



NATIONAL ENDOWMENT FOR THE ARTS

**INSTRUCTIONS FOR
REQUESTING PAYMENT**
(Cooperative Agreements)

Revised November 2002

To request your award funds, please use the Request for Advance or Reimbursement (payment request) form available on our Web site at <http://www.arts.gov/manageaward/index.html>. The following instructions are provided to assist you in completing this form. The availability of this information, however, is not intended to replace or relieve you of your responsibility to read the standard instructions provided in the Office of Management and Budget (OMB) Circulars.

If you have any questions, please call the Grants & Contracts Office at (202) 682-5482 or e-mail us at grants@arts.endow.gov.

Before you begin, please note the following:

- C You are required to return the *GEOGRAPHIC LOCATION OF PROJECT ACTIVITY* form to the Grants & Contracts Office within 30 days of receipt of your award letter or with your first payment request, which ever comes first. **NO AWARD FUNDS WILL BE RELEASED UNTIL THIS INFORMATION IS RECEIVED.**
- C Funds can only be remitted via Electronic Funds Transfer to your financial institution ("bank"). (See Step 11 of these instructions.)
- C If your payment request form is completed correctly, you can generally expect to receive payment within 30 days of submitting (by FAX) your request(s) to the Endowment. **Please plan accordingly.** (See "Submitting Your Request" on page 5 of these instructions).
- C Consolidate your requests so that the amount of Federal funds requested at any one time is **at least \$1,000.**
- C All costs claimed must be incurred within the period of support specified in the award letter (or as amended). The amount(s) requested must reflect project expenses already incurred (reimbursement) and/or expenses to be incurred (advance) within 30 days of the date you sign the payment request form. In either case, the funds must be **disbursed immediately** upon receipt.
- C The form must be signed by an authorizing official. (See Step 10 of these instructions.)
- C Do NOT expect to receive any funds before the start date of your cooperative agreement.

- C If you receive your payments through an alternative method of funding (i.e., working capital advance, cost reimbursement or certification), please refer to the instructions previously provided by the Endowment's Office of Inspector General.
- C Forms are available on our Web site at <http://www.arts.gov/manageaward/index.html>. If you choose to create your own copy of our payment request form, you must replicate it verbatim including the certification to the Assurances as to Labor Standards.

STEP BY STEP INSTRUCTIONS: The numbers listed below correspond to the numbers on the payment request form.

1. Already filled in for you.
2. Enter your **Cooperative Agreement Number**.
3. **Type of Payment Requested**
 - a. Check **ADVANCE** if you wish to receive Federal funds for expenditures you expect to incur and pay within 30 days or less from the date you sign this form. Check **REIMBURSEMENT** if you are asking the Endowment to reimburse you for expenditures already paid. Check **both** blocks if you are requesting a combined reimbursement and advance. All costs must be incurred within the period of support indicated on your award letter (or as amended).
 - b. Check **FINAL** if this payment will be the last you are requesting on this award; otherwise check **PARTIAL**.
4. Indicate the method used to record costs in your accounting ledgers. If you recognize expenses only as you pay them, check **CASH**. If you recognize expenses before paying them, check **ACCRUED EXPENDITURES**.
5. If this is your first payment request for this award, enter a "1." If it is your second, enter a "2," etc.
6. You **must** use this space for your "Taxpayer Identification Number" (also known as "Employer Identification Number"). This nine-digit number is assigned to your organization by the Internal Revenue Service (IRS). Individual cooperators should use their social security number.
7. This line is used to indicate the period covered by this particular payment request, **not** the entire period of support stated in your award document. This expense period must fall **within** the stated period of support since Endowment funds cannot be used for expenditures incurred outside the period of support identified in your award document without an approved time amendment.

For Advances. Indicate after "From" the date you sign the form; indicate after "To" a date no greater than 30 days from the date you sign this form. *[NOTE: The "From" date should also be entered on line 9a after "As of."]*

For Reimbursements. Indicate after "From" the date on which these costs were incurred and/or paid. After "To" indicate the last date on which any of these costs were incurred and/or paid. *[NOTE: The date provided after "To" cannot be later than the date you sign the payment request form and should also be entered on line 9a after "As of."]*

For Combination Advances and Reimbursements. Indicate after "From" the earliest date on which any of these costs were incurred and/or paid. After "To" indicate a date no greater than 30 days from the date you sign this form. *[NOTE: The date you sign this form should also be entered on line 9a after "As of."]*

8. Indicate the official IRS name and address of the cooperator (not the sponsored organization or component).

PAYMENT:

Funds awarded under this cooperative agreement can only be remitted via Electronic Funds Transfer. If you have not already done so, contact your bank in order to arrange to receive Automated Clearing House (ACH) payments. (See Step 11 for more information.)

