Attachment III- Grants (Federal & I	Private)																			
gency Name:																				
							Official Award	Official Award Amount												
			Grant Type	Grantor/Agency Name (Federal or Private)	Catalog of Federal Domestic Assistance Number (CFDA)	Grant Period of Performance (i.e. 01/01/2019 - 12/31/2021)	Date (Anticipated	(Please list anticipated or	One-time vs	- ··	Grant Allowable									
Official Grant Name		Grant Phase	(Federal or	Grantor/Agency Name	Domestic Assistance	Performance (i.e. 01/01/2019	date if not yet	previous year's amount if	Recurring	Carryover vs New	Expenses: PS, NPS		MOE Requirement	FY23 Proposed	FY23 Anticipated	FY23 #	FY23 # Anticipated	DC Agency Program	DC Agency Program	
Official Grant Name	Grant #	Grant Phase	Private)	(Federal or Private)	Number (CFDA)	- 12/31/2021)	available)	not yet available)	Grant	Award	or Both	FY23 Match Amount	(Y/N)	Budget	Revised Budget	Proposed FTEs	Revised FTEs	Manager Name	Manager Position Title	Grant Purpose
	1	1		1			1	1		1		1		1	1	1				
				1						1					1					
				1															-	
	1	1					1							1		1				
				1															-	
	1			1				l		1		1		1	1					
				1				I		1				1	1					
				1			1					1		1	1					
				1						1					1					
	+			1						+		+		+	+	+	+			
				1																
		1		1				1												
				1				I		1				1	1					
				1						1				1	1				1	
	1	1		1	1	1	1	1	1	+		1		1	1	1	1		1	
															\$0		-			
	1	1		1	1		1	1	l	1	1	1	1	\$0	\$0	-	-			

Attachment III-Federal Pay	ments					
Agency Name:						
Agency Fund #	Agency Fund Title	Purpose	FY 2022 Payment	FY 2023 Payment	Change	New/On-going
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
			\$0	\$0	\$0	

Attachment III- Grants Lapse (FY2	1)											
Agency Name:												
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 / Obligation Period (i.e. 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
				T					1			
		1		+							1	
				 								