GRANT OR AGREEMENT AWARD COVER SHEET

FS-1500-0100
OMB No. 0596-0217
EXP: 05/31/2027

IDENTIFICATION INFORMATION

1. Federal Award Identification Number (FAIN): 25-DG-11052012-162 *(Agreement Number)*	2. Cooperator Agreement/Instrument #:
3. New ☑ Modification ☐ Mod. Number ____ FFA Award ☑ Master ☐ Stand-Alone ☐ SPA ☐	4. Instrument (Project) Title: Eastern Sierra Communities Wildfire Defense Program
5. Authority U.S.C and Title: P.L.117-58 Infrastructure Investment & Jobs ACT	6. Assistance Listing Number and Title: 10.720 Community Wildfire Defense Grant
7. Cooperator/Recipient Information (Must match SAM.gov): Name: EASTERN SIERRA COUNCIL OF GOVERNMENTS Address: 437 Old Mammoth RD STE 230 City: Mammoth Lakes State CA Zip: 93546-2120	8. U.S. Forest Service Unit Address (where the work is being managed): Name: Pacific Southwest Region, Fire and Aviation Mgmt (FAM) Address: 1323 Club Drive City: Vallejo State CA Zip: 94592-1110
9. Cooperator Unique Entity Identifier (UEI): ZZWPNJNHUA15	10. Master Agreement Number if SPA:
11. Period of Performance: Start Date: Expiration Date: 05/31/2031	12. Master Agreement Expiration Date: (SPA expiration date cannot exceed the Master)
13. Cooperator Program Manager: Name: Kristen Pfeiler Phone: (760) 878-8444 Email: kristen.pfeiler@inyocounty.us	14. U.S. Forest Service Program Manager: Name: Barbara Geringer-Frasier Phone: (202) 577-4827 Email: barbara.geringer-frazier@usda.gov

FINANCIAL INFORMATION

15. Federal Funding to be Obligated to Cooperator: $4,649,327.00	16. Cooperator Contribution Funds: $0.00
17. Payment Method: No Funds ☐ Reimbursable ☑ Advance ☑ Advance Period 3 days	18. Cooperator Match Percentage: 00.00%
19. Program Income/Revenue: No ☑ Yes ☐	20. Cooperator Indirect Cost Rate (approved rate charged to award): De minimis ☑ NICRA ☐ Rate 15.00%

REPORTING REQUIREMENTS

21. Performance Report Frequency: Quarterly ☐ Semi-Annual ☐ Annual ☑ N/A ☐	22. Financial Report Frequency: Quarterly ☑ Semi-Annual ☐ Annual ☐ N/A ☐

ATTACHMENTS

The attachments listed below are hereby incorporated and made a part of this instrument.

23. REQUIRED FOR ALL INSTRUMENTS:	24. REQUIRED DEPENDENT ON INSTRUMENT TYPE:
☑ USDA FFA/MIA General Terms and Conditions	☐ Statement of Mutual Benefit and Interest
☑ FS FFA/MIA/R&D General Terms and Conditions	☑ Federal Financial Assistance Forms/Assurances
☑ Purpose/Scope of Work Narrative	☐ TFPA/638 Project Proposals
☑ Budget/Financial Plan	☐ Modification Purpose and/or Description
☐ Other (specify): ____	☐ Other (specify): ____

25. By signing this instrument, the signer certifies that they are vested with the authority to enter into this instrument.

Cooperator Signature:	Name and Title: Elaine Kabala, Executive Director	Date:

26. This instrument, subject to the provisions above, is executed by The U.S. Forest Service Authorized Signatory:

Signature:	U.S. Forest Service Signatory Official (SO) Name and Title: Jose Gonzales, Deputy Director, FAM	Date:

27. The authority and format of this instrument have been reviewed and approved for signature.

Signature: JACQUELINE WOODRUFF Digitally signed by JACQUELINE WOODRUFF Date: 2026.09.25 11:49:59 -04'00'	U.S. Forest Service Grants Management Specialist Name: JACQUELINE WOODRUFF	Date:

Additional Contacts (if applicable):

28. Cooperator Program Manager: Name: Phone: Email:	29. U.S. Forest Service Program Manager: Name: Susan L Brown (administrative) Phone: (208) 731-0295 Email: susan.l.brown@usda.gov
30. Cooperator Program Manager: Name: Phone: Email:	31. U.S. Forest Service Program Manager: Name: Jan Palecek Jr. (administrative) Phone: (559) 770-0582 Email: jan.palecek@usda.gov

Any additional contacts shall be included in an attachment to this instrument.

Additional Signatories (if applicable):

By signing this instrument, the signer certifies that they are vested with the authority to enter into this instrument.

32.	Cooperator Signature:	Name and Title:	Date:
33.	Cooperator Signature:	Name and Title:	Date:

This instrument, subject to the provisions above, is executed by The U.S. Forest Service Authorized Signatory:

34.	Signature:	U.S. Forest Service Signatory Official (SO) Name and Title:	Date:
35.	Signature:	U.S. Forest Service Grants Management Specialist Name:	Date:

Any additional signatories shall be included in an attachment to this instrument.

PAPERWORK REDUCTION ACT STATEMENT

According to the Paperwork Reduction Act of 1995, a Federal agency may not conduct or sponsor, and a person is not required to respond to, an information collection request unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection request is 0596-0217. Response to this information collection request is mandatory to obtain or retain benefits. The authority for this information collection request is Paperwork Reduction Act (Pub. L. No. 96-511, 94 Stat. 2812, as amended by Pub. L. 104-13) 44 U.S.C. §§ 3501–3521. The time required to complete this information collection request is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, collecting and maintaining the data needed, and completing and reviewing the information collection request. Send comments regarding this burden estimate or any other aspect of this information collection request, including suggestions for reducing the burden, to Forest Service Information Collections Officer, SM.FS.InfoCollect@usda.gov, with OMB control number 0596-0217 in the subject line.

NONDISCRIMINATION STATEMENT

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

USDA is an equal opportunity provider, employer, and lender.

FEDERAL FINANCIAL ASSISTANCE

DOMESTIC GRANT
25-DG-11052012-162

I. PURPOSE:

The purpose of this agreement is to document the cooperation between the parties, in accordance with the following statement of work, the application for Federal Financial Assistance, and financial plan, which are hereby incorporated and made a part of this award, to *describe in the attached narrative*.

This authority requires a 10% match, however match has been waived under the provision of Public Law 117-58 (Infrastructure Investment & Jobs Act) and based on assurance from the Cooperator that the work and funding will benefit an underserved community.

In consideration of the above premises, the parties agree as follows:

II. IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

A. **U.S. DEPARTMENT OF AGRICULTURE GENERAL TERMS AND CONDITIONS.** In accordance with Secretarial Memorandum 1078-021, the USDA General Terms & Conditions, Federal Awards dated December 31, 2025, and its implementing regulations, 2 CFR 400, apply to the Cooperator and any sub-awardees and/or sub-contractors under this agreement. These Departmental policies and regulatory requirements are incorporated by reference into this agreement as if fully set forth in this agreement and located at: https://www.usda.gov/about-usda/general-information/staff-offices/office-chief-financial-officer/federal-financial-assistance-policy/usda-general-terms-and-conditions?utm_medium=email&utm_source=govdelivery

B. **FOREST SERVICE GENERAL TERMS AND CONDITIONS.** The Forest Service General Terms & Conditions for Federal Financial Assistance dated February 14, 2026, and its implementing regulations, apply to the Cooperator and any sub-awardees and/or sub-contractors under this agreement. These federal policies and regulatory requirements are incorporated by reference into this agreement as if fully set forth in this agreement, located at https://www.fs.usda.gov/working-with-us/grants/terms-conditions

View Burden Statement

OMB Number: 4040-0004
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

* 1. Type of Submission:
- [ ] Preapplication
- [x] Application
- [ ] Changed/Corrected Application

* 2. Type of Application:
- [x] New
- [ ] Continuation
- [ ] Revision

* If Revision, select appropriate letter(s):

* Other (Specify):

* 3. Date Received: 09/23/2025

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name: Eastern Sierra Council of Governments

