EXHIBIT 25-C CARRYOVER STATEMENT

Each State must complete the Carryover Statement and the Table of Unexpended Carryover Funds as part of the End-of-Year Report. Only the Federal Share should be included.

	OMB Control Number 1024-0038 Expiration Date: XX/XX/2014			
Carryover Statement				
Item	Amount (Federal Share)			
Costs Incurred First Fiscal Year	\$			
Committed Subgrants/Contracts Unexpended Balance to be Carried Over	\$			
Uncommitted Carryover	\$			
Total (Should Equal Grant Award)	\$ 0.00			
The total uncommitted dollar amount awarded in FY (just completed fiscal year) to be carried over into FY (current fiscal year) that is not committed to subgrants/contracts is \$" Please check and complete one of the following sentences (choose the one that applies): This amount does not exceed 25% of the amount apportioned by NPS, as demonstrated by the attached Unexpended Carryover Funds Table.				
OR				
As demonstrated by the attached Unexpended Carryover Funds Table, this amount exceeds 25% of the amount apportioned by NPS by \$ I am seeking a waiver for this amount to carry these funds over into the next Federal Fiscal Year for the reasons attached.				
Signature of SHPO Comments:	Date			

If the proposed uncommitted carry over amount exceeds 25%, see Chapter 3, Sections D.6. and K. which discuss Waivers and the Carryover (Use or Lose) policy on HPF funds.

EXHIBIT 25-D	UNEXPENDED CARRYOVER FUNDS TABLE

OMB Control Number 1024-0038 Expiration Date: XX/XX/2014				
Unexpended Carryover Funds Table				
Subrecipient (Subgrantee or Contractor)	Certified Local Government?	Federal Share of Subgrant/ Contract Award	Federal Share Cost not Incurred as of 9/30/XXXX	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
CLG SUBGRANT TOTAL				
GRAND TOTAL		0.00	0.00	

Enter with a check mark, or "yes" all subgrants that are passed through to a Certified Local Government in the second column. All of the subgrants/contracts listed in the Project/Activity Database Report must be included in the Unexpended Carryover Funds Table.

Paperwork Reduction Act Statement. The National Park Service collects the information as part of the process for reviewing the procedures and programs of State, tribal, and local governments participating in the national historic preservation program and the Historic Preservation Fund grant program. The information will be used to evaluate those programs and procedures for consistency with the National Historic Preservation Act, as amended, (16 U.S.C. 470 et seq.) and compliance with governmentwide grant requirements. Your response is required to obtain or retain a benefit under these programs. A Federal agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a valid OMB control number.

The NPS provides no assurance of confidentiality to respondents with the exception of some location information concerning some properties included in government historic preservation property inventories. Pursuant to Section

304 of the National Historic Preservation Act of 1966, as amended, release of information is tightly controlled when such release could have the potential of damaging those qualities that make a property historic.

Estimated Burden Statement: The HPF On-Line System automatically generates the information to complete this statement and table.. The public reporting burden for the collection of this information is estimated to average 5 minutes per response, including the time to review the table, print a hard copy, sign the statement, and submit to NPS. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Chief, Historic Preservation Grants, National Park Service, 1849 C Street, NW. (Org Code 2256), Washington, DC 20240.