

Performance Progress Report NOAA Restoration Center, Office of Habitat Conservation

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1. Federal Agency and Organization Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned by Federal Agency	3a. DUNS Number	
		3b. EIN	
4. Recipient Organization (Name and complete address including zip code)		5. Recipient Identifying Number or Account Number	
6. Project/Grant Period Start Date: <i>(Month, Day, Year)</i>	7. Reporting Period End Date <i>(Month, Day, Year)</i>	8. Final Report? <input type="checkbox"/> Yes <input type="checkbox"/> No	
End Date: <i>(Month, Day, Year)</i>	<i>(Month, Day, Year)</i>	9. Report Frequency <input type="checkbox"/> <i>annual</i> <input type="checkbox"/> <i>semi-annual</i> <input type="checkbox"/> <i>quarterly</i> <input type="checkbox"/> <i>other</i>	
10. Performance Narrative <i>(see instructions)</i> :			
11. Other Attachments <i>(see instructions)</i> :			
12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.			
12a. Typed or Printed Name and Title of Authorized Certifying Official		12c. Telephone <i>(area code, number and extension)</i>	
		12d. Email Address	
12b. Signature of Authorized Certifying Official <i>(submitted electronically via Grants Online)</i>		12e. Date Report Submitted <i>(Month, Day, Year)</i>	

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(1) Label	(2) Additional Information on Grantee and Project	(3) Provide Information Requested:
2-01	Project Title	
2-02	Federal Program Officer's Name	
2-03	Project's Main Contact Person – Name	
2-04	Project's Main Contact Person – Title	
2-05	Project's Main Contact Person - Email	
2-06	Project's Main Contact Person- Phone No.	
2-07	Organization website <i>(if applicable)</i>	
2-08	Project Location: City	
2-09	Project Location: County	
2-10	Project Location: State	
2-11	Land Ownership <i>(check one)</i>	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Both
2-12	Geographic Coordinates <i>(in decimal degrees if readily available)</i>	_____ Longitude (X-coordinate) _____ Latitude (Y-coordinate)
2-13	Are there multiple project sites for this award?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2-14	List of Project Partners	
2-15	List of Target Species (e.g., coho salmon, blue crab, striped bass, Olympia oyster, etc.)	

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A. Program Indicators

(1) Activity Number or Label	(2) Activity Description	(3) Indicator or Status	(4) Explanation

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B. Performance Measures

(1) Measure Number or Label	(2) Objective/Goal Description	(3) Measure	(4) Baseline	(5) Target Year	(6) Project Target	(7) Actual To Date (cumulative)	(8) Explanation

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C. Table of Activities and Funding

(1) Expenditure Number or Label	(2) Expenditure Description	(3.1) Total Approved NOAA funds	(3.2) Total Approved Match Funds	(3.3) NOAA Funding Expended (cumulative to date)	(3.4) Match Funding Expended (cumulative to date)	(3.5) Match Source

C. (4) Please explain any deviations from approved budget. NOTE: Some budget changes require prior approval.
(e.g., To date, our budget has been executed as outlined in our application narrative that was approved by the NOAA Grants Officer.)

Performance Progress Report (PPR) Instructions

The following instructions provide guidance on reporting and explain the requirements for awards funded by the NOAA Restoration Center.

Performance Progress Report		
Item	Data Elements	Line Item Instructions for the NOAA Restoration Center's Performance Progress Report
1	Awarding Federal agency and Organizational Element to Which Report is Submitted	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub-agency within an awarding Federal agency.
2	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4	Recipient Organization	Enter the name of recipient organization and address, including zip code.
5	Recipient Identifying Number or Account Number	Enter the account number or any other identifying number assigned by the recipient to the award. This number is strictly for the recipient's use only and is not required by the awarding Federal agency.
6	Project/Grant Period	Indicate the grant period established in the award document during which Federal sponsorship begins and ends.
7	Reporting Period End Date	Enter the ending date of the reporting period. The reporting period is established in the award document, is usually semi-annual, and ends 30 days prior to the report due date. For final PPRs, the reporting period end date shall be the end date of the grant period, 90 days prior to the report due date.
8	Final Report	Mark appropriate box. Check "yes" only if this is the final report for the grant period specified in Box 6.
9	Report Frequency	Select the appropriate term corresponding to the requirements contained in the award document. "Other" may be used when more frequent reporting is required for high-risk grantees, as specified in OMB Circular A-110.
10	Performance Narrative	For interim progress reports, the narrative should include overall goals for the project, details on progress achieved during the reporting period, challenges or potential roadblocks to future progress, and an updated timeline of remaining tasks. For the final progress report, also include the relevance of the project to enhancing habitat, the problems the project has addressed, the methodology used to undertake restoration activities, including materials used and specific monitoring techniques, and lessons learned.
11	Other Attachments	List other required or optional documents such as monitoring reports, articles/news clippings, project photographs (high resolution before, during and after images on CD-ROM), project maps or geographic/spatial data files, and/or evidence of NOAA support (e.g. photographs of signs at project site, funding credit in outreach materials, press releases, etc.) that you will provide to NOAA with your report.
12a	Certifying Representative and Title of Authorized Typed or Printed Name	Authorized certifying official of the recipient.
12b	Certifying Official Signature of Authorized	Original signature of the recipient's authorizing official.
12c	Telephone (area code, number and extension)	Enter authorized official's telephone number.
12d	Email Address	Enter authorized official's email address.
12e	(Month, Day, Year) Date Report Submitted	Enter date submitted to the awarding Federal agency. Interim reports must be received by the awarding Federal agency no later than 30 days after the end of the reporting period, while final reports are due 90 days after the end of the award.

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Item	Data Elements	Line Item Instructions for SF-PPR for NOAA Restoration Center
2-01	Project Title	Enter the name of the project as listed in the application.
2-02	Federal Program Officer	Enter the name of the Federal Program Officer with responsibility for monitoring this award.
2-03	Project Contact - Name	Enter the name of the person who is the main point of contact for this project. This is not necessarily the same person as that listed as the Authorizing Official.
2-04	Project Contact - Title	Enter the title of the person who is the main point of contact for this project.
2-05	Project Contact – email address	Enter the email address of the person who is the main point of contact for this project.
2-06	Project Contact – Phone No.	Enter the phone number of the person who is the main point of contact for this project.
2-07	Organization website	Enter the URL for the website of the grantee organization.
2-08	Project Location: City	Enter the name of the City where the project is located.
2-09	Project Location: County	Enter the name of the County where the project is located.
2-10	Project Location: State	Enter the name of the State where the project is located.
2-11	Land Ownership	Check the appropriate box corresponding with the landownership of the project site.
2-12	Geographic Coordinates	Enter the geographic coordinates in decimal degrees for the project location. (For projects with multiple locations, choose a location with a major expenditure of project resources.)
2-13	Multiple project sites	Check the appropriate box to indicate if there is one project site for this award or multiple locations.
2-14	List of Project Partners	Enter the names and organizational affiliation of any partners also contributing to or involved with this project.
2-15	List of Target Species	List the target species that will directly benefit from this project (e.g., coho salmon, blue crab, striped bass, Olympia oyster, etc.)

Program Indicators

A.(1)	Activity Number or Label	Enter the Number or label used to track a particular award.
A.(2)	Activity Description	These activities are outlined in the final proposal narrative agreed to by the grantee and NOAA. If overall activities change, please communicate with your Federal Program Officer to discuss if a change in scope request is appropriate.
A.(3)	Indicator or Status	State if the activity/project is completed, ongoing/in progress, or not started.
A.(4)	Explanation	Include a brief description of your progress towards completing the activity, such as roadblocks, challenges and revised timelines for specific activities.

