

<u>Subgrantee Code:</u> _____	<u>Report Type:</u> _____		
<u>Grant Code:</u> _____	<u>Title I/Project Name:</u> _____		
<u>Grant Term:</u> _____	<u>Report Period:</u> _____		
<u>I. SUBGRANT INFORMATION</u>			
1. Year of Appropriation	_____		
2. Report Revision Number	_____		
3. Subgrant/Contract Number	_____		
4. Subgrant Term From:	_____		
_____ To:	_____		
5. Total Allotment	\$ _____		
6. Closeout Report (N/C)	_____		
<u>II. TOTAL EXPENDITURES (Admin + Program)</u>			
	\$ _____		
<u>III. ADMINISTRATIVE EXPENDITURES</u>			
1. Administrative Cash Expenditures	\$ _____		
2. Administrative Accrued Expenditures	\$ _____		
3. TOTAL ADMINISTRATIVE EXPENDITURES	\$ _____		
<u>IV. OTHER REPORTABLE ITEMS (ADMIN)</u>			
1. Non-Fed Supp (Stand-in)	\$ _____		
2. Unliquidated Obligations	\$ _____		
3. Program Income Earned	\$ _____		
4. Program Income Expended	\$ _____		
<u>V. CUMULATIVE EXPENDITURES (PROGRAM)</u>			
	<u>Cash</u>	<u>Accrued</u>	<u>Total</u>
	<u>Expenditures</u>	<u>Expenditures</u>	<u>Expenditures</u>
1. Core Self Services	\$ _____	\$ _____	\$ _____
2. Core Reg Services	\$ _____	\$ _____	\$ _____
3. Intensive Services	\$ _____	\$ _____	\$ _____
4. Training Services	\$ _____	\$ _____	\$ _____
a. Training Payments	\$ _____	\$ _____	\$ _____
b. Other Training Services	\$ _____	\$ _____	\$ _____
5. Other	\$ _____	\$ _____	\$ _____
6. TOTAL PROGRAM EXPENDITURES	\$ _____	\$ _____	\$ _____
<u>VI. OTHER REPORTABLE ITEMS (PROGRAM)</u>			
1. Non-Fed Supp (Stand-in)			\$ _____
2. Unliquidated Obligations			\$ _____
a. Unliquidated Obligations-Core/Intensive Services			\$ _____
b. Unliquidated Obligations-Training Services			\$ _____
c. Unliquidated Obligations-Other			\$ _____
3. Program Income Earned			\$ _____
4. Program Income Expended			\$ _____
<u>VII. MISCELLANEOUS ITEMS (Admin and/or Program)</u>			
1. Cash Match			\$ _____
2. In-Kind Contributions			\$ _____
3. Leveraged Resources			\$ _____

VIII. TOTAL NEG EXPENDITURES: PROJECT OPERATOR LEVEL		\$	
1. <u>Participant Wages</u>		\$	
2. <u>Participant Fringe Benefits</u>		\$	
3. <u>Core and Intensive Services</u>		\$	
4. <u>NEG – funded Training</u>		\$	
5. <u>NEG – funded Supportive Services</u>		\$	
6. <u>Needs Related Payments (NRP)</u>		\$	
7. <u>Program Management and Oversight</u>		\$	
a. <u>Administrative, excl NRP Processing</u>	\$		
b. <u>Other</u>	\$		
8. <u>Other</u>		\$	
IX. COMMENTS			
X. CERTIFICATION			
1. Name	2. Title	3. Phone Number	
_____	_____	_____	
4. Contact Name	5. Contact Title	6. Phone Number	7. Date Submitted
_____	_____	_____	_____

Line Item Instructions

Use the following line item instructions to report expenditure information for Workforce Investment Act (WIA) formula funding, 15 Percent statewide activities, 25 Percent Additional Assistance projects, National Emergency Grants (NEG), and Special Grants. The second page of this report has been added to capture data specific to the NEG funds based on Department of Labor reporting requirements (see Section VIII).

TO ENTER EXPENDITURE DATA INTO THE JOB TRAINING AUTOMATION (JTA) SYSTEM START WITH THE "EXPD" SCREEN (ENTER WIA SUMMARY OF EXPENDITURES). ENTITIES WITHOUT JTA ACCESS WOULD USE THE MS WORD VERSION OF THE FORM. (The automated JTA entries, such as "autofill" and "default," do not apply to the MS Word document.) THE FORM IS TO BE COMPLETED BASED ON THE FOLLOWING LINE ITEM INSTRUCTIONS.

