Attachment III- Grants (Federal & Pri	ivate)																				
Agency Name:	Statehood Initiatives (AR0)																				
Official Grant Name	DIFS Award #	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private)	Federal Listing of Assistance (formerly known as 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	New vs Carryover Award	Grant Allowable Expenses: PS, NPS, or Both	FY25 Match Amount	MOE Requirement (Y/N)	: FY25 Proposed Budget	FY25 Anticipated Revised Budget	FY25# Proposed FTEs	FY25 # Anticipated Revised FTEs	DC Agency Program Manager Name	DC Agency Program Manager Position Title	Grant Purpose	Federal COVID Response (Yes/No - If Yes indicate the amount of the grant that is the result of the Federal COVID response and the Federal COVID response legislation that funded the grant.)	Additional Notes
N/A																					
													-								
																					·
													1								
							\$ -				\$ -		\$ -	\$ -	0.0	0.0					

ARO\_FY2S\_Attachment II - Canaria, Federal Payments, & Lapses.slax

Attachment III-Federal Payments									
Agency Name:	Statehood Initiatives (A	AR0)							
	DIFS Fund	DIFS Fund Description	Purpose	FY 2024 Payment	FY 2025 Payment	Change	New/On-going	Federal COVID Response (Yes/No - If Yes indicate the amount of the payment that is the result of the Federal COVID response and the Federal COVID response legislation that funded the payment.)	
	N/A					\$ -			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$			
						\$ -			
						\$			
						\$ -			
						\$ -			
				\$ -	\$ -	\$ -			·

						1							
Attachment III- Grants Lapse (FY	(23)												
				I .									
Agency Name:	Statehood Initiatives (AR0)	)							-				<u> </u>
-													
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private)	Federal Listing of Assistance (formerly known as CFDA #)	Grant Period of Performance / Obligation Period (e.g. 01/01/2019 - 12/31/2020)	Liquidation/Federal Drawdown Deadline	DIFS Award #(s)	Total Award Amount	Amount Left in Federal Account (Amount Lapsed)	DC Agency Program Manger Name	DC Agency Program Manager Position Title	Grant Purpose	Federal COVID Response (Yes/No - If Yes indicate the amount of the grant that is the result of the Federal COVID response and the Federal COVID response legislation that funded the grant.)	Additional Notes
N/A													
	1		I	1	I	l	\$ -	\$ -		1			

ARQ\_FY25\_Attachment III - Grants, Federal Payments, & Lapses.xlsx