9. Computation of Amount Requested:

- a. Indicate all allowable project costs that have been incurred and/or paid as of the date provided (as determined when completing Step 7 above). *[NOTE: For any subsequent requests, this figure must be **cumulative**, indicating that you have expended any funds previously received from the Endowment.]*
- b. Provide this information only if you are requesting an advance of Endowment funds to cover expenses to be incurred within 30 days or less from the date you sign this form. Remember, these funds must be disbursed immediately upon receipt.
- c. Add lines 9a and 9b.
- d. Indicate the total amount of non-Endowment funds represented in the amount on 9c.
- e. Subtract line 9d from line 9c.
- f. Indicate all Endowment funds previously requested for this award.
- g. Indicate the amount you are now requesting. Subtract line 9f from line 9e.

[NOTE: Double check your math from the top down: $a + b = c - d = e - f = g.$]

10. Your signature indicates that you are agreeing to **all** the terms and conditions of the award. This form must be signed by the authorizing official who either signed the agreement or has a signature authorization form or letter on file. Signature authority must be updated every four years to remain in effect. For your convenience, a form is

available on our Web site and in the back of the *General Terms*. In addition, note the following restrictions that apply to authorizing officials signing this form:

- any person serving on an Endowment panel generally can act as an authorizing official for any application, grant, or cooperative agreement **except** for those applications reviewed by the panel that he/she serves on. This prohibition is in effect throughout the entire period of support.
- for organizations that act as a sponsor or fiscal agent, the payment request **must** be signed by an appropriate authorizing official of the **sponsor** organization.
- colleges and universities may delegate authority to a fiscal officer to sign payment requests by submitting a signature authorization form or letter to the Endowment's Grants & Contracts Office. This delegation **and** signature must be on file in the Endowment's Grants & Contracts Office.

11. You must complete this section in order to receive your award funds. Funds will be transferred electronically to your bank and deposited directly into your account.

FOR AN ACH TRANSFER OF FUNDS, please provide the following:

- the name of your bank;
- the city and state;
- your bank's nine-digit Routing Transmittal Number (RTN);
- your bank account number to be credited; and
- the type of account (checking or savings).

The banking information must be included on **each** payment request. **Make sure that your bank's RTN and your bank account numbers are correct. An incorrect number will prevent your bank from crediting your account.**

A sample check graphic is provided to assist you in identifying your routing and account numbers. (The routing and account numbers may be in slightly different places on your check.) Please contact your financial institution to verify the correct routing and account numbers.

The routing number **must** be **nine** digits. If the first two digits are not **01** through **12** or **21** through **32**, the direct deposit will be rejected. Your check may state that it is payable through a bank different from the financial institution at which you have your checking account. If so, do not use the routing number on that check. Instead, contact your financial institution for the correct routing number to enter on this line.

The checking account number can be up to 17 characters (both numbers and letters). Include hyphens but omit spaces and special symbols.

Do **not** include the check number.

Sample Check

OTIS PUPETTE
SINDEE PUPETTE
123 Main Street
Anyplace, MD 20901

PAY TO THE ORDER OF _____ \$ _____

ANYPLACE BANK
Anyplace, MD 20901

For _____

9-digit routing number (RTN) 250250025

checking account number 20202086

5777

15-00000000

Do not include the check number

TIP: Funds must be transferred directly to a checking or savings account. Funds *cannot* be transferred to a trust.

TIP: The Endowment is unable to use Fedline (further-wire-to secondary accounts) for amounts under \$100,000. Please do *NOT* enter a second bank account number at the bottom of the form.

TIP: To verify receipt of funds, *call your bank*, not the Endowment. You must ask if it received an ACH payment (do not use any other term) to your account.

Submitting Your Request:

Organizations are encouraged to FAX their requests to the Grants & Contracts Office at (202) 682-5626.

NOTE: The delivery of first-class mail to NEA has been delayed since October 2001. Delays are expected to continue for the foreseeable future. If you do not FAX your payment request, please consider using an alternative delivery service.

If you FAX your material, DO NOT SEND A HARD COPY.

Note:

29 CFR Part 505 *Labor Standards on Projects or Productions Assisted by Grants from the National Endowments for the Arts and Humanities* in its entirety is available on line at http://www.access.gpo.gov/nara/cfr/waisidx_98/29cfr505_98.html