* b. Employer/Taxpayer Identification Number (EIN/TIN): 87-1552126

* c. UEI: ZZWPNJNHUA15

d. Address:

* Street1: 437 Old Mammoth Road, Suite #230
Street2:
* City: Mammoth Lakes
County/Parish:
* State: California
Province:
* Country: USA: UNITED STATES
* Zip / Postal Code: 93546

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:
* First Name: Kristen
Middle Name:
* Last Name: Pfeiler
Suffix:

Title: Regional Wildfire Coordinator

Organizational Affiliation: Eastern Sierra Council of Governments

* Telephone Number: 7608788444
Fax Number:

* Email: kristen.pfeiler@inyocounty.us

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

E: Regional Organization

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

USDA Forest Service

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

*** 12. Funding Opportunity Number:**

USDA-FS-2024-CWDG-CWSF

* Title:

Community Wildfire Defense Grant 2024 (FY25) West

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Inyo County, Mono County

Add Attachment | Delete Attachment | View Attachment

*** 15. Descriptive Title of Applicant's Project:**

Eastern Sierra Communities Wildfire Defense Program

Attach supporting documents as specified in agency instructions.

Add Attachments | Delete Attachments | View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant: 3

* b. Program/Project: 3

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment | Delete Attachment | View Attachment

17. Proposed Project:

* a. Start Date: 10/1/26

* b. End Date: 10/1/31

18. Estimated Funding ($):

* a. Federal	4649327
* b. Applicant	0
* c. State	0
* d. Local	0
* e. Other	0
* f. Program Income	0
* g. TOTAL	4649327

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☐ a. This application was made available to the State under the Executive Order 12372 Process for review on .
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ■ c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

☐ Yes ■ No

If "Yes", provide explanation and attach

Add Attachment | Delete Attachment | View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

☑ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:	
* First Name:	Elaine
Middle Name:	
* Last Name:	Kabala
Suffix:	
* Title:	Executive Director
* Telephone Number:	7608788800
Fax Number:	
* Email:	kristen.pfeiler@inyocounty.us

* Signature of Authorized Representative: Elaine Kabala Digitally signed by Elaine Kabala Date: 2026.01.06 11:00:51 -08'00'

* Date Signed:

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 06/30/2028

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Assistance Listing Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Community Wildfire Defense Grant	10.720	$ 4,649,327.00	$	$	$	$ 4,649,327.00
2.						
3.						
4.						
5. Totals		$ 4,649,327.00	$	$	$	$ 4,649,327.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total
	(1) Community Wildfire Defense Grant	(2)	(3)	(4)	(5)
a. Personnel	$ 858,958.00	$	$	$	$ 858,958.00
b. Fringe Benefits	300,635.00				300,635.00
c. Travel	10,000.00				10,000.00
d. Equipment	374,500.00				374,500.00
e. Supplies	44,400.00				44,400.00
f. Contractual	1,223,129.00				1,223,129.00
g. Construction					
h. Other	1,425,636.00				1,425,636.00
i. Total Direct Charges (sum of 6a-6h)	4,237,258.00				$ 4,237,258.00
j. Indirect Charges	412,069.00				$ 412,069.00
k. TOTALS (sum of 6i and 6j)	$ 4,649,327.00	$	$	$	$ 4,649,327.00
7. Program Income	$	$	$	$	$

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8. Community Wildfire Defense Grant	$	$	$	$
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)	$	$	$	$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$ 1,117,227.00	$ 361,202.00	$ 220,107.00	$ 279,209.00	$ 256,709.00
14. Non-Federal	$				
15. TOTAL (sum of lines 13 and 14)	$ 1,117,227.00	$ 361,202.00	$ 220,107.00	$ 279,209.00	$ 256,709.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b)First	(c) Second	(d) Third	(e) Fourth
16. Community Wildfire Defense Grant	$ 1,117,227.00	$ 888,434.00	$ 892,118.00	$ 904,228.00
17.				
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	$ 1,117,227.00	$ 888,434.00	$ 892,118.00	$ 904,228.00

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges: $4,237,258

22. Indirect Charges: $412,932

23. Remarks: