

SF-425 Template Report

This guide explains how to use the SF-425 Template Report and descriptions and calculations for each field. The AmpliFund SF-425 Template report provides AmpliFund data for relevant fields on the Federal Financial Report PDF form. Current versions of the SF-425 - Federal Financial Report and SF-425A - Federal Financial Report Attachment can be found under *Knowledge Center>Tools and Forms*. Because our clients may use AmpliFund to capture grant data in a variety of ways, this report can be modified as needed with Custom Reporting.

Fields

Field Name	Description	AmpliFund Source / Calculation
1. Federal Agency and Organizational Element to Which Report is Submitted	Name of the Federal agency and organizational element identified in the award document or as instructed by the agency	Federal Agency and Organizational Element field in the Post-Award Information section of the grant record
2. Federal Grant or Other Identifying Number Assigned by Federal Agency	Grant number assigned to the award by the Federal agency. For multiple awards, use the SF-425A.	Identifying Number Assigned by Federal Agency field in the Post- Award Information section of the grant record
3. Recipient Organization Name	Recipient organization's name	Name field on License Information in Administration
3. Recipient Street1	Recipient organization's address line 1	Address Line 1 field on License Information in Administration
3. Recipient Street2	Recipient organization's address line2 (optional)	Address Line 2 field on License Information in Administration
3. Recipient City	Recipient organization's city	City field on License Information in Administration
3. Recipient County	Recipient organization's county (optional)	Not mapped
3. Recipient State	Recipient organization's state	State field on License Information in Administration
3. Recipient Province	Recipient organization's province (optional)	Not mapped
3. Recipient Country	Recipient organization's country. Formatted as "USA: UNITED STATES"	Country field on License Information in Administration
3. Recipient ZIP / Postal Code	Recipient organization's ZIP code	Zip Code field on License Information in Administration

This table describes the default mapping of AmpliFund data to SF-425 fields.



Field Name	Description	AmpliFund Source / Calculation
4a. UEI	Recipient organization's Unique Entity Identifier (UEI) number, formerly DUNS number	Unique Entity Identifier field on License Information in Administration
4b. EIN	Recipient organization's Employer Identification Number (EIN)	EIN / Federal Tax ID field on License Information in Administration
5. Recipient Account Number or Identifying Number	Account number or any other identifying number assigned by the recipient to the award. This number is for the recipient's use only and is not required by the Federal agency. For multiple awards, use the SF-425A.	Recipient Account Number field in the <i>Post-Award Information</i> section of the grant record
6. Report Type	Quarterly, Semi-Annual, Annual , or Final . Do not use for multiple awards.	Not mapped
7. Basis of Accounting	Cash (expenses recorded when paid) or Accrual (expenses recorded when incurred) for recording transactions related to the award(s) and for preparing this FFR.	Not mapped
8. Project/Grant Period From	 The period established in the award document during which Federal sponsorship begins. Note: Some agencies award multi-year grants for a project period that is funded in increments or budget periods (typically annual increments). Throughout the project period, agencies often require cumulative reporting for consecutive budget periods. Under these circumstances, enter the beginning dates of the project period. Do not complete this line if reporting on multiple awards. 	Grant Start Date field in the <i>Post-</i> <i>Award Information</i> section of the grant record



Field Name	Description	AmpliFund Source / Calculation
8. Project/Grant Period To	The period established in the award document during which Federal sponsorship ends.	Grant End Date field in the <i>Post-</i> <i>Award Information</i> section of the grant record
	Note: Some agencies award multi-year grants for a project period that is funded in increments or budget periods (typically annual increments). Throughout the project period, agencies often require cumulative reporting for consecutive budget periods. Under these circumstances, enter the ending dates of the project period not the budget period.	
	Do not complete this line if reporting on multiple awards.	
9. Reporting Period End Date	Ending date of the reporting period. For quarterly, semi-annual, and annual interim reports, use the following reporting period end dates: 3/31, 6/30, 9/30, or 12/31. For final FFRs, the reporting period end date shall be the end date of the project or grant period.	Not mapped
10a. Cash Receipts	Cumulative amount of actual cash received from the Federal agency as of the reporting period end date (optional).	Sum of all cash receipts for the grant.



Field Name	Description	AmpliFund Source / Calculation
10b. Cash Disbursements	Cumulative amount of Federal fund disbursements (such as cash or checks) as of the reporting period end date (optional). Disbursements are the sum of actual cash disbursements for direct charges for goods and services, the amount of indirect expenses charged to the award, and the amount of cash advances and payments made to subrecipients and contractors. For multiple grants, report each grant separately on the FFR	Not mapped
	Attachment. The sum of the cumulative cash disbursements on the FFR Attachment must equal the amount entered on Line 10b, FFR.	
10c. Cash on Hand (line a minus b)	Amount of Line 10a minus Line 10b (optional). This amount represents immediate cash needs. If more than three business days of cash are on hand, the Federal agency may require an explanation on Line 12, Remarks, explaining why the drawdown was made prematurely or other reasons for the excess cash.	=10a - 10b
10d. Total Federal funds authorized	Enter the total Federal funds authorized as of the reporting period end date (optional).	Grant Awarded Amount minus the match requirement
10e. Federal share or expenditures	Amount of Federal fund expenditures (optional). For Cash basis, this includes amount of cash advance payments and payments made to subrecipients. For Accrual basis, this includes the net change in the amounts owed by the recipient. Do not include program income expended.	Sum of grant-funded amount of expenses



