



U.S. Small Business
Administration

GRANTS MANAGEMENT

Office of Women's Business Ownership

September 11, 2024



U.S. Small Business
Administration



Federal Financial Report (SF-425)

Recipient Information

Report Type and Reporting Period

Federal Cash

Federal Expenditures and Unobligated Balance

Recipient Share

Program Income

Indirect Expense

Signature and Date



Recipient Information

[View Burden Statement](#)

Federal Financial Report (Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Small Business Administration		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) SBAOEDWB123456	
3. Recipient Organization (Name and complete address including Zip code)			
Recipient Organization Name: Organization's Name			
Street1: 123 Main Street			
Street2: Suite 400			
City: Arlington	County: Arlington		
State: VA: Virginia	Province:		
Country: USA: UNITED STATES	ZIP / Postal Code: 22203-1452		
4a. UEI VQ5WK498QDX5	4b. EIN 12-3456789	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) 9605001EZ05255	



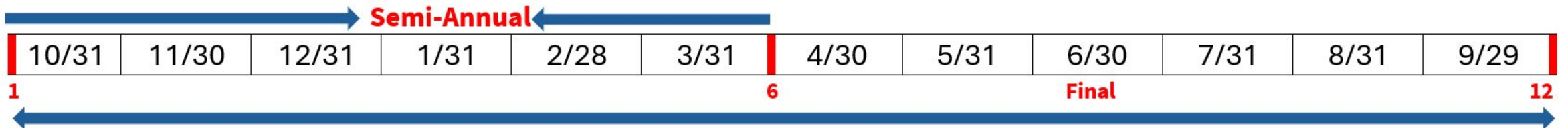
[Recipient Information

What would cause my SF-425 to be returned?

- Missing Award Number
- Incorrect Award Number
- Requisition Number is in Block 2
- HHS Payee Account Number is in Block 2
- Block 3 is blank, Recipient Organization Name is missing

Report Type and Reporting Period

6. Report Type <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual	8. Project/Grant Period From: <input type="text" value="09/30/2023"/> To: <input type="text" value="09/29/2024"/>	9. Reporting Period End Date <input type="text" value="03/31/2024"/>
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[Report Type and Reporting Period

What would cause my SF-425 to be returned?

- Block 6. Report Type is blank
- Block 6. Report Type is marked incorrectly
- Block 8. Project/Grant period is incorrect
- Block 8. Project/Grant period is blank
- Block 9. Reporting Period End Date is blank
- Block 9. Reporting Period End Date is incorrect



Federal Cash

Federal Cash (To report multiple grants, also use FFR attachment):	
a. Cash Receipts	75,000.00
b. Cash Disbursements	69,338.41
c. Cash on Hand (line a minus b)	5,661.59

10a. Cash Receipts: Federal funds received from SBA between the start of the project period and the Reporting Period End Date.

8. Project/Grant Period	
From:	To:
09/30/2023	09/29/2024

9. Reporting Period End Date
03/31/2024



Federal Cash

Federal Cash (To report multiple grants, also use FFR attachment):	
a. Cash Receipts	75,000.00
b. Cash Disbursements	69,338.41
c. Cash on Hand (line a minus b)	5,661.59

10b. Cash Disbursements: costs your organization have incurred from the start of the project period and the Reporting Period End Date that can be reimbursed.

8. Project/Grant Period	
From:	To:
09/30/2023	09/29/2024

9. Reporting Period End Date
03/31/2024



Federal Cash

Federal Cash (To report multiple grants, also use FFR attachment):	
a. Cash Receipts	75,000.00
b. Cash Disbursements	69,338.41
c. Cash on Hand (line a minus b)	5,661.59

10c. Cash on Hand: were all the Federal funds received, used by the end of the reporting period? YES | NO

9. Reporting Period End Date
03/31/2024 ←



Federal Cash

Federal Cash (To report multiple grants, also use FFR attachment):	
a. Cash Receipts	75,000.00
b. Cash Disbursements	69,338.41
c. Cash on Hand (line a minus b)	5,661.59

Does it matter if my organization has **Cash on Hand?** **YES**

Cash on hand will impact the amount of your Quarter 3 reimbursement.



Federal Cash

What would cause my SF-425 to be returned?

- Line 10a Cash Receipts is incorrect.
- Line 10a Cash Receipts is blank.
- Line 10b Cash Disbursements is incorrect.
- Line 10b Cash Disbursements is blank.