ON THE EXPD SCREEN ENTER THE FOLLOWING:

Item**Line Item Instructions****1. Subgrantee Code**

Enter the Local Workforce Investment Area (LWIA)/Subgrantee three-letter alpha code assigned by the Workforce Services Division.

2. Grant Code

Enter the JTA three-digit grant code assigned to the funding source.

3. YOA

Enter the Year of Appropriation (YOY) assigned to the funding source.

4. Report Period End

For quarterly reports enter 3/xx, 6/xx, 9/xx, and 12/xx.

For monthly reports enter 1/xx, 2/xx, 4/xx, 5/xx, 7/xx, 8/xx, 10/xx, and 11/xx.

5. Closeout Report N/C

Enter a "C" if filing a closeout report.

If you have previously entered a "C" and are changing back to an "N," the previous entry will become a "Z."

If you need to revise a line item that the "C" was previously entered on, you must select the "C" again for that same report period; make the revision, then re-file the closeout.

6. Rev Number

The revision number will come up automatically.

SECTION I. SUBGRANT INFORMATION1. Year of Appropriation2. Rev. No.3. Subgrant /Contract No4. Subgrant Term

If the user has access to the JTA system these categories auto-fill based on the entries made on the EXPD screen. If user does not have access to JTA, entries must be manually entered on the form.

5. Total Allotment

If the user has access to the JTA system this category auto-fills based on the allotment granted for each program fund stream. If user does not have access to JTA, entries must be manually entered on the form.

6. Closeout Report N/C

If the user has access to the JTA system this category auto-fills based on the entry to the EXPD screen. If no entries are made, the JTA system defaults to "N." If user does not have access to JTA, entries must be manually entered on the form.

SECTION II. TOTAL EXPENDITURES (Administrative and Program) this area will auto-fill based on the entries to Section III and V. If the user does not have access to JTA, entries must be manually made on the form.

SECTION III. ADMINISTRATIVE EXPENDITURES1. Administrative Cash Expenditures

Enter the amount of administrative cash expenditures for the grant code.

Note: cash expenditures do not necessarily equal amount of cash drawn.

Note: when filing a closeout the expenditures must equal the amount of cash drawn.

2. Administrative Accrued Expenditures

If a closeout is being filed the amount shown on this line must be zero.

3. Total Administrative Expenditures

This line will auto-fill based on the entries to Section III, lines 1 and 2.

SECTION IV. OTHER REPORTABLE ITEMS (ADMIN)1. Non-Fed Supp(Stand-In)

Enter the total amount of Non-Federal Support (if applicable).

Refer to Title 20 CFR 667.300 (c) (2).

2. Unliquidated Obligations

If a closeout is being filed the amount shown on this line must be zero.

3. Program Income Earned

Enter the amount of program income earned.

4. Program Income Expended

Enter the amount of program income expended. This amount must be equal to the program income earned at the time of closeout.

SECTION V. CUMULATIVE EXPENDITURES (PROGRAM) Enter the amount of cumulative expenditures for the selected grant code. Lines 1, 2, 3, and 4 must be filled in for any grant code.

1. Core Self Services

Enter the total amount of core self services expenditures from the beginning of the subgrant term through the end of the report period.

Refer to federal Training and Employment Guidance Letter (TEGL) 17-05, dated February 17, 2006, for examples of core self services.

2. Core Registration Services

Enter the total amount of core registration expenditures from the beginning of the subgrant term through the end of the report period.

Refer to federal TEGL 17-05, dated February 17, 2006, for examples of core registration services.

3. Intensive Services

Enter the total amount of intensive service expenditures from the beginning of the subgrant term through the end of the report period.

Refer to federal TEGL 17-05, dated February 17, 2006, for examples of intensive services.

4. Training Services

This line will auto-fill based on the information provided in lines 4a and 4b.

Refer to federal TEGL 17-05, dated February 17, 2006, for examples of training services.

4a. Training Payments

Enter the total amount of Training Payments from the beginning of the subgrant term through the end of the report period.

4b. Other Training Services

Enter the total amount of Other Training Services from the beginning of the subgrant term through the end of the report period.

