

**State of Illinois Uniform Notice of Funding Opportunity (NOFO)  
Summary Information**

Awarding Agency Name	Human Services
Agency Contact	Erica O'Neal (DHS.DDDGrantProg@illinois.gov)
Announcement Type	Initial
Type of Assistance Instrument	Grant
Funding Opportunity Number	26-444-24-1508-01
Funding Opportunity Title	Latino Outreach
CSFA Number	444-24-1508
CSFA Popular Name	Latino Outreach
Anticipated Number of Awards	5
Estimated Total Program Funding	\$165,000
Award Range	\$0 - \$165000
Source of Funding	State
Cost Sharing or Matching Requirements	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	Yes : Requires approval
Posted Date	02/11/2025
Application Date Range	02/11/2025 - 03/21/2025 : 5:00
Grant Application Link	Please select the entire address below and paste it into the browser... <a href="https://www.dhs.state.il.us/page.aspx?item=168969">https://www.dhs.state.il.us/page.aspx?item=168969</a>
Technical Assistance Session	Offered : Yes Mandatory : No Date : 02/20/2025 : 10:00 Registration link : <a href="https://illinois.webex.com/weblink/register/r09a70c686aaead910252b2a17b67ac89">https://illinois.webex.com/weblink/register/r09a70c686aaead910252b2a17b67ac89</a>

# Latino Outreach, 26-444-24-1508-01

## I – NOFO Basic Information

Awarding Agency Name (I-A)	Illinois Department of Human Services
Agency Division Name	Division of Developmental Disability
Agency Contact	Contact Name: Erica O’Neal Email: <a href="mailto:DHS.DDDGrantProg@illinois.gov">DHS.DDDGrantProg@illinois.gov</a>
Announcement Type (I-C)	Competitive – Renewal
Funding Opportunity Title (I-B)	1508 Latino Outreach
Funding Opportunity Number (I-D)	26-444-24-1508-01
Application Posting Date	February 11, 2025
<a href="#">Application Closing Date</a>	March 21, 2025, at 5:00 p.m. CST
Catalog of State Financial Assistance (CSFA) Number	444-24-1508
Catalog of State Financial Assistance (CSFA) Name	Latino Outreach
Assistance Listing Number(s) (I-E)	N/A
Awarding Source	State Funded
Estimated Total Program Funding	\$165,000
Average Previous Award Funding	\$80,997
Anticipated Number of Awards	2-5 awardees
Award Range	Negotiable
Cost Sharing or Matching Requirement	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	Yes, requires approval.
Technical Assistance Session	Session Offered: Yes Session Mandatory: No Date: February 20, 2025, at 10:00 a.m. CST
Technical Assistance Session Registration Link:	<a href="https://illinois.webex.com/weblink/register/r09a70c686aaead910252b2a17b67ac89">https://illinois.webex.com/weblink/register/r09a70c686aaead910252b2a17b67ac89</a>

\*\* The release of this NOFO does not obligate the Illinois Department of Human Services to make an award.

\*\* IDHS recognizes the language around race and ethnicity is complex, and continues to evolve as individuals, organizations, and institutions seek to be respectful and inclusive of all segments of a community. As such, IDHS will continue to be as responsive as possible to these changes and refinements as the understanding of these complex constructs related to race and ethnicity evolves.

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### i. **Basic Information Continued - Section F through I**

F. Funding Details

1. Total Amount of Funding

a. The Department expects to award approximately \$165,000.

b. The source of the funding for this program is State funds.

2. Number of Grant Awards

a. The Department anticipate funding approximately 2-5 grants awards to provide this program.

3. Expected Dollar Amount of Individual Grant Awards

a. The Department anticipates the dollar amount of individual awards will be up to \$165,000.

4. Amount of Funding per Grant Award on average in previous years.
  - a. \$80,997
5. Renewal or Supplementation of Existing Projects Eligibility.
  - a. Applications for renewal or supplementation of existing projects are eligible to compete with applications for new State awards.
  - b. Successful applicants under this NOFO may be eligible to receive two subsequent one-year grant renewals for this program. Renewals are at the discretion of the Department and are based on sufficient appropriation and performance criteria including, but not limited to:
    - i. Grantee has performed satisfactorily during the previous reporting period.
    - ii. All required reports have been submitted on time, unless a written exception has been provided by the Division/Department.
    - iii. No outstanding issues are present (e.g., in good standing with all pre-qualification requirements and no outstanding corrective action, etc.).
6. Procurement Contract Allowability
  - a. Subcontractor Agreement(s) and budgets must be pre-approved by the Department and on file with the Department. Subcontractors are subject to all provisions of this Agreement. The successful applicant Agency shall retain sole responsibility for the performance and monitoring of the subcontractor.
7. [Funding restrictions](#)
  - a. Pre-Award Costs
    - i. Pre-Award Costs are allowed subject to the discretion, review, and prior approval of the IDHS Budget Committee. Pre-Award Costs must be identified as such in the IDHS Uniform Grant Budget Narrative. Applicant must complete the [Pre-Award Cost Authorization Letter](#) form. Additional payment documentation will be required. Pre-Award costs are allowable for this award.

- ii. IDHS grants are governed by 2 CFR. Part 200, Subpart E-Cost Principles. Principles and 30 ILCS 708 which include information on allowable costs, audit requirements, and financial records.
- iii. For [Payment Terms](#) refer to Section VIII or [IDHS: Grantee Payment Methods Notification](#) for additional information.

b. Indirect Costs

- i. Indirect Costs may be applied to this grant award. Indirect Cost rates must be approved through the [Illinois Indirect Cost Rate Election System](#) (ICRES).
- ii. Refer to Section VIII, subsection F for [Indirect Cost Options](#).

8. The release of this NOFO does not obligate the Illinois Department of Human Services to make an award.

G. Key Dates

- 1. Application Posting Date: February 11, 2025.
- 2. The Department must receive the Full Application: March 21, 2025, at 5:00 p.m. CST.
- 3. Anticipated Award Date: May 23, 2025.
- 4. Subject to appropriation, the grant period will begin no sooner than July 1, 2025, and will continue through June 30, 2028.

H. Executive Summary

1. Brief Program Description

The Latino Outreach program is meant to provide outreach, engagement, support, resources, and referrals to Latino/Hispanic individuals with intellectual and/or developmental disabilities (I/DD) and their families. Individuals who are not enrolled in and/or receiving any Home and Community Based Waiver funded services (HCBS) through any waivers operated by any State Agency (Department on Aging (IDoA), Division of Rehabilitation Services (DHS, DRS), Division of Specialized Care for Children (DSCC), etc.) are eligible for this service.

