

## Federal Agency Form Instructions

Form Identifiers	Information
Agency Owner	Grants.gov
Form Name	Tangible Personal Property Report Supplemental Sheet SF-428-S
Form Version Number	1.0
OMB Number	4040-0018
OMB Expiration Date	11/30/2024

## Form Field Instructions

Field Number	Field Name	Required or Optional	Information
-	Federal Grant or Other Identifying Number Assigned by Federal Awarding Agency (Block 2 of SF-428)	Optional	Enter the Federal grant, cooperative agreement or other financial assistance award instrument number or other identifying number assigned to the Federal financial assistance award. If the Supplemental Sheet is submitted in connection with a Consolidated Annual Report Attachment, leave blank and enter individual award numbers in Column (a) for each item.
-	Attachment Type	Required	Indicate the type of report Attachment for which the individual item information is being provided.
-	Annual Report (SF-428-A)	Optional	Check to select.
-	Final (Award Closeout) Report (SF-428-B)	Optional	Check to select.
-	Disposition Report/Request (SF-428-C)	Optional	Check to select.
1-a.	Federal Award Identifier	Optional	For Consolidated Annual Report Attachments, enter the Federal grant, cooperative agreement or other Federal financial assistance award instrument number or other identifying number assigned to the Federal financial assistance award. For all other Report Attachments (i.e., Individual Annual, Final, and Disposition Request/Report) leave blank.

<b>Field Number</b>	<b>Field Name</b>	<b>Required or Optional</b>	<b>Information</b>
1-b.	GP or ACQ	Required	Select GP if the item is Federally-owned property. Select ACQ if the item was acquired with award funds. This field is required for each row entered.
1-c.	Description	Required	Provide a brief description of the item. This field is required for each row entered.
1-d.	Identification Number	Required	Enter the manufacturer's serial number, model number, Federal stock number, national stock number, or other identification number. This field is required for each row entered.
1-e.	Acquired Date	Required	Enter the date the item was acquired by the recipient. For items furnished by the Federal Government, enter the date received by the recipient. This field is required for each row entered.
1-f.	Condition Code	Required	Select one. This field is required for each row entered.
1-g.	Acquisition Cost	Required	Enter the item acquisition cost. This field is required for each row entered.
1-h.	Disposition Request	Optional	Indicate the type of disposition requested for each item by entering the corresponding number from Block 2 of the Final Report Attachment or Block 1 of the Disposition Request/Report Attachment.