**Federal Financial Report**

(Follow form instructions)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Federal Agency and Organizational Element to which Report is Submitted**   Corporation for National Community Service | | | | | | 1. **Federal Grant or Other Identifying Number Assigned by Federal Agency**   <<Award\_Reporting\_Grant\_Number>> | | | | | | Page  1 | of  1 |
| 1. Recipient Organization (Name and complete address, including Zip code)   <<Award\_Reporting\_Add1>>  <<Award\_Reporting\_Add2>>  <<Award\_Reporting\_city1>>, <<Award\_Reporting\_states>>, <<Award\_Reporting\_Zip1>> | | | | | | | | | | | | | |
| **4a. DUNS Number**  <<Award\_DUNS>> | | **4b. EIN**  <<Award\_EIN>> | | **5. Recipient Account Number or Identifying Number**  <<Award\_Grant\_Number>> | | | | | | **6. Report Type**  Quarterly  Semi-Annual  Annual  Final | | **7. Basis of Accounting**  Cash Accrual | |
| **8. Project/Grant Period**  **From: (Month, Day, Year)**  <<Award\_Budget\_Period\_Start>> | | | | **To: (Month, Day, Year)**  <<Award\_Budget\_Period\_End>> | | | | | | **9. Reporting Period End Date**  **(Month, Day, Year)**  <<Award\_Reporting\_Reporting\_End\_Date>> | | | |
| **10. Transactions** | | | | | | | | | | **Cumulative** | | | |
| *(Use lines a-c for single or multiple grant reporting)* | | | | | | | | | | | | | |
| **Federal Cash** | | | | | | | | | | |  | | |
| 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 Unobligated Balance** | | | | | | | | | | | | | |
| d. Total Federal funds authorized | | | | | | | | | | | <<Award\_Reporting\_Total\_Fed\_Funds\_authorized\_Cumulative>> | | |
| e. Federal share of expenditures | | | | | | | | | | | <<Award\_Reporting\_Federal\_Share\_of\_expenditures\_C>> | | |
| f. Federal share of unliquidated obligations | | | | | | | | | | | <<Award\_Reporting\_Federal\_Share\_of\_expenditures\_Cumulative>> | | |
| g. Total Federal share (sum of lines e and f) | | | | | | | | | | | <<Award\_Reporting\_Total\_federal\_share>> | | |
| h. Unobligated balance of Federal funds (lines d minus g) | | | | | | | | | | | <<Award\_Reporting\_Unobligated\_balance\_of\_federal\_funds>> | | |
| **Recipient Share** | | | | | | | | | | | | | |
| i. Total recipient share required | | | | | | | | | | | <<Award\_Reporting\_Total\_Recipient\_share\_req\_Cumulative>> | | |
| j. Recipient share of expenditures | | | | | | | | | | | <<Award\_Reporting\_Recipient\_share\_of\_exp\_Cumulative>> | | |
| k. Remaining recipient share to be provided (line i minus j) | | | | | | | | | | | <<Award\_Reporting\_Remaining\_recipient\_share\_to\_be\_provided>> | | |
| **Program Income** | | | | | | | | | | | | | |
| l. Total recipient share required | | | | | | | | | | | <<Award\_Reporting\_Total\_Recipient\_share\_req\_Cumulative>> | | |
| m. Program income expended in accordance with the deduction alternative | | | | | | | | | | | <<Award\_Reporting\_Program\_income\_expended\_in\_accordance\_w>> | | |
| n. Program income expended in accordance with the addition alternative | | | | | | | | | | | <<Award\_Reporting\_Program\_income\_expended\_in\_accordance\_wi>> | | |
| o. Unexpended program income (line l minus line m or line n) | | | | | | | | | | | <<Award\_Reporting\_Unexpended\_program\_income>> | | |
| 11. Indirect Expense | a. Type | | b. Rate c. Period From  <<Award\_Reporting\_Reporting\_Start\_Date>> | | d. Period To  <<Award\_Reporting\_Reporting\_End\_Date>> | | e. Base  <<Award\_Reporting\_Basis>> | | f. Amount Charged  <<Award\_Reporting\_Previous\_Amounts\_Changed>> | | **g**. Federal Share  <<Award\_Reporting\_Federal\_Share\_of\_expenditures\_Cumulative>> | | |
|  | |  | |  | |  | |  | |  | | |
|  | |  | |  | |  | |  | |  | | |
|  | | | | | |  | |  | |  | | |
| 12. Remarks: Attach any explanation deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation: | | | | | | | | | | | | | |
| 13. Certification: 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 purpose set forth in the award documents. 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) | | | | | | | | | | | | | |
| a. Typed or Printed Name and Title of Authorized Certifying Official  <<Award\_Reporting\_Authorized\_By>> | | | | | | | | c. Telephone (Area code, number and extension)  <<Award\_Reporting\_Phone\_Number>> | | | | | |
| b. Signature of Authorized Certifying Official | | | | | | | | d. Email Address  <<Award\_Reporting\_Authorized\_Representative>> | | | | | |
| e. Date Report Submitted (Month, Day, Year)  <<Award\_Reporting\_Date\_report\_submitted>> | | | | | |
|  | | | | | | | | 14. Agency use only: | | | | | |

Standard Form 425 – Revised 10/11/2011

OMB Approval Number 0348-0061

Expiration Date 02/28/2015