Attachment II- Gamini (Federal & Prinzib)																					
COLUMN TO GAINE PROPER & PIN	****																				
				1																	
Igency Name: Deputy Mayor for Public Safety and Justice																					
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private)	Catalog of Federal Domestic Assistance Number (CFDA)	Grant Period of Performance (Le. 01/01/2019 - 12/01/2021)	Official Award Date (Anticipated date if not yet available)	Official Award Amount (Please list anticipated or previous year's amount if not yet available)	New vs Ongoing Grant	Carryover vs New Award	Grant Allowable Expenses: PS, NPS, or Both	Anticipated Grant Use: PS, NPS, or Both	Match Amount	NOE Requirement (FIN)	SOAR Grant Number	SOAR Grant Phase	FY22 Proposed Budget	FY22 Anticipated Revised Budget	FY22 # Proposed FTEs	FY22 # Anticipated Revised FTEs	DC Agency Program Manger Name	DC Agency Program Manager Position Title	Grant Purpose
				1											1			1			
-																					
				1																	
				1																	
				1											1			1			
-																					
				1																	
															50	50					
														Total	\$0	50					

Attachmen	t III-Federal Payments				
Agency Na	me: Deputy Mayor for	Public Safety and Jus	tice		
	FY 2021 Payment	FY 2022 Payment	Change	New/On-going	Purpose
	None	None	#VALUE!		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
			0		
	\$0	\$0	#VALUE!		

Attachment III- Grants Lapse (FY20)																		
Agency Name: Deputy Mayor for Public Safety and Justice		stice																
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private)	Catalog of Federal Domestic Assistance Number (CFDA)	Grant Period of Performance (i.e. 01/01/2018 - 12/31/2019)	Original, Official Award Date	Original, Official Award Amount	Expenditures Prior to FY19 (Including IDCR) On	New vs going Grant	Carryover vs New Award	Grant Allowable Expenses: PS, NPS, or Both	SOAR Grant Number	SOAR Grant Phase	FY20 Approved Budget	FY20 Revised Budget (Year-end)	FY20 Year-end Cash, Accrued, and ID Expenditures	FY20 Unexpended Grant Award Amount	FY20 # Approved FTEs	FY20 # Year-end DC Agency Program Manger FTEs Name
None																\$ -		
																\$-		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
																ş -		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
																\$ - \$ -		
																s -		
																-		
																\$ - \$ -		
																\$. \$		
																s -		
																\$ -		
																\$ -		
																s -		
																\$ -		
																s -		
																s -		
																\$ -		
																\$ -		
																\$ -		
												1				s -		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
																\$ -		
												Total	s -	s -	s -	\$ -	-	-
· · · · ·																		