                                 |                                     |                      |
| Planned Action Plan Adoption Date:  |                                 |                                     |                      |
| Planned SS4A Final Report Submission Date:  |                                 |                                     |                      |
| Supplemental Planning Activity Project Milestones                                       |                                 |                                     |                      |
| Milestone   | Baseline Date (Grant Agreement) | Latest Amended Date (If applicable) | Actual/Expected Date |
| Planned Draft [insert type of project/resulting deliverable] Completion Date:           |                                 |                                     |                      |
| Planned [insert type of project/resulting deliverable] Completion Date:                 |                                 |                                     |                      |
| Planned Final Action Plan Adoption Date [insert type of project/resulting deliverable]: |                                 |                                     |                      |
| Planned SS4A Final Report Submission Date:  |                                 |                                     |                      |
| Demonstration Activity Project Milestones   |                                 |                                     |                      |
| Milestone   | Baseline Date (Grant Agreement) | Last Amended Date (If applicable)   | Actual/Expected Date |
| Planned NEPA Completion Date:   |                                 |                                     |                      |
| Planned Construction Start Date:  |                                 |                                     |                      |
| Planned Construction Substantial Completion and Open to Public Use Date:                |                                 |                                     |                      |
| Planned SS4A Final Report Submission Date:  |                                 |                                     |                      |

**Key Takeaway!**

Follow the milestone tables in your executed grant agreement.

# PPR Section 3: Project Milestones

Using the tables in Article 3.2 Project’s Estimated Schedule in your executed grant agreement, fill out the dates for all milestones tables that apply to your grant.

**3.2 Project’s Estimated Schedule**

**ACTION PLAN SCHEDULE**

| Milestone                                  | Schedule Date     |
|--|-------------------|
| Planned Draft Action Plan Completion Date: | March 30, 2025    |
| Planned Action Plan Completion Date:       | May 30, 2025      |
| Planned Action Plan Adoption Date:         | June 30, 2025     |
| Planned SS4A Final Report Date:            | December 30, 2025 |

| Action Plan Project Milestones             |                                 |                                     |                      |
|--|---------------------------------|-------------------------------------|----------------------|
| Milestone                                  | Baseline Date (Grant Agreement) | Latest Amended Date (If applicable) | Actual/Expected Date |
| Planned Draft Action Plan Completion Date: |                                 |                                     |                      |
| Planned Action Plan Completion Date:       |                                 |                                     |                      |
| Planned Action Plan Adoption Date:         |                                 |                                     |                      |
| Planned SS4A Final Report Submission Date  |                                 |                                     |                      |

# PPR Section 3: Project Milestones

**Baseline date** – Enter date as it appears in the column “Schedule Date” of Article 3.2 Project’s Estimated Schedule on your executed grant agreement.

**Latest amended date** – If you have made an amendment through your FHWA POC, enter the latest amended date here. If you have not made an amendment, leave this blank.

**Actual/expected date** – This is the date you expect to have the milestone completed.

- If you have an amended date, include the amended date here.
- If you do not have an amended date, input the baseline date.
- Once the expected date has passed, input the actual date this milestone was completed.

**3.2 Project’s Estimated Schedule**

**ACTION PLAN SCHEDULE**

| Milestone                                  | Schedule Date     |
|--|-------------------|
| Planned Draft Action Plan Completion Date: | March 30, 2025    |
| Planned Action Plan Completion Date:       | May 30, 2025      |
| Planned Action Plan Adoption Date:         | June 30, 2025     |
| Planned SS4A Final Report Date:            | December 30, 2025 |

| Action Plan Project Milestones             |                                 |                                     |                      |
|--|---------------------------------|-------------------------------------|----------------------|
| Milestone                                  | Baseline Date (Grant Agreement) | Latest Amended Date (If applicable) | Actual/Expected Date |
| Planned Draft Action Plan Completion Date: | 3/30/25                         |                                     | 3/30/25              |
| Planned Action Plan Completion Date:       | 5/30/25                         |                                     | 5/30/25              |
| Planned Action Plan Adoption Date:         | 6/30/25                         |                                     | 6/30/25              |
| Planned SS4A Final Report Submission Date  | 12/30/25                        |                                     | 12/30/25             |

# PPR Section 4: Certification

In the certification section, please enter the contact information of the authorized certifying official.

The authorized certifying official will most likely be the person who is submitting financial requests in Delphi/iSupplier and/or the lead recipient POC for the actual grant.

**Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).**

Name of Authorized Certifying Official:

Title of Authorized Certifying Official:

Signature of Authorized Certifying Official:

Telephone (Area code, number and extension):

Email Address:

# Federal Financial Report (SF-425)

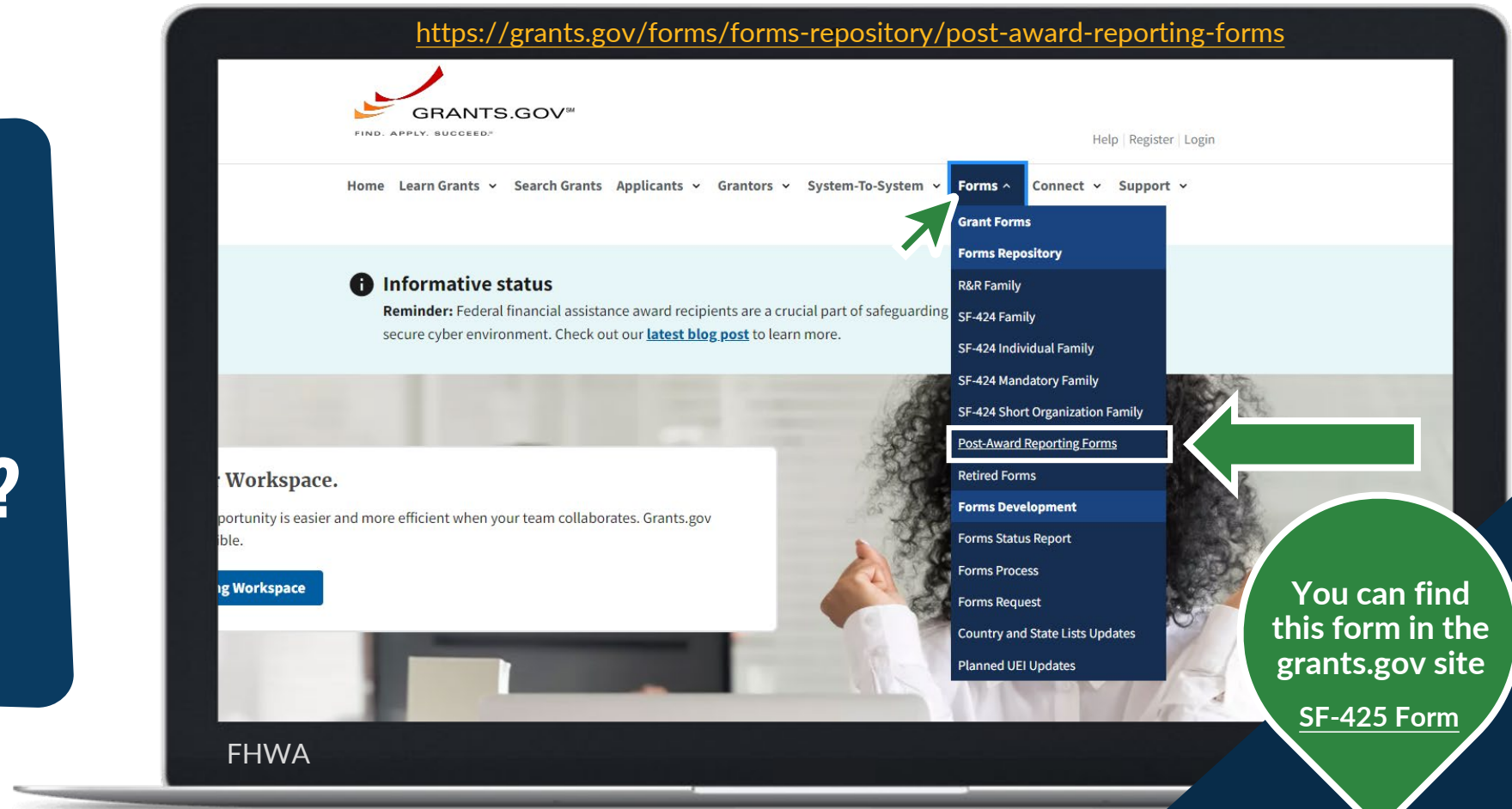


The purpose of this form is to provide FHWA with a detailed breakdown of expenditures and track the actual match or recipient share of expenditures on the project.

# Federal Financial Report (SF-425)

?

Where  
can I find  
this form?



You can find  
this form in the  
grants.gov site  
SF-425 Form

Forms > Post Award Reporting Forms >  
SF-425

# SF-425: #1 through #3

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

Input "US Department of Transportation Federal Highway Administration Office of Safety".

## 3. Recipient Organization

Input the exact Agency/Organization name and address as it appears on line 4. Award To in your executed grant agreement.

## 2. Federal Grant or Other Identifying Number Assigned by Federal Agency

Input the exact number located on line 1. Federal Award No. in your executed grant agreement.

|   |  |
|---|--|
| <p>1. Federal Agency and Organizational Element to Which Report is Submitted</p> <p>U.S. Department of Transportation Federal Highway Administration Office of Safety</p>   | <p>2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment)</p> <p></p> |
| <p>3. Recipient Organization (Name and complete address including Zip code)</p> <p>Recipient Organization Name: <input type="text"/></p> <p>Street1: <input type="text"/></p> <p>Street2: <input type="text"/></p> <p>City: <input type="text"/> County: <input type="text"/></p> <p>State: <input type="text"/> Province: <input type="text"/></p> <p>Country: <input type="text" value="USA: UNITED STATES"/> ZIP / Postal Code: <input type="text"/></p> |  |



# SF-425: #4a through #7

**4a. UEI**  
This is the Unique Entity Identifier number that was assigned to you by SAM.gov. Input the exact Unique Entity ID listed on line 4. Award To in your executed grant agreement.

