## SF-425\_778\_778A

Submission	n Studi	0										
Form Name:		SF-425 (FNS-778/FNS-	7784) (10-11)									
Form Descri		Federal Financial Report										
Program:	iption.	SNAP Group Residential										
State:		MN	Trousing Project									
Agency Code	e:	2792501	And	ency Name:	MN DEPT OF HUMAI	N SERVICES						
Program Tin		December 2017										
Submission		Quarterly	Rev	vision:	0							
Submission		Posted										
Quit											[Excel] [Histo	ry] [Audit]
425-Page 1	778-Pa	ge 1 (Columns 1-10)	778-Page 2 (Columns 11-20)	778 Page 3	(Columns 21-30)	778A-Page 4 (Column 31)	778-Page 5	(Item 11)	Remarks			
			425-Pa	age 1						Federal Fin	ancial Report	
		8. Pro	ject / Grant Period (NOTE: Refer	to Grant Awa	rd Document for da	tes)			From			То
							[	10/01/2017			09/30/2018	
			ederal Cash (To report multiple g		e FFR Attachment):							
a. Cash Receip	pts											
b. Cash Disbu	rsements											
c. Cash on Ha	nd (line a r	ninus b)										
				d Unobligated								
d. Total Federa	al funds au	thorized										
e. Federal sha	re of exper	ditures										
f. Federal shar	re of unliqu	idated obligations										
g. Total Federa	al share (su	im of lines e and f)										
h. Unobligated	d balance o	f Federal funds (line d mi	inus g)									

. Total recipient share requ									
. Recipient share of expend									
k. Remaining recipient share to be provided (line i minus j)									
Total Federal share of program income earned									
m. Program income expended in accordance with the deduction alternative									
n. Program income expende	ed in accordance with the addition alternative								
o. Unexpended program inc	come (line I minus line m or line n)								
	а. Туре	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged			
	~								
g. Totals:									

11. Inc	direct Expense			
	Period To	d. Base	e. Amount Charged	f. Federal Share

	Home Online Forms	Search FNS.648 Admin.	Help Contact U	s Sign Out					
Post   Reject   Certify	Submit/Revise   Search	Due Date   Overdue Submission	İ						
Submission Stud	dio								
Form Name:	SF-425 (FNS-778/FNS-7	778A) (10-11)							
Form Description:	Federal Financial Report								
Program:	SNAP Group Residential	Housing Project							
State:	WV								
Agency Code:	5499999		Agency Name:	Test Agency					
Program Time:	December 2017								
Submission Type:	Quarterly		Revision:	0					
Submission Status:	New Submission								
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425-Page 1 778-I	Page 1 (Columns 1-10)	778-Page 2 (Columns 11-2	(0) 778 Page 3	(Columns 21-30)	778A-Page 4 (Column 31)	778-Page 5 (Item 11)	Remarks		

10. Status of Funds	1. Certification	2. EBT Issuance	3. Qual. Cntl.	4. Mgt. Eval.	5. Fraud Cntl.	6. ADP Dev.
Net outlays previously reported						
Total outlays this report period						
Less: Program income credits						
Net outlays this report period (Line b minus line c)						
Net outlays to date (Line a plus line d)						
Less: Non-Federal share of outlays						
Total Federal share of outlays (Line e minus line f)						
Total unliquidated obligations						
ess: Non-Federal share of unliquidated obligations shown on line h		7				
Federal share of unliquidated obligations						
Total Federal share of outlays and unliquidated obligations						
otal cumulative amount of Federal funds authorized						
Unobligated balance of Federal funds						

7. ADP Oper	8. Fair Hearings	9. Other Activities - Sub. Tot. 20+30	10. Grand Total
	,	,	

SPT NAme: SF -425 (PHS-778/FHS-778A) (10-11) PRODECTIFION: Federa Financial Report SMAP Group Residential Housing Project SMAP Group Re		Home Online Forms Search FNS-648 A	dmin. Help Contact I	Is Sign Out				
SF-425 (PIS-778/NS-778A) (10-11)   Federal Floarcial Report   September   Federal Floarcial Report   September	ost   Reject   Certify	Submit/Revise   Search   Due Date   Overdue Subm	nission					
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178-Page 1   178-Page 2   1   178-Page 2   1   178-Page 2   1   178-Page 3   1   1   1   1   1   1   1   1   1	Submission Type: Submission Status:		REVISION:	0				
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Total couliays this report period				&T 100% Grant		13. E&T Dependent Care	15. E&T ABAWD Grant	16. Optional Workfare
Less: Program income credits    Comment   Comm	a. Net outlays previous	y reported						
Net outlays this report period (Line b minus line c)  Net outlays to date (Line a plus line d)  Net outlays to date (Line a plus line d)  Net outlays to date (Line a plus line d)  Sest: Non-Rederal share of outlays (Line e minus line f)  Total Federal share of outlays (Line e minus line f)  Sest: Non-Rederal share of outlays (Line e minus line f)  Sest: Non-Rederal share of outlays (Line e minus line f)  Total Federal share of unliquidated obligations  Total Federal share of outlays and unliquidated obligations	b. Total outlays this rep	ort period						
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Total Federal share of outlays and unliquidated obligations								
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otal cumulative amount of Federal funds authorized								
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17. Outreach	18. Nutrition Education	19. New Investment	20. Page 2 Subtotal