2. Key Goals and objectives

- a. Preserve community living and maximize independence for Latino individuals with I/DD.

- b. Connect Latino individuals with I/DD to linguistically and culturally appropriate resources.
  - c. Connect Latino families caring for an individual with I/DD to linguistically and culturally appropriate resources in order to better support the individual with I/DD.
  - d. Increase family capacity to navigate the service system, understand resources available and find natural supports through the creation of peer groups.
  - e. Eligible Recipients for DDD are required to have an I/DD and meet the requirements of the scope of the grant program.
- I. Agency Contact Information
1. If you have questions about this NOFO, please contact.
    - Email: [DHS.DDDGrantProg@illinois.gov](mailto:DHS.DDDGrantProg@illinois.gov).
    - DHS Contact: Erica O’Neal
    - Subject line: “NOFO questions – Latino Outreach Program”
  2. A Frequently asked Question and Answer page is posted on the DHS website. Questions submitted up to 7 business days prior to the end of the NOFO posting period, will be posted on the website.

## II - [Eligibility](#)

### i. **Eligible Applicants**

#### A. [Program Specific Eligibility](#)

1. Has demonstrated experience providing services and supports to individual with intellectual/developmental disabilities and their families.
2. Has demonstrated the ability to meet all the program goals described in this NOFO.
3. Has met the criteria laid out in Section VI Application Review Information, [Criteria and Weighting of Each Criteria](#).
4. Individuals being provided services are not enrolled in and/or receiving any Home and Community Based Waiver funded services (HCBS) through any waivers operated by any State Agency (Department on Aging (IDoA), Division of Rehabilitation Services (DHS, DRS), Division of Specialized Care for Children (DSCC), etc.

## B. [Prequalification Requirements](#)

1. The applicant must meet the Registration, Pre-qualification and any other Mandatory Requirements listed in this funding opportunity.
2. Applicants must provide the following information via the Grantee Portal annually to be registered with the State of Illinois as an awardee:
  - a. Organization name and contact information.
  - b. Federal Employee Identification Number (FEIN).
  - c. Unique Entity Identifier (UEI).
  - d. Organization type.
3. Applicants must be prequalified; therefore, applications from entities that have not prequalified prior to the due date of this application will NOT be reviewed and will NOT be considered for funding. Items (a) through (e) below are the prequalification requirements.
  - a. Unique Entity Identifiers and SAM Registration: Each applicant (unless the applicant is an individual or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:
    - i. Be registered in [SAM.gov](#) before the application due date.
    - ii. Provide a valid Unique Entity Identifier (UEI) in its application.
    - iii. Continue to maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by the awarding agency.
    - iv. The State Agency may not make an award until applicant has fully complied to all UEI and SAM requirements.
    - v. The State Agency may determine that an applicant is not qualified if they have not complied with requirements and use that determination as a basis to award another applicant or applicants.
  - b. Must be in "good standing" with the Illinois Secretary of State if the Illinois Secretary of State requires the entity's organization type to be registered.

- c. Must not be on the Illinois Stop Payment List.
  - d. Must not be on the SAM.gov Exclusion List.
  - e. Must not be on the Medicaid Sanctions List
- C. Successful applicants will not receive an award if [pre-award requirements](#) are not met. Qualified status is verified at time of application. Applicants who are not eligible due to registration or pre-qualification issues, or late applications will be notified that they are ineligible for consideration when the requirements of the grant application or pre-qualification, have not been met. This will be done through email contact, to the corresponding contact information, on the application submission.
- D. Resubmission of the complete and updated application will be allowed for consideration if received prior to the [application closing date](#).
- E. See [Funding restrictions](#) in NOFO Basic Information Section.
- F. Other, Requirements
1. All applicants will use grant funds according to the guidelines, conditions, and parameters set forth in this funding notice and in compliance with federal statutes, regulations and the terms and conditions of any applicable federal awards.
  2. Please refer to 2 CFR 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Part 200 Subpart E - Cost Principles to determine the appropriateness of costs.
  3. Allowable costs are those that are necessary and reasonable based on the activities contained in the Scope of Work, are justified in the Budget Narrative, and are allowable under Subpart E of 2 CFR 200. It is expected that administrative costs, both direct and indirect, will represent a small portion of the overall program budget. Any budget deemed to include inappropriate or excessive administrative costs will not be approved. Program budgets and narratives must detail how all proposed expenditures are necessary for program implementation.
  4. [Unallowable costs](#): Please refer to 2 CFR 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Part 200 Subpart E - Cost Principles to determine the appropriateness of costs. In addition, and specific to this grant, the following costs will be unallowable without specific prior written approval from IDHS:

- a. Entertainment costs, except where specific costs that might otherwise be considered entertainment have a programmatic purpose and are authorized in the approved budget (2 CFR 200.438).
  - b. Capital expenditures for general purpose equipment, including any vehicle regardless of cost, buildings, and land (2 CFR 200.439).
  - c. Capital expenditures for improvements to land, buildings, or equipment which materially increase their value or useful life (2 CFR 200.439).
  - d. Food, and other goods or services for personal use of the grantee's employees, contractors, or consultants of the grantee unless authorized as per diem under the State of Illinois Governor's Travel Control Board (2 CFR 200.445).
  - e. Deposits for items, services, or space.
  - f. That the grantee agency, prior to making a subaward with a total amount of funds greater than the simplified acquisition threshold, is required to review and consider any information about the applicant that is in the designated integrity and performance system accessible through SAM (currently FAPIIS) (see 41 U.S.C. 2313).
- G. Limit of one accepted application per agency.

ii. **Cost Sharing**

- A. Providers are not required to participate in cost sharing or provide match.

### III - [Program Description](#)

A. Program Description

The general purpose of the funding to provide outreach, engagement, support, resources, and referrals to Latino individuals with intellectual and/or developmental disabilities (I/DD) and their families who are not enrolled or receiving any other waivers operated through another State Agency.

Latino Outreach Program should provide the following:

1. Linguistically and culturally appropriate outreach, engagement, and support to Latino individuals and their families.

2. Equipped with the linguistically and culturally appropriate connections and resources to work with other organizations to provide services and assistance to I/DD individuals and their families. These should include referrals and transition support to the local Independent Service Coordination Agency (ISC) for PUNS registration.
3. Immediate and direct resource direction assistance, in the individual's language, for a range of problems. The problems include, but are not limited to, mental health services, accessing Medicaid benefits, social security benefits, vocational rehabilitation, guardianship, supportive decision making, IEP or 504 plan meeting, and other needs presented by an individual with I/DD.
4. A support group for families with I/DD for peer-to-peer support, professional instruction, and information about needed resources.
5. Alternative activities and services to individuals with I/DD allowing families to attend support groups.