**4b. EIN**  
This is your tax ID number that is assigned to you by the IRS. Input your EIN or TIN number listed on line 4. Award To in your executed grant agreement.

**5. Optional – Recipient Account Number or Identifying Number**  
If you have an internal tracking number that you use at your organization to identify your grant, you can input it here to help you easily find your grant in your own system if FHWA reaches out to you.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 4a. UEI<br><input type="text"/>   |  | 4b. EIN<br><input type="text"/>   |  | 5. Recipient Account Number or Identifying Number<br>(To report multiple grants, use FFR Attachment)<br><input type="text"/> |  |
| 6. Report Type<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Semi-Annual<br><input type="checkbox"/> Annual<br><input type="checkbox"/> Final |  | 7. Basis of Accounting<br><input type="checkbox"/> Cash<br><input type="checkbox"/> Accrual |  | 8. Project/Grant Period<br>From: <input type="text"/> To: <input type="text"/>   |  |
|   |  |   |  | 9. Reporting Period End Date<br><input type="text"/>   |  |

**6. Optional – Report Type**  
You can Select “Quarterly”.

**7. Optional – Basis of Accounting**  
You can select the basis of accounting that you use.

# SF-425: #8 through #9

|   |   |  |  |
|---|---|--|--|
| 4a. UEI<br><input type="text"/>   | 4b. EIN<br><input type="text"/>   | 5. Recipient Account Number or Identifying Number<br>(To report multiple grants, use FFR Attachment)<br><input type="text"/> |  |
| 6. Report Type<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Semi-Annual<br><input type="checkbox"/> Annual<br><input type="checkbox"/> Final | 7. Basis of Accounting<br><input type="checkbox"/> Cash<br><input type="checkbox"/> Accrual | 8. Project/Grant Period<br>From: <input type="text"/> To: <input type="text"/>   | 9. Reporting Period End Date<br><input type="text"/> |

**8. Project/Grant Period From: Date**  
This is the date that the FHWA Agreement Officer signed your grant agreement. Input the date listed on line 17. **Signature of Agreement Officer** in your executed grant agreement.

