

US Department of Education Washington, D.C. 20202

GRANT AWARD NOTIFICATION

-	RECIPIENT NAME	2 AWARD INFORMATION		
	MICHIGAN DEPARTMENT OF EDUCATION JOHN A. HANNAH BLDG. 608 WEST ALLEGAN STREET P.O. BOX 30008 LANSING, MI 48909 - 7508	PR/AWARD NUMBER ACTION NUMBER ACTION TYPE AWARD TYPE	R 1 E New	7
3	PROJECT STAFF	4 PROJECT DESCRIPTION		
	RECIPIENT STATE DIRECTOR Teri Chapman (517) 335-0455 ChapmanT2@michigan.gov EDUCATION PROGRAM CONTACT Gregory Corr (202) 245-7309 gregg.corr@ed.gov EDUCATION PAYMENT HOTLINE G5 PAYEE HELPDESK 888-336-8930 edcaps.user@ed.gov	84.173A STATE GRANT - B (619	?)	
5	KEY PERSONNEL			
	N/A			
6	AWARD PERIODS			
7	FUTURE BUDGET PERIODS N/A AUTHORIZED FUNDING CURRENT AWARD AMOUNT \$12	2,532,594.00		
	PREVIOUS CUMULATIVE AMOUNT	\$0.00 \$0.532,594.00		
8	ADMINISTRATIVE INFORMATION			
8	ADMINISTRATIVE INFORMATION DUNS/SSN 805336641 REGULATIONS CFR PART 300 EDGAR AS APPLICABLE 2 CFR AS APPLICABLE			
8	ADMINISTRATIVE INFORMATION DUNS/SSN 805336641 REGULATIONS CFR PART 300 EDGAR AS APPLICABLE			
	ADMINISTRATIVE INFORMATION DUNS/SSN 805336641 REGULATIONS CFR PART 300 EDGAR AS APPLICABLE 2 CFR AS APPLICABLE			
8	ADMINISTRATIVE INFORMATION DUNS/SSN 805336641 REGULATIONS CFR PART 300 EDGAR AS APPLICABLE 2 CFR AS APPLICABLE ATTACHMENTS 1,3,8,9,10,11,12,13, LEGISLATIVE AND FISCAL DATA AUTHORITY: PL 108-446 PART			DN ACT
	ADMINISTRATIVE INFORMATION DUNS/SSN 805336641 REGULATIONS CFR PART 300 EDGAR AS APPLICABLE 2 CFR AS APPLICABLE ATTACHMENTS 1,3,8,9,10,11,12,13, LEGISLATIVE AND FISCAL DATA AUTHORITY: PL 108-446 PART PROGRAM TITLE: SPECIAL EDUCA	14 , E-3 , E4 , E5 - B INDIVIDUAL WITH DISAE TION - PRESCHOOL GRANTS LIMITATION ACTIVITY C		DN ACT AMOUNT \$12,532,594.00



US Department of Education Washington, D.C. 20202

GRANT AWARD NOTIFICATION

10		RD NUMBER:	H173A180117			
		NT NAME:	MICHIGAN L	DEPARTMENT OF EDUCATION		
	TERMS A	AND CONDITIONS				
	 The Office of Management and Budget requires all Federal agencies to assign a Federal Award Identifying Number (FAIN) to each of their financial assistance awards. The PR/AWARD NUMBER identified in Block 2 is your FAIN. 					
		ument the assigned PR/ paward made under this				
				performance of any portion of the substantive phe recipient award to an eligible subrecipient.	project or program for	
		(The payments receiv	ved for goods or services pr	of property and services needed to carry out the rovided as a contractor are not Federal awards, inistrative Requirements, Cost Principles, and	see 2 CFR 200.501(f)	
		3. A subaward may b considers a contract.	e provided through any leg	al agreement, including an agreement that you	or a subrecipient	
	(2)	The negotiated indire GAN applies to this g		cost allocation plan approved for the entity iden	ntified in Block 1 of this	
	(3)	AND OTHER DOCU PART WITH FEDER	JMENTS DESCRIBING T RAL MONEY, ALL GRAN	EASES, REQUESTS FOR PROPOSALS, BII THIS PROJECT OR PROGRAMS FUNDED I TEES RECEIVING FEDERAL FUNDS, INC MENTS, SHALL STATE CLEARLY:	N WHOLE OR IN	
		2) THE PERCENTAFINANCED WITH I3) THE PERCENTA	GE OF THE TOTAL COS ⁷ FEDERAL FUNDS, AND GE AND DOLLAR AMOU	UNDS FOR THE PROJECT, T OF THE PROJECT THAT WILL BE UNT OF THE TOTAL COST OF THE		
		PROJECT THAT W	LL BE FINANCED BY N	ON-GOVERNMENTAL SOURCES.		
		AS OF 07/01/97, FE APPROPRIATED.	DERAL FISCAL YEAR (F	FFY) WILL REFER TO THE YEAR THE FUI	NDS WERE	
	(4) UNDER THE "TYDINGS AMENDMENT," SECTION 421(b) OF THE GENERAL EDUCATION PROVISIONS ACT, 20 U.S.C. 1225(b), ANY FUNDS THAT ARE NOT OBLIGATED AT THE END OF THE FEDERAL FUNDING PERIOD SPECIFIED IN BLOCK 6 SHALL REMAIN AVAILABLE FOR OBLIGATION FOR AN ADDITIONAL PERIOD OF 12 MONTHS.					
				AUTHORIZING OFFICIAL	DATE	