Performance Measures

B.(1)	Measure Number or Label	Enter number or label used to identify a particular performance.
B.(2)	Objective/Goal Description	For each measure, list the corresponding project/award goal(s) and objective(s) as specified in the approved work plan, and/or through discussions with the awarding agency. These should include the habitat type to be restored. Examples are provided for the main type of performance measure data typically collected by the NOAA Restoration Center.
B.(3)	Measure	Enter the unit of measure. This can be quantitative or qualitative.
B.(4)	Baseline	Enter the initial starting point or average amount or condition related to each measure.
B.(5)	Target Year	Enter the year you expect to accomplish the targets specified in the approved work plan.
B.(6)	Project Target	Enter the expected amount to be achieved as specified in the approved work plan.

B.(7)	Actual to Date	State the actual cumulative amount, condition or status achieved as of the end of the reporting period.
B.(8)	Explanation	If you did not meet or do not expect to meet your target, please explain why not. Also, provide a brief description of monitoring/verification activities completed to date that relate to this measure (i.e., monitoring technique, frequency).
Table of Activities and Funding		
C.(1)	Expenditure Number or Label	Enter a number or label.
C.(2)	Expenditure Description	List the major expenditures, activities, or categories of funds spent from NOAA and match sources (e.g. salaries, contractual dam removal, native vegetation purchased, vegetation planted by contractors, vegetation planted by volunteers, etc.)
C.(3.1)	Total Approved NOAA Funds	Enter the amount of NOAA funds budgeted for the entire award period for each expenditure listed, as stated in the original grant application or most recently approved budget revision.
C.(3.2)	Total Approved Match Funds	Enter the amount of matching funds budgeted for the entire award period for each expenditure listed, as stated in the original grant application or most recently approved budget revision.
C.(3.3)	NOAA Funding Expended	Enter the cumulative amount of NOAA funds used by the end of the current reporting period (this reporting period plus all previous periods) for each expenditure listed.
C.(3.4)	Match Funding Expended	Enter the cumulative amount of matching funds used by the end of the current reporting period (this reporting period plus all previous periods) for each expenditure listed.
C.(3.5)	Match Source	List the source of match contributions (entity providing cash, goods, or services) for the current reporting period in each expenditure line.
C. (4)	Budget Deviations	Explain any differences between the approved budget and actual or planned expenditures. Note that some budget changes require prior approval, as described in the award document.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 0648-0472. The time required to complete this information collection is estimated to average seven hours for a semi-annual report, and eleven hours and fifteen minutes for a final report, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. Any questions or comments regarding this form should be sent to: Chief, NOAA Restoration Center, F/HC3, NOAA Fisheries Service, 1315 East West Highway, Silver Spring, MD 20910.

Performance Progress Report
NOAA Restoration Center, Office of Habitat Conservation
(Part D- Required for recipients that provide sub awards for multiple projects and/or that receive awards of \$500,000 or greater)

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		3b. EIN	
D-1. Program/Project Management			
	Question	Yes / No/ Not Applicable?	Explanation, if necessary
D-1a.	Do you collect credible performance information, including information from key program partners or sub-awardees, and use it to manage the program/project and improve performance?		
D-1b.	Are the award funds obligated in a timely manner and for intended purposes?		
D-1c.	Do you link your budgets to program/project activities and make adjustments to achieve cost-efficiencies?		
D-1d.	Do you collaborate and coordinate effectively with related programs/projects (if applicable)?		
D-1e.	Have you identified any management deficiencies? If so, provide explanation of deficiencies identified.		
D-1f.	Did you achieve all your performance targets?		
D-1g.	Are you on target to achieve your long- term performance goals?		
D-2. Sub-Award Management			
D-2a.	Are the award partners (including sub-awardees and contractors) held accountable for cost, schedule, and performance results (If applicable)?		
D-2b.	Are sub-awards and contracts awarded based on a clear competitive process that includes a qualified assessment of merit?		

