

Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted <div style="border: 1px solid black; padding: 2px; min-height: 20px;">US DEPT OF COMMERCE</div>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;">36-09-C13090</div>																															
3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">MERCY COLLEGE</div> Street1: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">555 BROADWAY</div> Street2: <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div> City: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">DOBBS FERRY</div> County: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">WESTCHESTER</div> State: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">NY: New York</div> Province: <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div> Country: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">USA: UNITED STATES</div> ZIP / Postal Code: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">10522-1134</div>																																	
4a. UEI <div style="border: 1px solid black; padding: 2px; min-height: 20px;">N123YUVWUJK1</div>	4b. EIN <div style="border: 1px solid black; padding: 2px; min-height: 20px;">131967321</div>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div>																															
6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	8. Project/Grant Period From: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">08/01/2022</div> To: <div style="border: 1px solid black; padding: 2px; min-height: 20px;">07/31/2024</div>	9. Reporting Period End Date <div style="border: 1px solid black; padding: 2px; min-height: 20px;">12/31/2022</div>																														
10. Transactions <i>(Use lines a-c for single or multiple grant reporting)</i> Federal Cash (To report multiple grants, also use FFR attachment): <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">a. Cash Receipts</td> <td style="width:30%; text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>b. Cash Disbursements</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>c. Cash on Hand (line a minus b)</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> </table> <i>(Use lines d-o for single grant reporting)</i> Federal Expenditures and Unobligated Balance: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">d. Total Federal funds authorized</td> <td style="width:30%; text-align: right; border: 1px solid black;">2,620,940.00</td> </tr> <tr> <td>e. Federal share of expenditures</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>f. Federal share of unliquidated obligations</td> <td style="text-align: right; border: 1px solid black;">198,400.00</td> </tr> <tr> <td>g. Total Federal share (sum of lines e and f)</td> <td style="text-align: right; border: 1px solid black;">198,400.00</td> </tr> <tr> <td>h. Unobligated balance of Federal Funds (line d minus g)</td> <td style="text-align: right; border: 1px solid black;">2,422,540.00</td> </tr> </table> Recipient Share: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">i. Total recipient share required</td> <td style="width:30%; text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>j. Recipient share of expenditures</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>k. Remaining recipient share to be provided (line i minus j)</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> </table> Program Income: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">l. Total Federal program income earned</td> <td style="width:30%; text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>m. Program Income expended in accordance with the deduction alternative</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>n. Program Income expended in accordance with the addition alternative</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> <tr> <td>o. Unexpended program income (line l minus line m and line n)</td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> </table>			a. Cash Receipts	0.00	b. Cash Disbursements	0.00	c. Cash on Hand (line a minus b)	0.00	d. Total Federal funds authorized	2,620,940.00	e. Federal share of expenditures	0.00	f. Federal share of unliquidated obligations	198,400.00	g. Total Federal share (sum of lines e and f)	198,400.00	h. Unobligated balance of Federal Funds (line d minus g)	2,422,540.00	i. Total recipient share required	0.00	j. Recipient share of expenditures	0.00	k. Remaining recipient share to be provided (line i minus j)	0.00	l. Total Federal program income earned	0.00	m. Program Income expended in accordance with the deduction alternative	0.00	n. Program Income expended in accordance with the addition alternative	0.00	o. Unexpended program income (line l minus line m and line n)	0.00	Cumulative
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11. Indirect Expense

a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Totals:				<input type="text"/>	<input type="text"/>	<input type="text"/>

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
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13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

a. Name and Title of Authorized Certifying Official

Prefix: First Name: Middle Name:
Last Name: Suffix:
Title:

b. Signature of Authorized Certifying Official



c. Telephone (Area code, number and extension)

d. Email Address

e. Date Report Submitted

14. Agency use only:

Standard Form 425

APPROVED

By Yongming Qiu at 1:11 pm, Jan 31, 2023

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY COLLEGE
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	12/31/2022

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474413	\$2,620,940.00		\$2,620,940.00
Totals:				\$2,620,940.00		

Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

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4a. UEI <div style="border: 1px solid black; padding: 2px; min-height: 20px;">N123YUVWUJK1</div>	4b. EIN <div style="border: 1px solid black; padding: 2px; min-height: 20px;">131967321</div>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div>	
6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	8. Project/Grant Period From: <div style="border: 1px solid black; padding: 2px; width: 30%;">08/01/2022</div> To: <div style="border: 1px solid black; padding: 2px; width: 30%;">07/31/2024</div>	9. Reporting Period End Date <div style="border: 1px solid black; padding: 2px; width: 80%;">09/30/2022</div>
10. Transactions <i>(Use lines a-c for single or multiple grant reporting)</i> Federal Cash (To report multiple grants, also use FFR attachment): a. Cash Receipts <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> b. Cash Disbursements <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> c. Cash on Hand (line a minus b) <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> <i>(Use lines d-o for single grant reporting)</i> Federal Expenditures and Unobligated Balance: d. Total Federal funds authorized <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">2,620,940.00</div> e. Federal share of expenditures <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> f. Federal share of unliquidated obligations <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> g. Total Federal share (sum of lines e and f) <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> h. Unobligated balance of Federal Funds (line d minus g) <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">2,620,940.00</div> Recipient Share: i. Total recipient share required <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> j. Recipient share of expenditures <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> k. Remaining recipient share to be provided (line i minus j) <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> Program Income: l. Total Federal program income earned <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> m. Program Income expended in accordance with the deduction alternative <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> n. Program Income expended in accordance with the addition alternative <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div> o. Unexpended program income (line l minus line m and line n) <div style="float: right; border: 1px solid black; padding: 2px; width: 100px; text-align: right;">0.00</div>			Cumulative

11. Indirect Expense						
a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 40px;"></div>	<div style="border: 1px solid black; height: 20px; width: 80px;"></div>	<div style="border: 1px solid black; height: 20px; width: 80px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 40px;"></div>	<div style="border: 1px solid black; height: 20px; width: 80px;"></div>	<div style="border: 1px solid black; height: 20px; width: 80px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>
g. Totals:				<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>	<div style="border: 1px solid black; height: 20px; width: 130px;"></div>
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="display: flex; justify-content: flex-end; gap: 5px;"> <div style="border: 1px solid black; padding: 2px 5px;">Add Attachment</div> <div style="border: 1px solid black; padding: 2px 5px;">Delete Attachment</div> <div style="border: 1px solid black; padding: 2px 5px;">View Attachment</div> </div>						
13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).						
a. Name and Title of Authorized Certifying Official Prefix: <div style="border: 1px solid black; width: 100px; height: 20px;"></div> First Name: <div style="border: 1px solid black; padding: 0 20px;">NARDA</div> Middle Name: <div style="border: 1px solid black; width: 180px; height: 20px;"></div> Last Name: <div style="border: 1px solid black; padding: 0 20px;">ROMERO</div> Suffix: <div style="border: 1px solid black; width: 100px; height: 20px;"></div> Title: <div style="border: 1px solid black; padding: 0 20px;">ASSISTANT TREASURER/CONTROLLER</div>						
b. Signature of Authorized Certifying Official <div style="border: 1px solid black; height: 40px; width: 100%; position: relative;"> Narda O. Romero </div>				c. Telephone (Area code, number and extension) <div style="border: 1px solid black; padding: 2px 10px;">914 674-7841</div>		
d. Email Address <div style="border: 1px solid black; padding: 2px 10px;">nromero@mercy.edu</div>				e. Date Report Submitted <div style="border: 1px solid black; padding: 2px 10px;">12/05/2022</div>		14. Agency use only:

Standard Form 425

REVIEWED

By Zelandonaii Thompson at 12:42 pm, Apr 27, 2023

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY COLLEGE
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	9/30/2022

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
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Totals:				\$2,620,940.00		

Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014
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10. Transactions <i>(Use lines a-c for single or multiple grant reporting)</i> Federal Cash (To report multiple grants, also use FFR attachment): a. Cash Receipts <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> b. Cash Disbursements <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> c. Cash on Hand (line a minus b) <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> <i>(Use lines d-o for single grant reporting)</i> Federal Expenditures and Unobligated Balance: d. Total Federal funds authorized <div style="float: right; border: 1px solid black; padding: 2px 20px;">2,620,940.00</div> e. Federal share of expenditures <div style="float: right; border: 1px solid black; padding: 2px 20px;">229,918.00</div> f. Federal share of unliquidated obligations <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> g. Total Federal share (sum of lines e and f) <div style="float: right; border: 1px solid black; padding: 2px 20px;">229,918.00</div> h. Unobligated balance of Federal Funds (line d minus g) <div style="float: right; border: 1px solid black; padding: 2px 20px;">2,391,022.00</div> Recipient Share: i. Total recipient share required <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> j. Recipient share of expenditures <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> k. Remaining recipient share to be provided (line i minus j) <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> Program Income: l. Total Federal program income earned <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> m. Program Income expended in accordance with the deduction alternative <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> n. Program Income expended in accordance with the addition alternative <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div> o. Unexpended program income (line l minus line m and line n) <div style="float: right; border: 1px solid black; padding: 2px 20px;">0.00</div>			Cumulative