**8. Project/Grant Period To: Date** - This is the last date that costs could be incurred on your project. Input the date listed on line 6. **Period of Performance** in your executed grant agreement.

- If you listed an **exact date** for the end of your period of performance in your grant agreement, input that exact date.
- If you listed a **time period**, calculate the date from the date listed in 17. **Signature of Agreement Officer** on your executed grant agreement.

**9. Reporting Period End Date**  
This is the date associated with the end of the quarter that you are submitting your quarterly reports. This date tracks which quarter the form is tied to. For SS4A, quarters are based on the calendar year and the date you input will always be one of the following:

| Quarter | Months in Quarter Being Reported On | Reporting Period End Date |
|---------|-------------------------------------|---------------------------|
| Q1      | January to March                    | 3/31/YYYY                 |
| Q2      | April to June                       | 6/30/YYYY                 |
| Q3      | July to September                   | 9/30/YYYY                 |
| Q4      | October to December                 | 12/31/YYYY                |

# SF-425: #10a through 10c

**10a. Cash Receipts**  
 This line is not applicable to SS4A and FHWA does not require you to report this information.  
 Enter \$0 cumulative total in this field.

**10b. Cash Disbursements**  
 This line is not applicable to SS4A and FHWA does not require you to report this information.  
 Enter \$0 cumulative total in this field.

| 10. Transactions  | Cumulative |
|---|------------|
| <i>(Use lines a-c for single or multiple grant reporting)</i>             |            |
| <b>Federal Cash (To report multiple grants, also use FFR Attachment):</b> |            |
| a. Cash Receipts  | (\$0)      |
| b. Cash Disbursements   | (\$0)      |
| c. Cash on Hand (line a minus b)  | (\$0)      |

**10c. Cash on Hand**  
 This line will auto-populate to \$0 for you. You do not need to input anything.

**Key Takeaway!**  
 Because SS4A funding is expected to be provided on a reimbursement basis, Cash Receipts will equal Cash Disbursements, and Cash on Hand should be \$0.

# SF-425: #10d through #10f

## 10d. Total Federal funds authorized

This is the total amount of money that SS4A awarded you. This number stays the same for every quarterly report. Input the amount listed on line 11. **Federal Funds Obligated** in your executed grant agreement.

## 10e. Federal share of expenditures

This is how much of your SS4A grant funds you spent in the quarter. It includes how much you requested and received payment for through the quarter. Don't include other Federal funding sources, **ONLY** Federal SS4A funds.

## 10f. Federal Share of Unliquidated Obligations

This is how much of your SS4A grant funds have not yet been spent.

Calculate 10d. Total Federal funds authorized minus 10e. Total Federal share of expenditures and input the amount. This number should match the amount that is on your reimbursement request form: SF-270 (for non-construction projects) or SF-271 (for construction projects).

*(Use lines d-o for single grant reporting)*

| Federal Expenditures and Unobligated Balance             |                                    |
|--|------------------------------------|
| d. Total Federal funds authorized                        | (Input your SS4A award amount)     |
| e. Federal share of expenditures                         | (Input total spent during quarter) |
| f. Federal share on unliquidated obligations             | (Input 10d minus 10e)              |
| g. Total Federal share (sum of lines e and f)            | (Auto-populates)                   |
| h. Unobligated balance of Federal funds (line d minus g) | (Auto-populates)                   |

# SF-425: #10g through #10h

## 10g. Total Federal Share

This line will auto-populate for you. You do not need to input anything.

This amount is equal to 10e.

Federal share of expenditures plus 10f.