5. Other

Enter the total amount of other program expenditures that are not included in lines 1, 2, 3, 4a or 4b from the beginning of the subgrant term through the end of the report period. Examples are: employer services and miscellaneous services.

6. Total Program Expenditures

Enter the total cash expenditures in the block provided. The accrued expenditures should be a zero in the block provided. The total must agree with the total expenditures entered for lines 1, 2, 3, 4, and 5 to continue. When filing a quarterly report, this line auto-fills based on the entries to lines 1, 2, 3, 4, and 5.

SECTION VI. OTHER REPORTABLE ITEMS (PROGRAM)1. Non-Fed Supp (Stand-In)

Enter the total amount of Non-Federal Support (if applicable). Refer to Title 20 CRF 667.300 (c) (2).

2. Unliquidated Obligations

If a closeout is being filed, the amount shown on this line must be zero.

2a. Unliquidated Obligations-Core/ Intensive Services

If a closeout is being filed, the amount shown on this line must be zero.

2b. Unliquidated Obligations-Training Services

If a closeout is being filed, the amount shown on this line must be zero.

2c. Unliquidated Obligations-Other

If a closeout is being filed, the amount shown on this line must be zero.

3. Program Income Earned

Enter the amount of program income earned.

4. Program Income Expended

Enter the amount of program income expended. This amount must be equal to the program income earned at the time of closeout.

SECTION VII. MISCELLANEOUS ITEMS (Admin and/or Program)1. Cash Match

Enter the amount of cash match expended.

2. In-Kind Contributions

Enter the amount of in-kind contributions provided.

SECTION VIII. TOTAL NEG EXPENDITURES: PROJECT OPERATOR LEVEL. Enter the amount of project operator expenditures for the selected grant code. Lines 1, 2, 3, 4, 5, 6, 7a, 7b, and 8 must be filled for any NEG grant code. These expenditures must equal the total expenditures in Section II.

1. Participant Wages

Enter the total amount of expenditures for participant wages from the beginning of the subgrant term through the end of the report period.

2. Participant Fringe Benefits

Enter the total amount of expenditures for participant fringe benefits from the beginning of the subgrant term through the end of the report period.

3. Core and Intensive Services

Enter the combined total amount of core and intensive service expenditures from the beginning of the subgrant term through the end of the report period.

4. NEG – funded Training

Enter the total amount of training expenditures funded with NEG funds from the beginning of the subgrant term through the end of the report period.

5. NEG – funded Supportive Services

Enter the total amount of supportive service expenditures funded with NEG funds from the beginning of the subgrant term through the end of the report period.

6. Needs Related Payments (NRP)

Enter the total amount of needs-related payment expenditures from the beginning of the subgrant term through the end of the report period.

7. Program Management and Oversight

This line will auto-fill based on the entries in line 7a and 7b.

7a. Administrative, excl NRP Processing

Enter the amount of administrative expenditures, excluding any processing costs expended for any needs-related payments, funded from the beginning of the subgrant term through the end of the report period.

7b. Other

Enter the amount of expenditures for any non-administrative costs related to the management and oversight of the program funded from the beginning of the subgrant term through the end of the report period.

8. Other

Enter the amount of expenditures for any program costs, not related to participant wages, participant fringe benefits, core and intensive services, training, supportive services, or needs-related payments, incurred from the beginning of the subgrant term through the end of the report period.

SECTION IX. COMMENTS

Enter any comments in this section.

SECTION X. CERTIFICATION

1. Name

Enter the name of the authorized official who will be approving the forms. A signature is required on fourth quarter and closeout reports only.

2. Title

Enter the title of the authorized official.

3. Phone Number

Enter the phone number of the authorized official.

4. Contact Person

Enter the name of the contact person to be reached in the event any questions should arise. The contact person will, in most cases, be the individual who prepares the report.

5. Contact Title

Enter the contact person's title.

6. Contact Phone

Enter the contact person's phone number.

7. Date Submitted

Date submitted defaults to the actual date data is being entered.

NOTE:

When a subrecipient with NEG expenditures prints a hard copy of the expenditure report from the PXPDP screen, the section numbers on the PXPDP do not correspond to the section numbers displayed on the EXPD screen. The printed hard copy of the PXPDP report is now two pages with Section I being repeated on each page. Signature blocks will appear on both pages when the signature block is requested. Both copies will need to be signed when hard copies of the reports are required or submitted.