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<div style="border: 1px solid black; height: 25px; width: 100%;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 130px; height: 20px;"></div>	<div style="border: 1px solid black; width: 130px; height: 20px;"></div>	<div style="border: 1px solid black; width: 130px; height: 20px;"></div>
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g. Totals:				<div style="border: 1px solid black; width: 130px; height: 20px;"></div>	<div style="border: 1px solid black; width: 130px; height: 20px;"></div>	<div style="border: 1px solid black; width: 130px; height: 20px;"></div>
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a. Name and Title of Authorized Certifying Official Prefix: <div style="border: 1px solid black; width: 100px; height: 20px;"></div> First Name: <div style="border: 1px solid black; padding: 0 20px;">BRETT</div> Middle Name: <div style="border: 1px solid black; padding: 0 20px;">M.</div> Last Name: <div style="border: 1px solid black; padding: 0 20px;">CARROLL</div> Suffix: <div style="border: 1px solid black; width: 100px; height: 20px;"></div> Title: <div style="border: 1px solid black; padding: 0 20px;">VICE PRESIDENT for FINANCE and CFO</div>						
b. Signature of Authorized Certifying Official <div style="border: 1px solid black; height: 40px; width: 100%; position: relative;"> </div>				c. Telephone (Area code, number and extension) <div style="border: 1px solid black; padding: 0 20px;">914 674-7213</div>		
d. Email Address <div style="border: 1px solid black; padding: 0 20px;">bcarroll@mercy.edu</div>				e. Date Report Submitted <div style="border: 1px solid black; padding: 0 20px;">04/26/2023</div>		14. Agency use only:

Standard Form 425

REVIEWED

By Zelandonaii Thompson at 1:49 pm, Jun 30, 2023

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY COLLEGE
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	3/31/2023

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474413	\$2,620,940.00		\$2,620,940.00
Totals:				\$2,620,940.00		

Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted <div style="border: 1px solid black; padding: 2px; min-height: 20px;">US DEPT OF COMMERCE</div>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;">36-09-C13090</div>	
3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: <div style="border: 1px solid black; padding: 2px; width: 80%;">MERCY COLLEGE</div> Street1: <div style="border: 1px solid black; padding: 2px; width: 80%;">555 BROADWAY</div> Street2: <div style="border: 1px solid black; padding: 2px; width: 80%;"></div> City: <div style="border: 1px solid black; padding: 2px; width: 30%;">DOBBS FERRY</div> County: <div style="border: 1px solid black; padding: 2px; width: 30%;">WESTCHESTER</div> State: <div style="border: 1px solid black; padding: 2px; width: 30%;">NY: New York</div> Province: <div style="border: 1px solid black; padding: 2px; width: 30%;"></div> Country: <div style="border: 1px solid black; padding: 2px; width: 30%;">USA: UNITED STATES</div> ZIP / Postal Code: <div style="border: 1px solid black; padding: 2px; width: 30%;">10522-1134</div>			
4a. UEI <div style="border: 1px solid black; padding: 2px; min-height: 20px;">N123YUVWUJK1</div>	4b. EIN <div style="border: 1px solid black; padding: 2px; min-height: 20px;">131967321</div>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div>	
6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	8. Project/Grant Period From: <div style="border: 1px solid black; padding: 2px; width: 30%;">08/01/2022</div> To: <div style="border: 1px solid black; padding: 2px; width: 30%;">07/31/2024</div>	9. Reporting Period End Date <div style="border: 1px solid black; padding: 2px; width: 80%;">06/30/2023</div>
10. Transactions <i>(Use lines a-c for single or multiple grant reporting)</i> Federal Cash (To report multiple grants, also use FFR attachment): a. Cash Receipts <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> b. Cash Disbursements <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> c. Cash on Hand (line a minus b) <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> <i>(Use lines d-o for single grant reporting)</i> Federal Expenditures and Unobligated Balance: d. Total Federal funds authorized <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">2,620,940.00</div> e. Federal share of expenditures <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">574,952.97</div> f. Federal share of unliquidated obligations <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> g. Total Federal share (sum of lines e and f) <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">574,952.97</div> h. Unobligated balance of Federal Funds (line d minus g) <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">2,045,987.03</div> Recipient Share: i. Total recipient share required <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> j. Recipient share of expenditures <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> k. Remaining recipient share to be provided (line i minus j) <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> Program Income: l. Total Federal program income earned <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> m. Program Income expended in accordance with the deduction alternative <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> n. Program Income expended in accordance with the addition alternative <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div> o. Unexpended program income (line l minus line m and line n) <div style="float: right; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">0.00</div>			Cumulative

