ttachment III- Grants (Fed	eral & Private)																		—
gency Name:	Alcoholic Beve	erage Regulat	tion Administration	n (LQ0)															+
gonoy name:		in ago nogana																	
Official Grant SOAR Grant # / Name Grant Phase		(Federal or	Grantor/Agency Name (Federal or Private)	Federal Listing of Assistance (i.e., CFDA)	Grant Period of Performance (e.g. 01/01/2019 - 12/31/2021)	Official Award Date (Anticipated date if not yet available)	Official Award Amount (Please list anticipated or previous year's amount if not yet available)	One-time vs Recurring Grant	Carryover vs	Grant Allowable Expenses: PS, NPS, or Both	FY24 Match Amount	MOE Requirement (Y/N)	FY24 Proposed Budget	FY24 Anticipated Revised Budget	Proposed	FY24 # Anticipated Revised FTEs	DC Agency Program Manager Name	DC Agency Program Manager Position Title	Gra
None																			<u> </u>
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Attachmer	nt III-Federal F	Payments							
Agency Name: <u>A</u>		Alcoholic Be	verage Regu	llation Admin	istration (LQ0)			
	SOAR Fund Detail	SOAR Fund Detail Title	DIFS Fund	DIFS Fund Description	Purpose		FY 2024 Payment	Change	New/On-going
None								0	
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Attachment III- (Grants Lapse	e (FY22)										
Agency Name:	Alcoholic Be	everage Regulation	Administration (LQ	<u>0)</u>								
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private)	Federal Listing of Assistance (i.e., CFDA)	Grant Period of Performance / Obligation Period (e.g. 01/01/2019 - 12/31/2020)	Liquidation Date	SOAR Grant Number(s)	SOAR Grant Phase(s)	Total Award Amount	Amount Left in Federal Account (Amount Lapsed)	DC Agency Program Manger Name	DC Agency Program Manager Position Title	Grant Purpose
None												
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