B. The State agency's funding priorities or focus areas.

IDHS is working to counteract systemic racism and inequity, and to prioritize and maximize diversity throughout its service provision process. This work involves addressing existing institutionalized inequities, aiming to create transformation, and operationalizing equity and racial justice. It also focuses on the creation of a culture of inclusivity for all regardless of race, gender, religion, sexual orientation, or ability.

C. [Program Goals](#) and Objectives.

1. Preserve community living and maximize independence for Latino individuals with I/DD.
2. Connect Latino individuals with I/DD to linguistically and culturally appropriate resources.
3. Connect Latino families caring for an individual with I/DD to linguistically and culturally appropriate resources in order to better support the individual with I/DD.
4. Increase family capacity to navigate the service system, understand resources available and find natural supports through the creation of peer groups.

D. The award will contribute to achieving the program's goals and objectives by connecting I/DD individuals and their families with linguistically and culturally

appropriate resources for outreach, engagement, support, and referrals within the various areas of services noted in the program description.

- E. The expected performance goals, indicators, targets, baseline data, data collection, and other outcomes the agency expects recipients to achieve are the following:
1. All individuals served must have an I/DD.
  2. A minimum of eighty percent of individuals with an I/DD who contact the Latino Outreach Program must be provided services.
  3. Report the total number of I/DD individuals who entered waiver services as a result of contacting the Latino Outreach Program. Provide a minimum of one family resource presentations to I/DD individuals and their families each quarter, totally a minimum of four presentations per year.
  4. Provide a minimum of one family peer to peer group meeting or presentation to I/DD individuals and their families each quarter, totally a minimum of four presentations per year.
  5. Successful applicants will provide a satisfaction survey to all I/DD individuals and/or their families being provided Latino Outreach services. The agency must receive an overall customer satisfaction average of 80% or higher with Epilepsy Program services received.
  6. At the end of the year, successful applicants will also submit a cumulative report with the cumulative totals from above.
- F. For cooperative agreements, the "substantial involvement" that the State agency expects to have are (or are located) N/A.
- G. Specific [Unallowable costs](#) described in Eligibility Information Section.
- H. Program beneficiaries or program participants must meet the following requirements: participants must have an intellectual or developmental disability.
- I. Authorizing statutes and regulations for the funding opportunity include the following:

[Federal Grants and Agreements \(2 CFR 200\)](#)

[Developmental Disabilities CSA Attachment A](#)

[Developmental Disabilities Program Manual](#)

[Illinois Administrative Code, Title 59, Chapter 1, Part 120 \(Rule 120\)](#)

[Mental Health and Developmental Disabilities Code \(405 ILCS 5\)](#)

[Department of Human Services Act \(20 ILCS 1305\)](#)

[Community Services Act \(405 ILCS 30\)](#)

[Adult Protective Services Act \(320 ILCS 20\)](#)

[IDHS: DDD Pre-Admission Screening \(PAS\) Manual](#)

[Abused and Neglected Child Reporting Act \(325 ILCS 5\)](#)

## IV - [Application Contents and Format](#)

- A. Content and Form of Application Submission - Applications must include the required documents and demonstrate that the program eligibility requirements have been met. The Department will not contact applicants for missing items listed below. Applicants that do not include all the following documents will be considered substantially incomplete and will not be considered for funding. Refer to Section V for [Submission Instructions](#).
  1. Pre-applications, letters of intent, or white papers are not required.
  2. Required Content of Application
    - a. Applications must include the required documents and demonstrate that the program eligibility requirements have been met. The Department will not contact applicants for missing items listed below. Applicants that do not include all the following documents will be considered substantially incomplete and will not be considered for funding. Refer to Section V (iii)B for details.
  3. Program Narrative and Proposal Narrative Content with Attachments
    - a. Program Narrative: IMPORTANT, the program (proposal) narrative makes up the bulk of the application. Please provide a complete response to the following sections. If the program narrative is missing from your application packet, your application will receive a score of zero points and your agency will not meet the criteria to receive a grant under this notice of funding opportunity.

- b. Proposal Narrative Content and Attachments: If the applicant believes that the subject has been adequately addressed in another part of the application narrative, then provide the cross-reference to the appropriate part of the narrative. If a cross-reference is not included in the section, the reviewer will consider content contained within that specific section.
4. [Budget and Budget Narrative](#) - Applicants must enter a budget electronically in the CSA and provide a copy of the completed budget in PDF format.
- a. The budget entered in the CSA system will include a narrative or detailed description/justification for each line in the budget, describe why each expenditure is necessary for program implementation, and how you arrived at the specific amount. Please include cost allocations as necessary. This narrative must clearly identify indirect costs, direct program costs, direct administrative costs, and match within each line item as appropriate. The budget (including MTDC base exclusions as appropriate) should clearly describe how the specified resources and personnel have been allocated for the tasks and activities described in your plan.
  - b. The budget and narrative must tie fiscal activity, to program objectives and deliverables, and demonstrate that all proposed costs are:
    - i. Reasonable and necessary
    - ii. Allocable
    - iii. Allowable as defined by program regulatory requirements and the Uniform Guidance (2CFR 200), as applicable.
  - c. If indirect costs are included in the budget, and the applicant has a currently approved NICRA, you must ensure the NICRA has been uploaded in the State of Illinois Indirect Cost System.
  - d. The budget submitted in the CSA system must be electronically signed by the Provider's Chief Executive Officer and/or Chief Financial Officer. This is the same requirement for the PDF version that is required.

**IMPORTANT:** Please be sure the budget status in CSA says "GATA Budget signed and submitted to program review." This status will appear after the budget is electronically signed by the agency CEO or CFO and submitted to IDHS. See IDHS CSA Tracking System webpage for additional information on CSA at [IDHS CSA Tracking System](#).

- e. Additional information for entering a Uniform Grant Budget can be found at [Budget Template](#) and [Budget Template Instructions](#). Be sure to follow instructions on website on how to download the Template.

## 5. Required Forms

- a. Uniform Application for State Grant Assistance – This is a three-page document used to formalize organization's request to apply for funding. The document requires the signature and email address of the organization's authorized representative. This email address will be used for official communication between the Department and the applicant organization for matters regarding this application. [IL444-5262 - UNIFORM APPLICATION FOR STATE GRANT ASSISTANCE \(.pdf\)](#)
- b. Grantee Conflict of Interest Disclosure – This is required for all grant award programs. The document requires agencies to identify actual or potential conflicts of interest. The form must be signed by a representative of the organization. [IL444-5205 - GRANTEE CONFLICT OF INTEREST DISCLOSURE \(.pdf\)](#)

## 6. Required Format

- a. Application Format Requirements: Electronic submission is required in PDF format.
- b. Document Submission Requirements:
  - i. 8.5" X 11" Paper size, Single spaced, 12-size font, Calibri typeface, one-inch margins, and display page numbers.
  - ii. The applicant should not use agency letter head or agency identification formatting features on the application. Limit reference to the agency's name, specifically, in the program narrative. The agency's name and identifiers will be redacted, from the documentation, for the Merit Review Process. This ensures a fair and unbiased scoring process.
  - iii. File name should be "Funding Opportunity Number, Program Name, and Agency Name".
  - iv. All forms must be signed and dated.

