

Indiana Criminal Justice Institute
Sub-grantee Instructions for Completing
Federal Funding Accountability and Transparency Act (FFATA) Form

The Federal Funding Accountability and Transparency Act (FFATA) allows every American to hold the government accountable for each spending decision. FFATA requires information on federal awards (federal financial assistance and expenditures) be made available to the public via www.USASpending.gov.

As a sub-recipient of federal funding you are required to report to ICJI on the funding you receive to be in compliance with the Federal Funding Accountability and Transparency Act. This information is posted by ICJI to www.USASpending.gov.

You are required to complete the attached form for each grant you receive from ICJI, as instructed by your grant manager.

Sub-grantees will not be permitted to draw down funds until the signed form is received in the ICJI office. You may mail, email (must scan signature) or fax the completed form to your grant manager.

Before completing the attached form, you must: 1) Determine your Congressional District number(s); 2) Obtain a DUNS number; and 3) Register/renew your System for Award Management Registration (SAM). See below for additional information. The registration process for SAM and DUNS can take several weeks. Please plan accordingly.

How to determine your Congressional District

To determine your congressional district go to the [U.S. House of Representatives](http://www.house.gov) website and enter your zip code under “Find Your Representative”.

Instructions on getting a DUNS Number

A DUNS number is a nine-digit sequence recognized as a unique identifier for tracking federal assistance applicants, recipients, and subrecipients. A DUNS number assignment is a free, one-time activity, and can be obtained by applying online at the [D & B DUNS Number for US Government contractors and Grantees](http://www.duns.com) or by calling 866-705-5711.

Instructions on registering/renewing your registration with the System for Award Management (SAM) (formerly Central Contractor Registration)

SAM is the federal government’s database for standard information about federal financial assistance applicants, recipients, and subrecipients. Recipients of grants (private, nonprofits, educational organizations, state and regional agencies, etc.) supported with federal grant funds must register on-line with [System for Award Management](http://www.sam.gov). Applicants must update or renew their registration at least once per year to maintain their active status. This is free. Registration can take several weeks to complete.

Please Return Signed Form:

Signed forms may be mailed to the attention of your grant manager at: ICJI 101 W. Washington St, Suite 1170 East, Indianapolis, IN 46204, faxed to 317-232-4979 or emailed to your grant manager.

**Federal Funding Accountability and Transparency Act
ICJI Subgrantee Information Form**

As instructed by your grant manager, complete this page for each grant awarded from ICJI.

Agency Name:

Project Title:

Project Description (500 characters max):

Award Amount:

City:

State:

Zip:

Congressional District for primary address:

County:

DUNS Number:

Location of primary performance of project (if different from above):

City:

State:

Zip:

Congressional District:

Check box if System for Award Management Registration Completed/Renewed:

Date of Completion/Renewal (must be within last 12 months):

Provide below the names and total compensation of the five most highly compensated employees of the entity (and parent if owned by another entity) ONLY if:

(i) The entity in the preceding fiscal year received:

(a) 80 percent or more of its annual gross revenues in Federal Awards; and

(b) \$25,000,000 or more in annual gross revenues from Federal Awards; and

(c) The public does not have access to information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d) or section 6104 of the Internal Revenue Code of 1986).

Officer Name

Total Compensation (salary and fringe)

1.

\$

2.

\$

3.

\$

4.

\$

5.

\$

Check box if question 13 does not apply to your agency:

Signature of Agency Representative:

Date: