Grant No.: MDA972-*XX*-1-00*XX*
ARPA Order No.: _____
Effective Date: Date signed by Government

Grantor: Defense Advanced Research Projects Agency (DARPA)
Contracts Management Office (CMO)
3701 North Fairfax Drive
Arlington, VA 22203-1714
(Attn: *GRANTS OFFICER*, 703/696-*XXXX*, *XXXX@darpa.mil*)

Grantee: *NAME*
ADDRESS

Grantee Identification Numbers/Codes:

DUNS: *XXXXXXXXX*
CAGE: *XXXXX*
TIN: *XXXXXXXXX*

Total Grant Amount: $_____

Accounting and Appropriation Data:

ACRN: AA $_____

[AWARD SUBJECT TO ELECTRONIC FUNDS TRANSFER (EFT) REQUIREMENT]

Authority: This Grant is issued pursuant to the authority of 10 U.S.C. § 2358.

GRANT SCHEDULE

1. Purpose: The purpose of this Grant is to fund research in support of the Defense Advanced Research Projects Agency (DARPA) *TECHNICAL OFFICE (XXO)* *CDE* Program. This effort shall be carried out generally as set forth in the Grantee's proposal "*TITLE OF PROGRAM*", dated *MONTH DATE, YEAR*, copies of which are in the possession of both parties.

2. Term: The term of this Grant commences on the effective date of award and continues through *NUMBER (XX)* months thereafter.

3. Terms and Conditions: This Grant is subject to the terms and conditions set forth in the Exhibit A, entitled "DARPA Grant General Terms and Conditions (August 2001)," published on

DARPA/CMO's website at http://www.darpa.mil/cmo and to any special terms and conditions in this Grant Schedule.

4. Grants Officer's Representative: The Grants Officer's Representative (GOR) representing the Government under this Grant is Dr. *PROGRAM MANAGER*, DARPA/*XXO*, telephone: (703) 696-*XXXX*, e-mail: *XXXX@darpa.mil*.

5. Administrative Grants Office: The Administrative Grants Office for this Grant is the Office of Naval Research, *REGION* Regional Office, *ADDRESS, TELEPHONE NUMBER*.

6. Principal Investigator: The Principal Investigator, *XXXXXXXXXXX*, shall be responsible for this effort. The Grantee agrees to notify the Grantor before changing the Principal Investigator.

7. Grant Funding: This Grant is incrementally funded in the amount of $_____. The Government's obligation to make payments to the Grantee is limited to only those funds obligated by this Grant or by modification to this Grant. Subject to availability of funds and continued satisfactory progress on the Grant as determined by the Government, the Government agrees to provide funding according to the following schedule:

Year 1: $
Year 2: $
Year 3: $

The Grantee shall notify the AGO in writing promptly whenever the total Grant amount is expected to exceed the needs of the Grantee for the project period by more than $_____ *[$5000 or 5% of the award, whichever is greater]* This notification shall not be required if an application for additional funding is submitted for a continuation award.

OR

This Grant is fully funded in the amount of $*XXXXXXXX*.

8. Cost Sharing or Matching: All contributions, including cash and third party in-kind, shall be accepted as part of the Grantee's $_____ cost sharing or matching when such contributions meet all of the criteria set forth in DoDGARS §32.23. The Grantee agrees to fund activities greater than or equal to expenditures of Government funds on an annual basis. Any overmatch of funds in one year can be carried forward to the next year.

9. Payments: Payments will be made to the Grantee on a *reimbursement/advance payment* basis and shall be made by electronic funds transfer in accordance with the following account information:

Financial Institution: _____
Financial Institution Address: _____
_____

Account Number: _____
ABA/Routing Number: _____
Grantee's Point of Contact: _____

FOR *GRANTEE*

_____
(Signature)

_____
(Name, Title) (Date)

FOR The United States of America, Defense Advanced Research Projects Agency

_____
(Signature)

XXXXXXXXXXX
Grants Officer
Contracts Management Office
(Name, Title) (Date)