EXPLANATION OF BLOCKS ON THE GRANT AWARD NOTIFICATION

(See Block 2 of the Notification) For Discretionary, Formula and Block Grants 1. RECIPIENT NAME - The legal name of the recipient or name of the primary organizational unit that was identified in the application, state plan or other documents required to be submitted for funding by the grant program. 2. AWARD INFORMATION - Unique items of information that identify this notification. PR/AWARD NUMBER - A unique, identifying number assigned by the Department to each application. On funded applications, this is commonly known as the "grant number" or "document number." The PR/Award Number is also known as the Federal Award Identifying Number, or FAIN. ACTION NUMBER - A numeral that represents the cumulative number of steps taken by the Department to date to establish or modify the award through fiscal or administrative means. Action number "01" will always be "NEW AWARD" ACTION TYPE - The nature of this notification (e.g., NEW AWARD, CONTINUATION, REVISION, ADMINISTRATIVE) AWARD TYPE - The particular assistance category in which funding for this award is provided, i.e., DISCRETIONARY, FORMULA, or BLOCK. If this award was made under a Research and Development grant program, the terms RESEARCH AND DEVELOPMENT will appear under DISCRETIONARY, FORMULA OR BLOCK. 3. PROJECT STAFF - This block contains the names and telephone numbers of the U.S. Department of Education and recipient staff who are responsible for project direction and oversight. *RECIPIENT PROJECT DIRECTOR - The recipient staff person responsible for administering the project. This person represents the recipient to the U.S. Department of Education. EDUCATION PROGRAM CONTACT - The U.S. Department of Education staff person responsible for the programmatic, administrative and businessmanagement concerns of the Department. EDUCATION PAYMENT CONTACT - The U.S. Department of Education staff person responsible for payments or questions concerning electronic drawdown and financial expenditure reporting. 4. PROJECT TITLE AND CFDA NUMBER - Identifies the Catalog of Federal Domestic Assistance (CFDA) subprogram title and the associated subprogram number. 5.* KEY PERSONNEL - Name, title and percentage (%) of effort the key personnel identified devotes to the project. 6. AWARD PERIODS - Project activities and funding are approved with respect to three different time periods, described below: BUDGET PERIOD - A specific interval of time for which Federal funds are being provided from a particular fiscal year to fund a recipient's approved activities and budget. The start and end dates of the budget period are shown. PERFORMANCE PERIOD - The complete length of time the recipient is proposed to be funded to complete approved activities. A performance period may contain one or more budget periods. *FUTURE BUDGET PERIODS - The estimated remaining budget periods for multi-year projects and estimated funds the Department proposes it will award the recipient provided substantial progress is made by the recipient in completing approved activities, the Department determines that continuing the project would be in the best interest of the Government, Congress appropriates sufficient funds under the program, and the recipient has submitted a performance report that provides the most current performance information and the status of budget expenditures. 7. AUTHORIZED FUNDING - The dollar figures in this block refer to the Federal funds provided to a recipient during the award periods. *THIS ACTION - The amount of funds obligated (added) or de-obligated (subtracted) by this notification. *BUDGET PERIOD - The total amount of funds available for use by the grantee during the stated budget period to this date. *PERFORMANCE PERIOD - The amount of funds obligated from the start date of the first budget period to this date. RECIPIENT COST SHARE - The funds, expressed as a percentage, that the recipient is required to contribute to the project, as defined by the program legislation or regulations and/or terms and conditions of the award. RECIPIENT NON-FEDERAL AMOUNT - The amount of non-federal funds the recipient must contribute to the project as identified in the recipient's application. When non-federal funds are identified by the recipient where a cost share is not a legislation requirement, the recipient will be required to provide the nonfederal funds.

8. ADMINISTRATIVE INFORMATION - This information is provided to assist the recipient in completing the approved activities and managing the project in accordance with U.S. Department of Education procedures and regulations.

DUNS/SSN - A unique, identifying number assigned to each recipient for payment purposes. The number is based on either the recipient's assigned number from Dun and Bradstreet or the individual's social security number.