Field Name	Description	AmpliFund Source / Calculation
10f. Federal share of unliquidated obligations	Federal portion of unliquidated obligations, including direct and indirect expenses (optional). For Cash basis, these are obligations incurred, but not yet paid. For Accrual basis, these are obligations incurred, but for which an expenditure has not yet been recorded. On the final report, this line should be zero unless the awarding agency has provided other instructions. Do not include any amount in Line 10f that has been reported in Line 10e.	Grant-funded budgeted amount minus grant-funded expenses
10g. Total Federal share (sum of lines e and f)	Sum of Lines 10e and 10f (optional).	=10e + 10f
10h. Unobligated balance of Federal Funds (line d minus g)	Line 10d minus Line 10g (optional).	=10d - 10g
10i. Total recipient share required	Total required recipient share for reporting period, including all match required (optional). This should not exceed the Federal match requirement.	Grant match requirement
10j. Recipient share of expenditures	Recipient share of actual cash disbursements or outlays (less any rebates, refunds, or other credits) including payments to subrecipients and contractors (optional). This may include the value of allowable third-party in- kind contributions and recipient share of program income used to finance the non-Federal share of the project or program. Note: On the final report this line should be equal to or greater than the amount of Line 10i.	Sum of match on expenses
10k. Remaining recipient share to be provided (line i minus j)	Line 10i minus Line 10j (optional). If negative, report \$0.00.	= 10i - 10j



Field Name	Description	AmpliFund Source / Calculation
10I. Total Federal program income earned	Amount of Federal program income earned (optional). Do not report any program income here that is being allocated as part of the recipient's cost-sharing amount included in Line10j.	Not mapped
10m. Program Income expended in accordance with the deduction alternative	Amount of program income that was used to reduce the Federal share of the total project costs (optional).	Not mapped
10n. Program Income expended in accordance with the addition alternative	Amount of program income that was added to funds committed to the total project costs and expended to further eligible project or program activities (optional).	Not mapped
10o. Unexpended program income (line I minus line m and n)	Line 10I minus Line 10m and Line 10n (optional). This amount should be the program income that has been earned but not expended, as of the reporting period end date.	= 10I - (10m + 10n)
11a. Indirect Type	Indirect cost rate type: Provisional, Predetermined, Final , or Fixed (optional).	Not mapped
11b. Indirect Rate	Indirect cost rate in effect during the reporting period (optional).	Not mapped
11c. Indirect Period From	Beginning effective dates for the rate (optional).	Not mapped
11c. Indirect Period To	Ending effective dates for the rate (optional).	Not mapped
11d. Indirect Base	Amount of the base against which the rate was applied (optional).	Not mapped
11e. Indirect Amount Charged	Amount of indirect costs charged during the time period specified (optional).	Not mapped
11f. Federal Share	Federal share of the amount in 11e (optional).	Not mapped
11a2. Indirect Type	Additional indirect cost rate type during the reporting period (optional).	Not mapped



Field Name	Description	AmpliFund Source / Calculation
11b2. Indirect Rate	Additional indirect cost rate during the reporting period (optional).	Not mapped
11c2. Indirect Period From	Beginning dates for additional rate (optional)	Not mapped
11c2. Indirect Period To	Ending dates for additional rate (optional)	Not mapped
11d2. Indirect Base	Amount of the base against which the additional rate was applied (optional).	Not mapped
11e2. Indirect Amount Charged	Amount of indirect costs charged during the time period specified (optional).	Not mapped
11f2. Federal Share	Federal share of the amount in 11e2 (optional).	Not mapped
11g. Total Base	Totals for columns 11d (optional).	= 11d + 11d2
11g. Total Amount Charged	Totals for columns 11e (optional).	= 11e + 11e2
11g. Total Federal Share	Totals for columns 11f (optional).	= 11f + 11f2
12. Remarks	Any explanations or additional information required by the Federal sponsoring agency including excess cash as stated in line 10c (optional).	Not mapped
13a. Certifying Official Prefix	Prefix of the authorized certifying official (optional).	Not mapped
13a. Certifying Official First Name	First name of the authorized certifying official.	Not mapped
13a. Certifying Official Middle Name	Middle name of the authorized certifying official (optional).	Not mapped
13a. Certifying Official Last Name	Last name of the authorized certifying official.	Not mapped
13a. Certifying Official Suffix	Suffix of the authorized certifying official (optional)	Not mapped
13a. Certifying Official Title	Title of the authorized certifying official.	Not mapped
13b. Signature of Authorized Certifying Official	The authorized certifying official must sign here.	Not mapped



Field Name	Description	AmpliFund Source / Calculation
13c. Telephone (Area code, number and extension)	Telephone number (including area code and extension) of the individual listed in Line 13a.	Not mapped
13d. Email Address	E-mail address of the individual listed in Line 13a.	Not mapped
13e. Date Report Submitted	Date the FFR is submitted to the Federal agency using the month, day, year format.	Not mapped