Federal Expenditures and Unobligated Balance

Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	150,000.00
e. Federal share of expenditures	69,338.41
f. Federal share of unliquidated obligations	0.00
g. Total Federal share (sum of lines e and f)	69,338.41
h. Unobligated balance of Federal Funds (line d minus g)	80,661.59

- Line 10d is the amount of the award.
- Line 10e is the Federal expenditures for the reporting period. Will be the same as Line 10b Cash Disbursements.
- Line 10f should always remain blank for the Women's Business Center project
- Line 10g will be the same as Line 10e.

[Federal Expenditures and Unobligated Balance

What would cause my SF-425 to be returned?

- Line 10d is incorrect
- Line 10d is blank
- Line 10e is incorrect
- Line 10e is blank
 - Line 10g is incorrect by default
 - Line 10h is incorrect by default



Recipient Share

Recipient Share:	
i. Total recipient share required	69,338.41
j. Recipient share of expenditures	76,793.00
k. Remaining recipient share to be provided (line i minus j)	0.00

Line 10i – ???? what amount am I required to match????

\$150,000??? YES, but.....

9. Reporting Period End Date
03/31/2024



Recipient Share

What would cause my SF-425 to be returned?

- Line 10j Recipient Share of Expenditures is incorrect
- Line 10j Recipient Share of Expenditures is blank

Program Income

Program Income:	
I. Total Federal program income earned	5,587.78
m. Program Income expended in accordance with the deduction alternative	0.00
n. Program Income expended in accordance with the addition alternative	5,587.78
o. Unexpended program income (line I minus line m and line n)	0.00

- Line 10l: program income earned for the reporting period
- Line 10n: program expend during the reporting period

Line 10m should not be used. This program does not reduce the amount of Federal funds reimbursed based on program income expended.



Program Income

What would cause my SF-425 to be returned?

- Line 10l is blank and program income is reported in the Budget Management Workbook (BMW)
- Line 10n is blank and program income is reported in the BMW
- Line 10n is incorrect based on the BMW

Indirect Expense

11. Indirect Expense						
a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
De Minimis MTDC	10.00	09/30/2023	03/31/2024	63,034.92	6,303.49	6,303.49
g. Totals:				63,034.92	6,303.49	6,303.49

Direct Costs					
Category	Federal	Non-Federal	In-Kind	Program Income	Total Request
A. Personnel Services	\$55,677.56	\$63,689.22	\$0.00	\$0.00	\$119,366.78
B. Fringe Benefits	\$5,811.96	\$6,648.260	\$0.00	\$5,587.78	\$18,048.00
C. Travel	\$1,545.40	\$867.74	\$0.00	\$0.00	\$2,413.14
D. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
E. Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
F. Contractual	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
G. Other Direct Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Direct Costs	\$63,034.92	\$71,205.22	\$0.00	\$5,587.78	\$139,827.92
Indirect Cost					
H. Indirect Costs	\$6,303.49	\$0.00	\$0.00	\$0.00	\$6,303.49
	Rate				No
Total Expenditures	\$69,338.41	\$71,205.22	\$0.00	\$5,587.78	\$146,131.41

Do Not Enter Data onto this worksheet

Federal Base \$63,034.92 x 10% = \$6,303.49
 Non-Federal \$71,205.22 x 10% = \$7,120.52
 Total Base \$134,240.14 x 10% = \$13,424.01

Indirect Expense

What would cause my SF-425 to be returned:

- Block b. Rate - is incorrect based on IDCRCR agreement or is blank
- Block c. Period covered – is incorrect or is blank
- Block d. Base is incorrect or is blank
- Block e. Amount Charged is incorrect or is blank
- Block f. Federal Share is incorrect or is blank
- Indirect cost has not been shown and indirect costs is claimed in BMW



Signature and Date

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).		
a. Name and Title of Authorized Certifying Official		
Prefix: <input type="text" value="Ms."/>	First Name: <input type="text" value="Edna"/>	Middle Name: <input type="text"/>
Last Name: <input type="text" value="Greene"/>	Suffix: <input type="text"/>	
Title: <input type="text" value="Chief Financial Officer"/>		
b. Signature of Authorized Certifying Official	c. Telephone (Area code, number and extension)	
<input type="text" value="Edna Greene"/>	<input type="text" value="123-345-6789"/>	
d. Email Address	e. Date Report Submitted	14. Agency use only:
<input type="text" value="edna.greene@myorganization.org"/>	<input type="text" value="04/18/2024"/>	

Standard Form 425





Signature and Date

What would cause my SF-425 to be returned?

- SF-425 is not signed, must have a:
 - Wet signature, or
 - Electronic signature
- SF-425 is signed by the Center Director/Principal Investigator
- SF-425 is not dated



Federal Financial Report (SF-425)



[Thanks for Attending