- v. The application must be no more than 25 pages. This includes the application and narrative. (Uniform Grant Budget and Grantee Conflict of Interest Disclosure form are not included in this count)
- c. The narrative portion must follow the page maximums where prescribed and must be organized in the format outlined or points may be deducted.
- d. The Department may determine that an applicant is not qualified if they have not complied to requirements and use that determination as a basis to award to another applicant.

## V - Submission Requirements and Deadlines

### i. **Address to Request Application Packet**

#### A. Actions Needed Prior to Applying:

1. The complete application packet (this Notice of Funding Opportunity, including links to required forms) is available through the Illinois Catalog of Financial Assistance and the IDHS Grants Website Page located: [IDHS: Grant Funded Programs \(state.il.us\)](https://www.idhs.gov/grants).
2. Each Applicant must have access to the internet. The Department's website will contain information regarding the NOFO and materials necessary for submission. Questions and answers will also be posted on the Department's website as described in this announcement in Section I. It is the responsibility of each applicant to monitor the website and comply with any instructions or requirements related to the NOFO.

### ii. **Unique entity identifier and System for Award Management (SAM.gov).**

#### A. Each applicant must:

1. Be registered in [SAM.gov](https://sam.gov) before submitting its application.
2. Provide a valid unique entity identifier in its application.
3. Continue to maintain an active registration in SAM.gov with current information at all times during which it has an active award or an application or plan under consideration.
4. The Department may not make an award until applicant has fully complied to all UEI and SAM requirements.

5. The Department may determine that an applicant is not qualified if they have not complied to requirements and use that determination as a basis to award to another applicant.

iii. **Submission Instructions**

A. Actions needed prior to applying:

Applicants must be registered with the State of Illinois and Pre-qualified in the GATA portal prior to applying for Illinois awards. Instructions for creating an account and registering are located at the following link: [Illinois GATA Grantee Portal](#). Additionally, detailed instructions for registration and prequalification requirements, including the expected amount of time for completion are located here: [Grant Applicant Pre-Qualification and Pre-Award Requirements](#).

B. The methods for submitting the application:

1. Applicants must electronically submit the complete application including all required narratives and attachments in the prescribed order:
  - a. [Program Narrative](#)
  - b. [Uniform Application for State Grant Assistance](#)
  - c. [Grantee Conflict of Interest Disclosure](#)
  - d. [Budget](#)- entered into the CSA system and copy in PDF format.
2. Applications must be sent electronically to:
  - Email: [DHS.DDDGrantProg@illinois.gov](mailto:DHS.DDDGrantProg@illinois.gov)
  - Subject Line: "26-444-24-1508, NOFO Latino Outreach Application, your Agency's Name"

**IMPORTANT:** *The Department will ONLY accept applications submitted by electronic mail sent to this email address. Application submissions or delivery to any other email address or contact, including other IDHS offices or employees, will not be considered for review or funding. Applications will not be accepted if received by fax machine, hard copy, disk, thumb drive, password protected emails, password protected documents, and emails from encrypted email protection companies (such as, Prevail,*

Barracuda Network, Trustifi, etc. list not full inclusive). The application will be electronically time-stamped upon receipt.

3. Software or electronic capabilities required are as follows: Internet access, preferable high-speed, Email capability, Microsoft Word, Microsoft Excel, and Abode Reader. The purchase of this technology would be an allowable expenditure under the grant and may be budgeted for as part of this application.
4. Applicants are required to notify the Department within 48 hours of the deadline, if they did not receive an email notifying them that their application was received. If the applicant does not receive an email and does not notify the Department within 48 hours, their application will be considered a late submission and will NOT be reviewed or scored. The applicant will NOT have the right to protest the submission/receipt of their application to the Department after the 48 hours. In the event of a dispute, the applicant bears the burden of proof that the application was received on time at the email location listed above (and that the budget was submitted into the CSA system on time).

C. Pre-application materials must be submitted as follows: N/A

D. If you are experiencing system problems or technical difficulties submitting your application, you may contact us at:

- Name: Erica O’Neal
- Email: [DHS.DDDGrantProg@illinois.gov](mailto:DHS.DDDGrantProg@illinois.gov)
- Subject line: “NOFO Technical Difficulties, Latino Outreach”

iv. ***Submission Dates and Times.***

- A. Full applications are due on the following date March 21, 2025, at the following time 5:00 p.m. (CST).
- B. Any preliminary submissions, such as letters of intent, white papers, or pre-applications are due on the following date N/A.
- C. Other submissions required before the award N/A.
- D. Missed Deadlines

1. Applications received after the due date and time will not be considered for review or funding. All applicants/applications determined to be non-compliant or otherwise determined to be disqualified from consideration will be separately notified in writing, by email, upon determination. This email will be sent to the email addresses provided in the application and will identify the reason for disqualification.
2. For your records, please keep a copy of your submission with the date and time the application was submitted along with the email address to which it was sent. The deadline will be strictly enforced.
3. **IMPORTANT:** It is strongly recommended that the applicant not wait until the last minute to submit an application in case they experience technical difficulties with the submission process. Applicants should keep copies of all documentation that may prove their application was submitted to the correct location and that it was received by IDHS on or before the deadline. Applicants should also maintain all electronic documentation, including screen shots, email correspondence, help desk ticket numbers, etc. that would document any unforeseen difficulties the applicant may have encountered regarding the timely submission of the application.

v. ***Intergovernmental Review***

- A. This funding opportunity is NOT subject to [Executive Order 12372](#), "Intergovernmental Review of Federal Programs".