11. Indirect Expense

a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Totals:				<input type="text"/>	<input type="text"/>	<input type="text"/>

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
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13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

a. Name and Title of Authorized Certifying Official

Prefix: First Name: Middle Name:
Last Name: Suffix:
Title:

b. Signature of Authorized Certifying Official



c. Telephone (Area code, number and extension)

d. Email Address

e. Date Report Submitted

14. Agency use only:

Standard Form 425

REVIEWED

By Zelandonaii Thompson at 9:26 am, Jul 27, 2023

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY COLLEGE
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	7/27/2023

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474413	\$2,620,940.00		\$2,620,940.00
07/07/2023	PAYMENT	VINV	1897385		-\$558,432.05	\$2,062,507.95
Totals:				\$2,620,940.00	-\$558,432.05	

Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted <div style="border: 1px solid black; padding: 2px; min-height: 20px;">US DEPT OF COMMERCE</div>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;">36-09-C13090</div>	
3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: <div style="border: 1px solid black; padding: 2px; width: 90%;">MERCY UNIVERSITY</div> Street1: <div style="border: 1px solid black; padding: 2px; width: 90%;">555 BROADWAY</div> Street2: <div style="border: 1px solid black; padding: 2px; width: 90%;"></div> City: <div style="border: 1px solid black; padding: 2px; width: 30%;">DOBBS FERRY</div> County: <div style="border: 1px solid black; padding: 2px; width: 30%;">WESTCHESTER</div> State: <div style="border: 1px solid black; padding: 2px; width: 40%;">NY: NEW YORK</div> Province: <div style="border: 1px solid black; padding: 2px; width: 40%;"></div> Country: <div style="border: 1px solid black; padding: 2px; width: 40%;">USA: UNITED STATES</div> ZIP / Postal Code: <div style="border: 1px solid black; padding: 2px; width: 40%;">10522-1134</div>			
4a. UEI <div style="border: 1px solid black; padding: 2px; min-height: 20px;">N123YUVWUJK1</div>	4b. EIN <div style="border: 1px solid black; padding: 2px; min-height: 20px;">131967321</div>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div>	
6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	8. Project/Grant Period From: <div style="border: 1px solid black; padding: 2px; width: 40%;">08/01/2022</div> To: <div style="border: 1px solid black; padding: 2px; width: 40%;">07/31/2024</div>	9. Reporting Period End Date <div style="border: 1px solid black; padding: 2px; width: 100%;">09/30/2023</div>
10. Transactions <i>(Use lines a-c for single or multiple grant reporting)</i> Federal Cash (To report multiple grants, also use FFR attachment):			Cumulative
a. Cash Receipts			558,432.05
b. Cash Disbursements			558,432.05
c. Cash on Hand (line a minus b)			0.00
<i>(Use lines d-o for single grant reporting)</i> Federal Expenditures and Unobligated Balance:			
d. Total Federal funds authorized			2,620,940.00
e. Federal share of expenditures			801,632.17
f. Federal share of unliquidated obligations			0.00
g. Total Federal share (sum of lines e and f)			801,632.17
h. Unobligated balance of Federal Funds (line d minus g)			1,819,307.83
Recipient Share:			
i. Total recipient share required			0.00
j. Recipient share of expenditures			0.00
k. Remaining recipient share to be provided (line i minus j)			0.00
Program Income:			
l. Total Federal program income earned			0.00
m. Program Income expended in accordance with the deduction alternative			0.00
n. Program Income expended in accordance with the addition alternative			0.00
o. Unexpended program income (line l minus line m and line n)			0.00

11. Indirect Expense

a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
g. Totals:						

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

	Add Attachment	Delete Attachment	View Attachment
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13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

a. Name and Title of Authorized Certifying Official

Prefix: First Name: Middle Name:
Last Name: Suffix:
Title:

b. Signature of Authorized Certifying Official



c. Telephone (Area code, number and extension)

d. Email Address

e. Date Report Submitted

14. Agency use only:

Standard Form 425

REVIEWED

By Zelandonaii Thompson at 12:36 pm, Oct 27, 2023

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY COLLEGE
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	9/30/2023