Federal share of unliquidated obligations.

Confirm that this line auto-populated correctly.

*(Use lines d-o for single grant reporting)*

### Federal Expenditures and Unobligated Balance

|    |   |                                    |
|----|---|------------------------------------|
| d. | Total Federal funds authorized                        | (Input your SS4A award amount)     |
| e. | Federal share of expenditures                         | (Input total spent during quarter) |
| f. | Federal share on unliquidated obligations             | (Input 10d minus 10e)              |
| g. | Total Federal share (sum of lines e and f)            | (Auto-populates)                   |
| h. | Unobligated balance of Federal funds (line d minus g) | (Auto-populates)                   |

## 10h. Unobligated balance of Federal funds

This line will auto-populate for you. You do not need to input anything.

This amount is equal to 10d. Total Federal funds authorized minus 10g. Total Federal share. Confirm that this line auto-populated correctly.

### Key Takeaway!

10h should be zero since USDOT obligates the funds via the signed grant agreement.



# SF-425: #10i through #10k

## 10i. Total recipient share required

This is the required amount the recipient must provide based on the 20% match requirement. The recipient share required is computed cumulatively based on the Total Federal Share for each budget period displayed in 10g. Total Federal share.

## 10j. Recipient share of expenditures

This is the actual matching or cost sharing provided by the recipient and should be equal to or greater than line 10i. Total recipient share required.

| Recipient Share:   |   |
|--|---|
| i. Total recipient share required                            | (Input total recipient share required)  |
| j. Recipient share of expenditures                           | (Input recipient share of expenditures) |
| k. Remaining recipient share to be provided (line i minus j) | (Auto-populates)                        |

## 10k. Remaining recipient share to be provided

This line will auto-populate for you. You do not need to input anything.

The amount is equal to 10i. Total recipient share required minus 10j. Recipient share of expenditures. Confirm that this line auto-populated correctly.



# SF-425: #10l through #10o, Sections 11 and 12

**Most Recipients will skip and do not fill out the following line items:**

- 10l through 10o
- Section 11
- Section 12

| 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)   |         |         |                |            |         | 0.00              |                  |
| 11. Indirect Expense   | a. Type | b. Rate | c. Period From | Period To  | d. Base | e. Amount Charged | f. Federal Share |
|  |         |         |                |            |         |                   |                  |
|  |         |         |                | g. Totals: |         |                   |                  |
| 12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation: |         |         |                |            |         |                   |                  |

# SF-425: #13a through #13e

## 13. Certification

13a to 13d. In this section, please enter the contact information of the authorized certifying official.

The authorized certifying official will most likely be the person who is submitting financial requests in Delphi/iSupplier and/or the lead recipient POC for the actual grant.

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

a. Name and Title of Authorized Certifying Official

Prefix:  First Name:  Middle Name:   
Last Name:  Suffix:   
Title:

b. Signature of Authorized Certifying Official

c. Telephone (Area code, number and extension)

d. Email Address

e. Date Report Submitted

14. Agency use only:





# Final Review Tips for Quarterly Reporting Forms



**Before you submit your quarterly reporting forms to your FHWA POC, make sure that you:**



Double check that all applicable line items match exactly what is on your executed grant agreement.



Double check that all dates are accurate according to your executed grant agreement and form completion instructions.



Double check that your authorized certifying official is the person submitting financial requests in Delphi/iSupplier and/or the lead recipient POC for the actual grant.



**Congratulations!**



**You've completed  
both of your SS4A  
quarterly reporting  
forms!**



To submit your quarterly reporting forms to SS4A, email your completed and signed forms to your FHWA POC.



U.S. Department of Transportation  
Federal Highway Administration



Safe Streets and Roads for All



# Questions?

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For any questions following the webinar, please reach out to the FHWA POC for your grant. If you need help identifying this POC, please contact the **SS4A Team** at: [SS4A.FHWA@dot.gov](mailto:SS4A.FHWA@dot.gov).



# Thank you!