*REGULATIONS - Title 2 of the Code of Federal Regulations(CFR), Part 200 as adopted at 2 CFR 3474; the applicable parts of the Education Department General Administrative Regulations (EDGAR), specific program regulations (if any), and other titles of the CFR that govern the award and administration of this grant.

*ATTACHMENTS - Additional sections of the Grant Award Notification that discuss payment and reporting requirements, explain Department procedures, and add special terms and conditions in addition to those established, and shown as clauses, in Block 10 of the award. Any attachments provided with a notification continue in effect through the project period until modified or rescinded by the Authorizing Official.

9. LEGISLATIVE AND FISCAL DATA - The name of the authorizing legislation for this grant, the CFDA title of the program through which funding is provided, and U.S. Department of Education fiscal information.

FUND CODE, FUNDING YEAR, AWARD YEAR, ORG.CODE, PROJECT CODE, OBJECT CLASS -

The fiscal information recorded by the U.S. Department of Education's Grants Management System (G5) to track obligations by award. **AMOUNT** - The amount of funds provided from a particular appropriation and project code. Some notifications authorize more than one amount from separate appropriations and/or project codes. The total of all amounts in this block equals the amount shown on the line, "THIS ACTION" (See "AUTHORIZED FUNDING" above (Block 7)).

10. TERMS AND CONDITIONS - Requirements of the award that are binding on the recipient.

*PARTICIPANT NUMBER - The number of eligible participants the grantee is required to serve during the budget year.

*GRANTEE NAME - The entity name and address registered in the System for Award Management (SAM). This name and address is tied to the DUNS number registered in SAM under the name and address appearing in this field. This name, address and the associated DUNS is what is displayed in the SAM Public Search.

***PROGRAM INDIRECT COST TYPE** - The type of indirect cost permitted under the program (i.e. Restricted, Unrestricted, or Training).

*PROJECT INDIRECT COST RATE - The indirect cost rate applicable to this grant.

*AUTHORIZING OFFICIAL - The U.S. Department of Education official authorized to award Federal funds to the recipient, establish or change the terms and conditions of the award, and authorize modifications to the award

FOR FORMULA AND BLOCK GRANTS ONLY:

(See also Blocks 1, 2, 4, 6, 8, 9 and 10 above)

3. PROJECT STAFF - The U.S. Department of Education staff persons to be contacted for programmatic and payment questions.

7. AUTHORIZED FUNDING

CURRENT AWARD AMOUNT - The amount of funds that are obligated (added) or de-obligated (subtracted) by this action. **PREVIOUS CUMULATIVE AMOUNT** - The total amount of funds awarded under the grant before this action.

CUMULATIVE AMOUNT - The total amount of funds awarded under the grant, this action included.

* This item differs or does not appear on formula and block grants.

UNITED STATES DEPARTMENT OF EDUCATION OFFICE OF THE CHIEF FINANCIAL OFFICER & CHIEF INFORMATION OFFICER

Teri Chapman MICHIGAN DEPARTMENT OF EDUCATION JOHN A. HANNAH BLDG. 608 WEST ALLEGAN STREET P.O. BOX 30008

LANSING, MI 48909 - 7508

SUBJECT: Payee Identification for Grant Award H173A180117

This is to inform you that the United States Department of Education does not have a payee and bank account of record designated for the above listed grant award. You will not be able to request funds for this grant award until a payee and bank account of record are established.

- 1) All SF-1199A, Direct Deposit and Fedwire Sign-Up forms must be mailed to the Department of Education. The SF-1199A must contain original signatures for both the recipient and bank officials.
- 2) First time recipients establishing a bank account for a new award must include a copy of the grant award document with the cover letter and SF-1199A, Direct Deposit or Fedwire Sign-Up forms.
- 3) The Grant Administration and Payment System (GAPS) has been enhanced to produce an automated notification when bank account data has been changed or deleted. This automated notification is transmitted via e-mail to Payees having e-mail capacity or mailed to recipients without an e-mail address.
- 4) All banking information requests, including establishing a new bank account, modifying an existing bank account or deleting a bank account must be accompanied with a cover letter requesting the specific action. The cover letter must be on the letterhead of the requesting payee. The cover letter must contain the following information:

- DUNS Number

- e-mail address (if available) for the person to receive automated notification
- signature and phone number of the person requesting the bank information change

Mail Cover Letters and accompanying forms to:

U.S. Department of Education 400 Maryland Ave, SW, Rm. 4C146 Washington, DC 20202-4110

UNITED STATES DEPARTMENT OF EDUCATION OFFICE OF THE CHIEF FINANCIAL OFFICER & CHIEF INFORMATION OFFICER

Attn: Financial Management Operations

If you have any questions or require assistance concerning establishing a payee record for a bank account please contact the G5 Hotline at 1-888-336-8930.