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Post   Reject   Certify		Due Date   Overdue Submission		Js Sign Out						
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Form Name: Form Description: Program: State: Agency Code: Program Time: Submission Type: Submission Status:	SF-425 (FNS-778/FNS Federal Financial Repc SNAP Group Residenti WV 5499999 December 2017 Quarterly	ort	Agency Name: Revision:	Test Agency						
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425-Page 1 778-	Page 1 (Columns 1-10)	778-Page 2 (Columns 11-2	778 Page :	(Columns 21-30)	778A-Page 4 (Column 31)	778-Page 5 (Item 11) Re	emarks			
								778 Page 3 (Columns	21-30)	
a. Net outlays previou	sly reported									
b. Total outlays this re	eport period									
c. Less: Program inco	me credits									
d. Net outlays this rep	ort period (Line b minus li	ne c)								
e. Net outlays to date	(Line a plus line d)									
f. Less: Non-Federal s	hare of outlays									
g. Total Federal share	of outlays (Line e minus li	ine f)								
h. Total unliquidated of	obligations									
i. Less: Non-Federal s	hare of unliquidated obliga	itions shown on line h								
j. Federal share of unl	iquidated obligations									
k. Total Federal share	of outlays and unliquidate	d obligations								
I. Total cumulative am	ount of Federal funds auth	norized								
m. Unobligated balance	e of Federal funds									

27.	28.	29.	30. Page 3 Subtotal

Post   Reject   Certify   Submis/Revise   Search   Due Date   Overdue Submission
Form Name: Sf-425 (FNS-778/FNS-778A) (10-11) Form Descriptin: Federal Financial Report Program: SNAP Group Residential Housing Project State: WV Agency Code: 549999 Agency Name: Test Agency Program Time: December 2017 Submission Status: New Submission Submission Status: New Submission  Save Edit Check Post Quit  425-Page 1 778-Page 1 (Columns 1-10) 778-Page 2 (Columns 11-20) 778 Page 3 (Columns 21-30) 778A-Page 4 (Column 31) 778-Page 5 (Item 11) Remarks  778A-Page 4 (Column 31)
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Program Time: December 2017 Submission Type: Quarterly Revision: 0 Save Edit Check Post Quit  425-Page 1   778-Page 1 (Columns 1-10)   778-Page 2 (Columns 11-20)   778 Page 3 (Columns 21-30)   778A-Page 4 (Column 31)   778-Page 5 (Item 11)   Remarks  778A-Page 4 (Column 31)  10. Status of Funds 31. Program Benefit
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Save Edit Check Post Quit  425-Page 1   778-Page 1 (Columns 1-10)   778-Page 2 (Columns 11-20)   778 Page 3 (Columns 21-30)   778A-Page 4 (Column 31)   778-Page 5 (Item 11)   Remarks  778A-Page 4 (Column 31)  10. Status of Funds 31. Program Benefit
425-Page 1   778-Page 1 (Columns 1-10)   778-Page 2 (Columns 11-20)   778 Page 3 (Columns 21-30)   778-Page 4 (Column 31)   778-Page 5 (Item 11)   Remarks   778A-Page 4 (Column 31)   10. Status of Funds   31. Program Benefit   31. Program Ben
778A-Page 4 (Column 31)  10. Status of Funds 31. Program Benefit
778A-Page 4 (Column 31)  10. Status of Funds 31. Program Benefit
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a. Net outlays previously reported
b. Total outlays this report period
c. Less: Program income credits
d. Net outlays this report period (Line b minus line c)
e. Net outlays to date (Line a plus line d)
f. Less: Non-Federal share of outlays
g. Total Federal share of outlays (Line e minus line f) h. Total unliquidated obligations
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k. Total Federal share of outlays and unliquidated obligations
I. Total cumulative amount of Federal funds authorized
m. Unobligated balance of Federal funds
Home   Online Forms   Search   FNS.648   Admin.   Help   Contact Us   Sign Out     Post   Reject   Certify   Submit/Revise   Search   Due Date   Overdue Submission
Post   Reject   Certify   Submit/Revise   Search   Due Date   Overdue Submission
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Post   Reject   Certify   Submit/Revise   Search   Due Date   Overdue Submission    Submission Studio  Form Name: SF-425 (FNS-778/FNS-778A) (10-11) Form Description: Federal Financial Report Program: SNAP Group Residential Housing Project State: W/ Agency Code: 549999 Agency Name: Test Agency Program Time: December 2017 Submission Type: Quarterly Revision: 0  Save Edit Check Post Quit
Post   Reject   Certify   Submit/Revise   Search   Due Date   Overdue Submission    Submission Studio  Form Name: SF-425 (FNS-778/FNS-778A) (10-11) Form Description: Federal Financial Report Program: SNAP Group Residential Housing Project State: W/ Agency Code: S49999 Agency Name: Test Agency Program Time: December 2017 Submission Type: Quarterly Revision: 0
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c. Base	d. Total Amount	e. Federal Share

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Post   Reject   Certify   S	ubmit/Revise   Search   L	Due Date   Overdue Submission							
Submission Studio									
Form Name:	SF-425 (FNS-778/FNS-7	78A) (10-11)							
Form Description: Federal Financial Report									
Program:	SNAP Group Residential	Housing Project							
State:	WV								
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Submission Status:	New Submission								
Save Edit Check Post Quit  425-Page 1 (778-Page 1 (Columns 1-10)   778-Page 2 (Columns 11-20)   778 Page 3 (Columns 21-30)   778A-Page 4 (Column 31)   778-Page 5 (Item 11)   Remarks									
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12. Remarks: Attach any explanation deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.									<b>^</b>