## VI - [Application Review Information](#)

i. ***Responsiveness Review.***

- A. Applications that are received will be reviewed between March 24, 2025, to April 25, 2025, to ensure they meet the criteria for consideration. Applications that do not meet the criteria described in Section II, [Eligibility](#), will be rejected. These applications will not be considered in the Merit Review process.
- B. The following are the criteria that must be met for eligibility:
  1. Applicant has a current registration with the State of Illinois in the Grantee Portal.
  2. Applicant has an active Sam.gov public account.
  3. Applicant has an active Unique Entity Identifier (UEI) with Sam.gov

4. Applicant is in "good standing" with the Secretary of State.
  5. Applicant is not on the DHS Stop Payment List Service or the Illinois Stop Payment List.
  6. Applicant is not on the Sam.gov Exclusion List.
  7. Applicant is not on the Illinois Medicaid Sanctions List.
- C. Restrictions on eligibility for State awards are referenced in 44 Ill Admin Code 7000.70. Program specific eligibility restrictions are referenced in this Notice of Funding Opportunity.
- D. All applicants/applications determined to be non-compliant or otherwise determined to be disqualified from consideration will be notified. This email will be sent to the email addresses provided in the application and will identify the reason for disqualification.

ii. **Review Criteria**

A. Review **Criteria – Maximum Total 100 Points.**

Program Plan/Narrative – 75 Total Points in this Section.

1. **Need** (Description of Need) - 25 Points

The applicant's proposal will be evaluated based on the following:

- a. Analysis of the needs of individuals with I/DD in the proposed service area(s) and target communities.
- b. Identify ways the agency will target new recipients for program support.
- c. Identify ways the agency identifies individuals with I/DD from [minority group needs and/or underserved communities](#).
- d. Provide data, facts and/or evidence demonstrating the ways the proposed program will meet programmatic needs.

The ideal applicant will:

- a. Clearly define the Latino outreach service area and target communities to be supported.
- b. Clearly define group needs and underserved community needs and the ways the program will support them.

- c. Present a plan to address the needs that is realistic and will meet individual and family needs based on the program goals.
- d. Provide data, facts, and/or evidence demonstrating that the proposal supports the grant program purpose.

2. **Capacity** (Agency Qualification/Organizational Capacity) - 25 Points

The applicant's proposal will be evaluated based on the following:

- a. Agency's ability to be fully ready to begin providing services by July 1, 2025.
- b. Agency's prior experience providing Latino outreach services to individuals with I/DD and their families. Detailed description as to how the agency will directly engage individual with I/DD and their families.
- c. Copy of the Agency's proposed Needs Assessment
- d. Agency's ability to execute the program according to the grant requirements.
- e. Agency's ability to share data received through the Program's work.

The ideal applicant will:

- a. Provide a detailed description of the process the agency will undergo to ensure services are operational no later than July 1, 2025.
- b. Clearly articulates expertise and experience in working with both the Latino community overall and Latino individuals with I/DD and their families.
- c. Provide a detailed description of the process the agency will undertake to create and plan marketing and outreach resources and activities.
- d. The Agency's ability to provide an establishment that is ADA accessible.

3. **Quality of Program/Services** - 25 Points

- a. Demonstrates that the proposal is well articulated in alignment with the program goals.

- b. Provides a detailed summary of the provider's support team and processes for providing quality.
- c. Provides examples of agency satisfaction measurements process and how services and supports will be adjusted on feedback.
- d. Provides a detailed summary of the agency's quality assurance processes to ensure compliance with the program goals as well as DDD, IDHS, and GATA requirements.
- e. Ensure the agency has appropriate processes in place to measure quality assurance and make changes/updates as needed.

The ideal applicant will:

- a. Provide a detailed description as to how the agency will directly engage with individuals with I/DD and their families who are referred for Latino Outreach services.
- b. Provides a detailed summary of the agency's quality assurance processes to ensure compliance with the program goals as well as DDD, IDHS, and GATA requirements.
- c. Provide a detailed description that the agency has experience providing Latino Outreach services to individuals with I/DD and their families with a specific focus on the program goals.
- d. Ensure the agency has appropriate processes in place to measure quality assurance and make changes/updates as needed.

**4. Executive Summary - 15 Points**

The Executive Summary will serve as a stand-alone document for successful applicants that will be shared with various state-level stakeholders and others requesting a brief overview of each funded project. Therefore, applicants should be concise and direct in their description. Information in this section should include, but not be limited to, the following:

- a. Identify the amount being requested under this proposal.
- b. Identify target service areas/communities.
- c. Identify the number of individuals with I/DD who are projected to participate.

- d. Briefly describe agency experience in providing services and supports to individuals with I/DD and their families.
- e. Provide an overview of the services to be provided.
- f. Describe how the program will address the [Program Goals](#).
- g. Share data regarding previous work completed with the agency, as applicable.

The ideal applicant will:

- a. Demonstrate an understanding in Latino outreach needs in the State of Illinois and present a plan to address these needs in a logical manner. The applicants plan will address appropriate services resources required to meet the level of need.
- b. Clearly define the target audience and area of operations for services. The plan to meet the needs of target audience and full service in area operations must be realistic. Additional consideration will be provided for those that services across a broader geographic area.
- c. Provide data, facts, and/or evidence demonstrating that the proposal supports the grant program purpose.
- d. Support and services provided will meet the program goals.

**5. Budget & Cost Justification - 10 Points**

The applicant's budget proposal narrative will be evaluated based completeness and signature. The budget proposal narrative shall include the following information as it relates to the NOFO program:

- a. Thorough and clear justification for all proposed line-item expenditures.
- b. All expenditures and program costs are reasonable and allowable.
- c. Administrative costs are no more than 10% of the proposed budget.
- d. Proposed staffing is sufficient to address customer projections and customer language needs.
- e. Proposed expenditures address annual costs of living and inflation costs.
- f. Where available, supplemental or companion funding is clearly identified.

- g. Verify the proposed budget total matches the total funding amount listed on the application.

6. [Definitions](#)

- a. **Minority Group:** A minority group is any group of people who, because of their physical or cultural characteristics, are singled out from others in the society in which they live for differential and unequal treatment.
- b. **Underserved Community:** An underserved community is characterized as a community that includes members of minority populations or individuals that are underserved because of geographic location, religion, sexual orientation, gender identity, special needs (including language barriers, disabilities, alien status, or age).

iii. ***Review and Selection Process.***

- A. The process for evaluation of the application is as follows:

The numerical score may not be the sole award criterion. The Department reserves the right to consider any factors such as: geographical distribution, demonstrated need, and agency past performance as a State of Illinois grantee, etc. While the recommendation of the review panel will be a key factor in the funding decision, the Department maintains final authority over funding decisions and considers the findings of the reviewers to be non-binding recommendations. Any internal documentation used in scoring or awarding of grants shall not be considered public information.