Dear G5 Payee:

To obtain your G5 Login ID, you will need to complete the G5 External User Access Request Form and return it notarized to the U.S. Department of Education. Attached are the instructions for accessing and completing the form. Upon receiving the notarized form, the Department will send you an email with your new G5 Login ID.

Please mail the form to:

U.S. Department of Education Office of the Chief Information Officer Mail Stop - 4110 400 Maryland Avenue S.W. Washington, DC 20202 Attn: Functional Applications Team

Thank you for your continued support of the U.S. Department of Education's G5 Grant Management System. Please contact the G5 Hotline (888-336-8930) if you have any

Sincerely,

G5 Administration

Instructions for Completing the G5 External User Access Request Form

To establish direct access to your U.S. Department of Education G5 Grant Management System account, please complete the G5 External User Access Request Form attached, have it notarized, and mail the completed form to the address below.

Steps for Completing the G5 External User Access Request Form -

- 1. Go to <u>http://www.g5.gov</u> and click on the link, "Not Registered? Sign up".
- 2. Compete each data element of the form including the following elements:
 - a. User Type (Select Payee unless you are specifically a Servicer)
 - **b.** Dun and Bradstreet Number (DUNS)
 - **b.** Desired Role (Select Full Access to enable you to continue to draw funds, or View Only if you will only need to review account activity).
- 3. Print the form and then Submit your online registration.
- 4. You will immediately receive an email asking you to activate your account.
- 5. Click on the link in the email and select your password and Secret Question and Answer.
- 6. Congratulations! You now have an active account. Only one more step!!
- 7. Sign the printed (from step 3) G5 External User Access Request Form as the Authorized Payee in the presence of a Notary Public.
- **8.** Assure the G5 External User Access Request Form is notarized with appropriate seal and signature and expiration date.
- 9. Mail the completed, notarized G5 External User Access Request Form to the following address:

U.S. Department of Education Office of the Chief Information Officer Mail Stop - 4110 400 Maryland Avenue S.W. Washington DC 20202 Attn: Functional Applications Team

- 10. Allow two weeks for delivery and account updates.
- **11.** You will receive Email notification that your G5 External User Access Request Form has been processed and your roles have been assigned.
- 12. Congratulations, You're now able to access G5 directly.

As always, please contact the G5 Hotline (888-336-8930) with any questions.

INSTRUCTIONS ACH DIRECT DEPOSIT SIGN-UP FORM SF-1199A

Recipients can obtain an SF-1199A (Figure D-1) from their financial insitution. The preprinted instructions on the reverse side of the SF-1199A should be disregarded and the following instructions should be followed in completing the SF-1199A.

The recipient is to complete Sections 1 and 2 of the SF-1199A. The recipient's financial institution is to complete Section 3 and mail the completed form to the Department of Education. The financial institution will mail a copy of the completed SF-1199A to the recipient.

INSTRUCTIONS - SECTION 1

ITEM A	Name of Payee	Enter the name and address of payee's organization.
	Address	Enter telephone number of person authorized to certify the
	Telephone Number	payment request.
ITEM B	Name of Person(s) Entitled to Payment	Leave Blank.
ITEM C	Claim or Payroll ID	Enter the following information
	Number	Prefix: 9 digit D-U-N-S Number,
		Suffix: 11 character Grant Award nUmber.
ITEM D	Type of Depositor	Place an "X" in the Appropriate Box.
ITEM E	Depositor Account	Enter the payee's account number at the financial institution in
		which funds are to be deposited. Include blanks or dashes when
		entering the account number.
ITEM F	Type of Payement	Enter "X" in the "Other" box.
ITEM G	Box for Allotment of	Leave Blank.
	Payment Only	
Payee/Joint		Authorized Certifying Official for the payee is to sign the form.
Certification		

INSTRUCTIONS - SECTION 2

Government Agency Name	Enter:	U.S. Department of Education
Government Agency Address	Enter:	400 Maryland Avenue, SW
		Room 4C138
		Washington, DC 20202

INSTRUCTIONS - SECTION 3

To be completed by financial institution.

Director, Financial Payment Group U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202 - 4331

Ref: PR/Award No. H173A180117

Dear Sir:

Please transfer FEDWIRE payments for MICHIGAN DEPARTMENT OF EDUCATION to the following financial institution and depositor account beginning on this date: Month_____, Day_____, Year_____.

Information regarding the financial institution to which payments for D-U-N-S_____ are to be transferred is provided below.

Financial Institution	Corresponding Bank (if applicable):
Name:	Name:
Street:	
City:	City:
State:	State:
Zip:	
ABA Number:	ABA Number:
Account Number:	
Contact Name:	
Telephone No:	

Please update my account with the information as indicated above. If you have any questions, I may be reached at (____)

Sincerely,

Chief Financial Officer