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474413	\$2,620,940.00		\$2,620,940.00
07/07/2023	PAYMENT	VINV	1897385		-\$558,432.05	\$2,062,507.95
Totals:				\$2,620,940.00	-\$558,432.05	

Federal Financial Report
(Follow form Instructions)

OMB Number: 4040-0014
Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted <div style="border: 1px solid black; padding: 2px; min-height: 20px;">US DEPT OF COMMERCE</div>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;">36-09-C13090</div>			
3. Recipient Organization (Name and complete address including Zip code)					
Recipient Organization Name: <div style="border: 1px solid black; padding: 2px;">MERCY UNIVERSITY</div>					
Street1: <div style="border: 1px solid black; padding: 2px;">555 BROADWAY</div>					
Street2: <div style="border: 1px solid black; padding: 2px;"></div>					
City: <div style="border: 1px solid black; padding: 2px;">DOBBS FERRY</div>		County: <div style="border: 1px solid black; padding: 2px;"></div>			
State: <div style="border: 1px solid black; padding: 2px;">NY: New York</div>		Province: <div style="border: 1px solid black; padding: 2px;"></div>			
Country: <div style="border: 1px solid black; padding: 2px;">USA: UNITED STATES</div>		ZIP / Postal Code: <div style="border: 1px solid black; padding: 2px;">10522-1134</div>			
4a. UEI <div style="border: 1px solid black; padding: 2px; min-height: 20px;">N123YUVWUJK1</div>		4b. EIN <div style="border: 1px solid black; padding: 2px; min-height: 20px;">13167321</div>		5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) <div style="border: 1px solid black; padding: 2px; min-height: 20px;"></div>	
6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final		7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual		8. Project/Grant Period From: <div style="border: 1px solid black; padding: 2px;">08/01/2022</div> To: <div style="border: 1px solid black; padding: 2px;">07/31/2024</div>	
9. Reporting Period End Date <div style="border: 1px solid black; padding: 2px; min-height: 20px;">12/31/2023</div>					
10. Transactions					Cumulative
<i>(Use lines a-c for single or multiple grant reporting)</i>					
Federal Cash (To report multiple grants, also use FFR attachment):					
a. Cash Receipts					902,453.00
b. Cash Disbursements					902,453.00
c. Cash on Hand (line a minus b)					0.00
<i>(Use lines d-o for single grant reporting)</i>					
Federal Expenditures and Unobligated Balance:					
d. Total Federal funds authorized					2,620,940.00
e. Federal share of expenditures					1,006,176.37
f. Federal share of unliquidated obligations					0.00
g. Total Federal share (sum of lines e and f)					1,006,176.37
h. Unobligated balance of Federal Funds (line d minus g)					1,614,763.63
Recipient Share:					
i. Total recipient share required					0.00
j. Recipient share of expenditures					0.00
k. Remaining recipient share to be provided (line i minus j)					0.00
Program Income:					
l. Total Federal program income earned					0.00
m. Program Income expended in accordance with the deduction alternative					0.00
n. Program Income expended in accordance with the addition alternative					0.00
o. Unexpended program income (line l minus line m and line n)					0.00

11. Indirect Expense						
a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
Predetermined	64%	8/1/22	12/31/23	\$159,628.39	\$102,162.16	\$102,162.16
g. Totals:				\$159,628.39	\$102,162.16	\$102,162.16

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).


a. Name and Title of Authorized Certifying Official

Prefix: First Name: Middle Name:

Last Name: Suffix:

Title:

b. Signature of Authorized Certifying Official



c. Telephone (Area code, number and extension)

d. Email Address

e. Date Report Submitted

14. Agency use only:

Standard Form 425

REVIEWED

By Zelandonaii Thompson at 8:41 am, Mar 04, 2024

Grants Settlement Report

ALC/Region:	13060001/02	Short Name:	NTIA
Recipient ID:	3619330	Recipient Name:	MERCY UNIVERSITY
Award No:	36-09-C13090		
Settlement Date From:	7/21/2022	Through:	12/31/2023

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474413	\$2,620,940.00		\$2,620,940.00
07/07/2023	PAYMENT	VINV	1897385		-\$558,432.05	\$2,062,507.95
11/17/2023	PAYMENT	VINV	1936109		-\$46,548.15	\$2,015,959.80
11/28/2023	PAYMENT	VINV	1937378		-\$297,472.96	\$1,718,486.84
Totals:				\$2,620,940.00	-\$902,453.16	