- B. In the event of a tie with insufficient funding for all tied applications, the Department may choose to elect one or more of the following options:
  - 1. Apply one or more of the additional factors for consideration described above to prioritize the applications; or
  - 2. Partially fund each of the tied applications; or
  - 3. Not fund any of the tied applications. The Department reserves the right to negotiate with successful applicants to adjust award amounts, targets, deliverables, etc.
- C. Anticipated Announcement and State Award Date is May 23, 2025.
- D. Merit Review Appeal Process

1. In accordance with GATA Administrative Rules, Section 350, Merit Review of Grant Applications, a merit review is required for applications of competitive (discretionary) Grants and Cooperative Agreements, unless prohibited by State or federal statute. ([44 Ill. Adm. Code 7000.350](#)).
2. Competitive grant appeals are limited to the evaluation process. Evaluation scores may not be protested. Only the evaluation process is subject to appeal and shall be reviewed by IDHS' Appeal Review Officer (ARO).
3. Submission of Appeal – contact information.
  - Contact Name: Erica O’Neal
  - Email address: [DHS.DDDGrantProg@illinois.gov](mailto:DHS.DDDGrantProg@illinois.gov)
  - Email Subject Line: “Appeal Review Requested, Latino Outreach, Agency’s Name”
4. Appeal Instructions
  - a. An appeal must be submitted in writing to the appeals submission IDHS contact listed above, who will send to the IDHS Appeal Review Officer (ARO) for consideration.
  - b. An appeal must be received within 14 calendar days after the date that the grant award notice has been published.
  - c. The written appeal shall include at a minimum the following:
    - i. Name and address of the appealing party.
    - ii. Identification of the grant.
    - iii. Statement of the reasons for the appeal.
    - iv. Supporting documentation, if applicable.
5. Response to appeal
  - a. IDHS will acknowledge receipt of an appeal within 14 calendar days from the date the appeal was received.
    - i. IDHS will respond to the appeal within 60 days or supply a written explanation to the appealing party as to why additional time is required.

- ii. The appealing party must supply any additional information requested by IDHS within the time period set in the request.

#### 6. Resolution

- a. The ARO will make a recommendation to the Agency Head or designee as expeditiously as possible after receiving all relevant, requested information.
  - i. In determining the appropriate recommendation, the ARO shall consider the integrity of the competitive grant process and the impact of the recommendation on the State Agency.
  - ii. The Agency will resolve the appeal by means of written determination.
  - iii. The determination shall include, but not be limited to:
    - o Review of the appeal.
    - o Appeal determination; and
    - o Rationale for the determination.

#### iv. **Risk Review**

- A. IDHS conducts risk assessments for all awardees, prior to the award being issued.
  - 1. An agency wide Internal Control Questionnaire (ICQ) to be completed by the awardee within the Grantee Portal. The ICQ evaluates fiscal, administrative, and programmatic risk in the following categories:
    - a. Quality of Management Systems
    - b. Financial and Programmatic Reporting
    - c. Ability to Effectively Implement Award Requirements
    - d. Awardee Audits
  - 2. A program specific Programmatic Risk Assessment conducted by the awarding agency to evaluate the following categories:
    - a. Programmatic financial stability.
    - b. Management systems and standards that would affect the program.

- c. Programmatic audit and monitoring findings.
  - d. Ability to effectively implement program requirements.
  - e. External partnerships.
  - f. Programmatic reporting.
3. Risk assessments are not intended to be punitive in nature, rather they are conducted in order to evaluate the support, technical assistance, and training that may be needed for the awardee and the level of monitoring that is needed for the award.
  4. Risk assessments may result in Specific Conditions being placed on the award to include more frequent monitoring or the implementation of a corrective action plan.
- B. Simplified Acquisition Threshold - Federal and State awards
1. This award is not anticipated to exceed the Simplified Acquisition Threshold defined in 48 CFR part 2, subpart 2.1.

## VII - [Award Notices](#)

### A. State Award Notices

1. Applicants recommended for funding under this NOFO following the review and selection process will receive a Notice of State Award (NOSA). The NOSA shall include:
  - a. Grant award amount.
  - b. The terms and conditions of the award.
  - c. Specific conditions, if any, assigned to the applicant based on the fiscal and administrative risk assessment (ICQ), programmatic risk assessments (PRA), and the Merit Review.
2. Note: The Department cannot issue a NOSA until the successful applicant has an approved budget entered into the CSA system. The applicant shall receive the NOSA through the Grantee Portal. The NOSA must be signed by the agency's grants officer (or equivalent). This signature effectively accepts the state award amount and all conditions set forth within the notice. The signed

NOSA is the document authorizing the Department to proceed with issuing an agreement. The Agency signed NOSA must be remitted to the Department as instructed in the notice.

3. The notice is not an authorization to begin performance (to the extent that it allows charging to State awards of pre-award costs; pre-award costs are incurred at the non-State entities own risk unless they have received written prior approval to begin performance).
4. The authorizing document to begin performance is the fully executed Uniform Grant Agreement (UGA) signed by the grants officer, or equivalent. This is the official document that obligates funds. The UGA is sent to the non-State entity via the CSA system. The non-State entity will print and sign the signature page of the UGA and return signature page to [DHS.OCA.SignaturePages@illinois.gov](mailto:DHS.OCA.SignaturePages@illinois.gov). A final signed copy of the UGA will be provided to the non-State entity via an upload into the CSA Tracking system.
5. Applicants who are not eligible due to registration or pre-qualification issues, or late applications will be notified that they are ineligible for consideration when the requirements of the grant application or pre-qualification, have not been met. This will be done through email contact, to the corresponding contact information, on the application submission. Resubmission of the complete and updated application will be allowed for consideration if received prior to the application closing date noted in the NOFO Basic Information Section.
6. A written Notice of Denial shall be sent to the applicants not receiving an award, following the Merit Review process.

## VIII - Post-Award Requirements and Administration

### i. **Administrative and National Policy Requirements.**

- A. The agency awarded funds shall provide services as set forth in the IDHS grant agreement and shall act in accordance with all State and Federal statutes and administrative rules applicable to the provision of the services.
- B. Sample of the [IDHS Uniform Grant Agreement](#)
- C. [Payment Terms](#)

The Illinois Department of Human Services (IDHS) payment policy complies with 2 CFR 200.302, 2 CFR 200.305, and 44 Ill. Admin. Code 7000.120 (GOMB Adoption

of Supplemental Rules for Grant Payment Methods) and the Cash Management Improvement Act and the Treasury-State Agreement (TSA) default procedures codified at 31 CFR 205. IDHS payments to grantees will be governed in accordance with the established criteria.

Grantees will receive payment by one of the three payment methodologies (Advance Payment, Reimbursement or Working Capital Advance). Grantees will automatically be paid via Reimbursement Method unless a request for Advance Payment Method or Working Capital Advance Method is made using the IDHS Advance Payment Request Cash Budget Template (Cash Budget).