Instructions Part D, Program/Project Management

Item	Data Elements	Instructions
1	Awarding Federal agency and Organizational Element to Which Report is Submitted	Enter the name of the awarding Federal agency and organizational element as "NOAA Fisheries Service."
2	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4	Reporting Period End Date	Enter the ending date of the reporting period. The reporting period is established in the award document, is usually semi-annual, and ends 30 days prior to the report due date. For final PPRs, the reporting period end date shall be the end date of the grant period, 90 days prior to the report due date.
D-1 Program/Project Management		
Questions		
D-1a	Do you collect credible performance information, including information from key program partners or sub-awardees, and use it to manage the program/project and improve performance?	Credible performance information is information that is collected through a systematic process with quality controls to confirm its validity. Explanation Section --Please describe how you use credible information to adjust program priorities, allocate resources, or take other appropriate management actions. You may also include a description of your management systems, and examples of recent management actions based on performance information or steps taken to enact necessary improvements cited by a specific evaluation.
D-1b	Are the award funds obligated in a timely manner and for the intended purposes?	A yes answer would require that funds are obligated consistently with the overall project/award plan, and in a timely manner. Explanation Section --Please describe your schedule and if applicable, your partners' schedules for obligations that correspond to the resource needs of the program/project plan. Please also describe procedures for reporting actual expenditures.
D-1c	Do you link your budgets to program/project activities and make adjustments to achieve cost-efficiencies?	A yes answer would require that you have procedures to measure and achieve effectiveness and cost efficiencies in your program/project, such as per-unit cost of outputs and outcomes, timing targets, etc. Explanation Section --If the answer is yes, please describe what efficiencies are achieved. If the answer is no, explain and provide a plan to put in place or improve cost effectiveness and efficiency. Indicate N/A if this does not apply.

D-1d	Do you collaborate and coordinate effectively with related programs/projects (if applicable)?	A yes answer would require that you collaborate, to the extent appropriate or possible, with related State, local and private programs. Explanation Section --Describe collaborations leading to meaningful actions in management and resource allocation. This can include planning documents, performance goals, or information and referral systems. Indicate N/A if this does not apply.
D-1e	Have you identified any management deficiencies? If so, provide an explanation of the deficiencies identified.	Deficiencies include but are not limited to, financial management or other identified deficiencies, such as known internal control weaknesses concerning data quality. A yes answer would require that deficiencies have been identified. Explanation Section --Include a description of how the deficiencies were identified and corrected including a description of the steps taken to ensure the accuracy, reliability, and completeness of the data. Indicate N/A if this does not apply.
D-1f	Did you achieve all your performance targets?	A yes answer would require that: (1) an assessment occur comparing actual accomplishments with performance targets established for the reporting period; and (2) if partner performance is critical to the program/project achieving its overall targets, and whether the recipient's partners are meeting their performance targets. The project/award goals are specified in the work plan approved by the awarding Federal agency. Explanation Section -- If any performance targets are not met, explain and discuss any adjustments that will be made to achieve the performance targets in the future. If additional clarification of the Performance Measures Section is needed, you may provide additional comments here. Indicate N/A if this does not apply.
D-1g	Are you on target to achieve your long-term performance goals?	A yes answer would require that the program/project is meeting or making measurable progress toward meeting the long-term performance goals specified in the approved work plan. Explanation Section --The explanation should justify the answer in qualitative and quantitative terms. If the answer is no, explain and discuss adjustments that will be made to put the program/project on track. Indicate N/A if this does not apply.
D-2 Sub-Award Management		
D-2a	Are the award partners (including sub-awardees and contractors) held accountable for cost, schedule, and performance results (if applicable)?	A yes answer would require that you have established performance standards for your partners and have evaluated whether they met these standards during the reporting period. It would also indicate that you require your partners to achieve specific performance standards. Explanation Section --Describe evidence of your partners' accountability. If the answer is no, explain how you plan to improve accountability. Indicate N/A if this does not apply.
D-2b	Are sub-awards and contracts awarded based on a clear competitive process that includes a qualified assessment of merit?	Explanation Section --Describe your selection processes, whether or not they were competitive or sole sourced. Indicate N/A if this does not apply.