1. Advance Payment Method (Advance and Reconcile)

- a. Because IDHS is subject to the Grant Accountability and Transparency Act (GATA), IDHS is required by 44 Ill. Admin. Code 7000.120 to remit Award payments via advance payment when Awardees meet the requirements set forth in 2 CFR 200.302 (Financial Management), 44 Ill. Admin. Code 7000.120(b)(i)(A) (i and ii) (Advance Payments), and other requirements as described in this Directive.
- b. Awardees may request advance payment for each Award issued by IDHS. Requests must be submitted to the respective Award Program Manager by the method prescribed in the Grant program Notice of Funding Opportunity (NOFO) or the Catalog of State Financial Assistance (CSFA) - Program Listing. A separate request must be submitted for each IDHS Grant program application.
- c. Requests for advance payment must be accompanied by an IDHS Advance Payment Request Cash Budget Template (Cash Budget) for each Award. Cash Budgets must be signed by either the Chief Executive Officer (or equivalent) or Chief Financial Officer (or equivalent) for the entity. The executive's signature certifies that their entity complies with the requirements set forth in 2 CFR 200.302 (Financial Management) and 44 Ill. Admin. Code 7000.120(b)(i)(A) (Advance Payments). The Cash Budget must demonstrate the estimated monthly cash requirements for each month of program Award operation. Advance payments must be limited to the minimum amounts needed and be timed to be in accordance with the actual, immediate cash requirements of the Awardee in carrying out the purpose of the approved program or project. The timing and amount of advance payments must be as close as is administratively feasible to the actual disbursements by the Awardee for direct program or project costs

and the proportionate share of any allowable indirect costs. Additionally, the Awardee entity must make timely payments to sub-recipients and contractors.

- d. Upon program approval for advance payment, an initial payment will be processed in an amount equal to the first two months' cash requirements as reflected in the submitted Advance Payment Requirements Forecast (Cash Budget) Form.
  - e. Awardees must submit monthly invoices on the Monthly Grant Invoice form (IL444-5257) in the method prescribed in the Awardee's executed Uniform Grant Agreement Exhibits. The first invoice is due after the first month of Award operations. Invoices must include only allowable incurred costs that have been paid by the Awardee. For Awards that have Awardee matching requirements, allowable costs are only reimbursable when matching costs have also been incurred.
  - f. Subsequent monthly payments will be based on each monthly invoice submitted to the Award program and will be adjusted up or down, based on a comparison of actual cumulative expenditures to cumulative advance payments, to date.
  - g. Awardees that do not expend all advance payment amounts by the end of the Award term or that are unable to demonstrate that all incurred costs were necessary, reasonable, allowable, or allocable as approved in their respective Award budget, must return the funds or be subject to Grant funds recovery.
  - h. Grantees may be required to submit supporting documentation for their requests at the request of and in a manner prescribed by the Grantor.
  - i. Failure to abide by advance payment governance requirements may result in grantee losing their right to advance payments.
2. Reimbursement Method
- a. Awardees will be paid via the reimbursement method when they do not meet the requirements of 44 Ill. Admin. Code 7000.120(b)(2), or upon an Awardee's request to use the reimbursement method of payment, or as stipulated in a specific condition. Awardees that have specific conditions noted in their Uniform Grant Agreement Exhibit language for any of the following items must be paid using the reimbursement method:

- i. Fiscal and administrative high risk (weak internal controls).
  - ii. Have a history of failure to comply with general or specific terms and conditions of Awards.
  - iii. Fail to meet expected performance goals as described in 2 CFR 200.211 or their program deliverables as stated in their applicable Uniform Grant Agreement.
  - iv. Or otherwise not responsible.
- b. IDHS will disburse payments to the Awardee based on actual allowable costs incurred as reported in the monthly financial invoice submitted for the respective month, as described below.
  - c. Awardees must submit monthly invoices on the Monthly Grant Invoice form (IL444-5257) in the method prescribed in the Awardee's executed Uniform Grant Agreement. Invoices must include all allowable incurred costs for the first and each subsequent month of operations until the end of the Award term.
  - d. Invoices will be submitted to the respective Award program points of contact on or before the 15th day following the end of any respective monthly invoice period. (Award Program Managers may amend the due date from the 15th day of the month to facilitate program and Awardee requirements.)
  - e. Awardees may be required to submit supporting documentation for their requests at the request of and in a manner prescribed by the Grantor.
3. Working Capital Advance Method
- a. For Awardees that cannot meet the requirements set forth in 2 CFR 200.302 (Financial Management), 44 Ill. Admin. Code 7000.120(b)(1)(A)(i and ii) (Advance Payments), and other requirements as described in this Directive, if the Award Program Manager determines that reimbursement is not feasible because the Awardee lacks sufficient working capital, the Award program may, in its sole discretion, provide a working capital advance to the Awardee.
  - b. Awardees may request separate working capital advance payments for each Award issued by IDHS at any point in the current grant term.
  - c. Requests must be submitted on the IDHS Advance Payment Request Cash Budget Template (Cash Budget) to the respective Award Program

Manager in the method prescribed in the Award program NOFO or the CSFA - Program Listing. The Cash Budget must include monthly cash requirements for an amount not to exceed two months of forecasted cash needs. A separate request must be submitted for each IDHS Award program application. Requests must be signed by either the Chief Executive Officer (or equivalent) or the Chief Financial Officer (or equivalent) for the entity. The executive's signature certifies the cash requirements are actual expected costs.

- d. IDHS Award Program Managers will advance working capital payments to the Awardee to cover their estimated disbursement needs for an initial period not to exceed two months of Award expenses. Startup costs may be approved if determined by IDHS Award Program Managers to be allowable.
  - e. Awardees must submit monthly invoices for each of the one or two months covered by the Working Capital Advance on the Monthly Grant Invoice form (IL444-5257) in the format and method prescribed in the Awardee's executed Uniform Grant Agreement Exhibits. The first invoice is due after the first month of Award operations. Invoices must include only allowable incurred costs that have been paid by the Awardee. For Award programs that have Awardee matching requirements, allowable costs are only reimbursable when matching costs have also been incurred. Grantees may be required to submit supporting documentation for their requests at the request of and in a manner prescribed by the Grantor.
  - f. Awardees shall be required to submit supporting documentation for their requests at the request of and in a manner prescribed by the respective Award Program Manager.
  - g. Working Capital Advance Payments are limited to a single occurrence per grant term.
  - h. Following the initial period, the Award Program Managers must reimburse the Awardee for its actual cash disbursements as described in Section II of this Administrative Directive, or via advance payment methodology if requirements stated in Section I Advance Payment Method (Advance and Reconcile) are met.
4. All requests for authorization to receive advance payment, working capital advance and reimbursement must be submitted on forms prescribed and approved by the Department, and the executed grant agreement. The Department may be subject to request additional data for review.

5. The funding is contingent upon and subject to the availability of funds. Amendments to award amounts may be necessary within the grant cycle.

#### D. Indirect Cost

Indirect Costs may be applied to this grant award. Indirect Cost rates must be approved through the [Illinois Indirect Cost Rate Election System](#) (ICRES).

1. Each organization receiving an award from a State awarding agency is required to make one of the following indirect cost elections through the indirect cost rate election system (ICRES) in the grantee portal.
2. Indirect Cost Options
  - a. Election of the de minimis rate of 15% of modified total direct cost (MTDC).
    - i. Once elected, the de minimis rate will remain in effect until such a time that the grantee/subrecipient decides to change their election.
    - ii. Once elected, this rate may be used for indirect cost rate reimbursement on State awards, provided the specific award is not subject to statutory restrictions, thresholds or ceilings that limit the indirect cost reimbursement amount. Specific indirect cost restrictions can be located within the Notice of Funding Opportunity (NOFO) for each award.
    - iii. The de minimis rate can be used indefinitely by a grantee until such a time the grantee chooses to negotiate an indirect cost rate, which the grantee may do so at any time. Effective November 12, 2020, once an indirect cost rate is negotiated the de minimis rate option will still be available to the grantee.
    - iv. In accordance with the revisions to 2 CFR 200, effective October 1, 2024, the De Minimis rate has increased to up to 15% of Modified Total Direct Costs (MTDC) for awards executed on or after October 1, 2024. During the transition into the 2024 Uniform Guidance revisions, agencies should work closely with their grantee's to clearly communicate requirements applicable to a given award.
  - b. Federal Negotiated Indirect Cost Rate Agreement (NICRA)

- i. This option is available to grantees that receive awards directly from a federal awarding agency and have negotiated an indirect cost rate with its Federal cognizant agency for indirect costs.
  - ii. The current Federal NICRA will be accepted by all State of Illinois agencies for indirect cost rate reimbursement on State awards, provided the specific award is not subject to statutory restrictions, thresholds or ceilings that limit the indirect cost reimbursement amount. Specific indirect cost restrictions can be located within the Notice of Funding Opportunity (NOFO) for each award.
- c. Election to waive or not to charge indirect cost.
  - i. Once elected, the Waive (No Rate) will remain in effect until such a time that the grantee/subrecipient decides to change their election.
  - ii. This “no rate” option certifies to all State of Illinois agencies that the grantee will not seek indirect cost reimbursement from any State of Illinois award.
  - iii. Grantees that administer programs that are exempt from 2 CFR 200 Subpart E – Cost Principles may elect this option.
- d. Negotiating a State rate
  - i. This option requires an indirect cost rate election be made in the State of Illinois Centralized Indirect Cost System. The proposal and supporting documentation will be developed by the grantee and submitted through the CARS system.
  - ii. A State of Illinois Negotiated Indirect Cost Rate Agreement (NICRA) will be accepted by all State of Illinois agencies for indirect cost rate reimbursement on State awards, provided the specific award is not subject to statutory restrictions, thresholds or ceilings that limit the indirect cost reimbursement amount. Specific indirect cost restrictions can be located within the Notice of Funding Opportunity (NOFO) for each award.
  - iii. A State of Illinois NICRA can only be used for State awards and will not be accepted by federal agencies for use on direct federal awards.
  - iv. Federal Rate Maintained Internally (FRMI) (Local Governments only)

- v. The awardee shall make one election or negotiate one rate that all State agencies must accept unless they are federal or State program limitation, caps, or supplanting issue.
3. The accepted election or negotiated rate shall be recorded in the Grantee Portal and the State Staff Inquiry Screen.
4. The awardee may volunteer to accept a lower indirect cost rate on award, State agencies are not allowed to force or coerce an authority to take a lower rate.
5. Awardees that failed to make an election in ICRES or negotiate a rate in the Indirect Cost Rate Negotiation System will not be allowed to charge indirect cost rate awards. Any indirect cost previously reimbursed during the corresponding grant without making an election may be credited against future payments.
6. Additional details regarding indirect cost rate elections for specific types of entities local governments nonprofit local education agencies etcetera can be found at 44 Ill Admin Code 7000.420 or in the Indirect Cost Rate user manual located in link Section I (E).

E. Payment Forms

1. [Monthly Grants Invoice Template Form](#) (IL 444-5257 N)
2. [Advance Payment Request Cash Budget Form](#) (IL 444-4985)

ii. **Reporting.**

- A. Reporting upon execution of the grant agreement shall be in accordance with the requirements set forth in the UGA and related exhibits which include but is not limited to the following:
  1. Time period for required Periodic Financial Report (PFR). Unless a different reporting requirement is specified in Exhibit E, the grantee shall submit financial reports to Grantor pursuant to Paragraph 10.1 and reports must be submitted no later than 30 days after the quarter ends.
  2. Time period for Close-out reports. Grantee shall submit a Close-out report pursuant to Paragraph 10.2 and no later than 30 days after this Agreement's end of the period of performance or termination.
  3. Time period for required Periodic Performance Reports (PPR). Unless a different reporting requirement is specified in Exhibit E, grantee shall submit

Performance Reports to Grantor pursuant to Paragraph 11.1 and such reports must be submitted no later than 30 days after the quarter ends.

4. Time period for Close-out Performance Reports. Grantee agrees to submit a Close-out Performance Report, pursuant to Paragraph 11.2 and no later than 30 days after this Agreement's end of the period of performance or termination.
  5. Due dates: 1st Quarter Reports are due No Later Than (NLT) October 15th, 2nd Quarter Reports are due NLT January 15th, 3rd Quarter Reports are due NLT April 15th, 4th Quarter Reports are due NLT July 15th.
- B. All performance measurements require the demographic information of the participants being served. This includes individual's name, age, gender identity, race/ethnicity, Recipient Identification Number (RIN), last four of Social Security Number (SSN), and county resides. Refer to [20 ILCS 65](#).
- C. If the State share of any State award may include more than \$500,000 over the period of performance applicants are also subject to the reporting requirements reflected in Appendix XII to 2 CFR 200. Noncompliance with any of the identified reports may lead to being placed on the Illinois Stop-Payment List.

## IX - [Other Information - Optional](#)

- A. Mandatory Forms and Submission:
1. [Uniform Application for State Grant Assistance](#)
  2. [Proposal Narrative](#)
  3. [Uniform Grant Budget in CSA](#) and copy of budget in pdf format.
  4. [Grantee Conflict of Interest Disclosure](#)