New NEH Award recipients are required to submit banking information to receive payments. An ACH Enrollment Form is made available within eGMS and can be accessed by clicking on the link in the left navigation panel (Figure 1) or by clicking on the Award # under "Awards" and then selecting the "Forms & Reports" tab (Figure 2).



office authorized to change the funding, scope, duration or other terms and conditions of your award, and they will do so

For more information regarding COVID-19, please visit the

website for the Center for Disease Control (CDC).

through eGMS Reach.



Awards



Funding	Instructions	Documents	Forms & Reports	Products & Mo	edia Ver	lues Chang	e Requests Mess	ages (1) Write Ups		
eporting	Requirements									
submit a rmission	report, click on t to submit the rep	he pen next to th ort.	ne report's name. If th	e pen is not visib	le, the repor	t has been rece	rived and the status h	as been updated by agenc	y staff, or you do	not have
Actions	Report Type		Special Ins	tructions Due	e Date 🔺	Extension	Submission Date	Submission Comments	Feedback	Status
	Final Financia	I		5/3	1/2024					Not Submitte
1	Final Performa	ance Progress R	Report	5/3	1/2024					Not Submitte
Iditiona	I Forms	elow.								
cked forn Actions	ns cannot be edit	ed in Reach. Requ	ired? Campaig	n/Form	Availat	pility Date	Due Date 🔻	Submission Date	Submission By	Locked
	Action 🔻		ACH Enrollment Form		7/1/2022		8/31/2022			
Select A										

Figure 2. Accessing the ACH Enrollment Form under "Forms & Reports"

There are three sections to the form and each section must be completed in order.

In the first section (Figure 3), recipients of organizational awards enter the payee's name and EIN. Recipients of individual awards enter their own name and SSN or Taxpayer ID Number.

Figure 3. The ACH Enrollment Form: Section 1 – Payee/Company Information

Complete any forms listed below.

ACH Enrollment Form	ı				
OMB No. 1510-0056					
			PI	RIVACY A	CT STATEMENT
The following information is pro 210. This information will be use delay or prevent the receipt of p	vided to comply with the Privacy Act ed by the Treasury Department to tra ayments through the Automated Cle	t of 19 nsmit aring F	74 (P.L. 93 payment o House Pay	-579). All data, by el ment Sys	information collected on this lectronic means to vendor's fi tem.
The estimated average burden a accuracy of this burden estimat Branch, Room B-101, 3700 East	essociated with this collection of info e and suggestions for reducing this West Highway, Hyattsville, MD 2078	ormatio burden 2 and 1	on is 15 m should be the Office	inutes pe e directed of Manag	r respondent or recordkeeper, I to the Financial Managemen gement and Budget, Paperwor
Payee/Company Information	Financial Institution Information	Sigr	n and Sub	mit	
Payee Name					
Please enter the name of the pay	ee/company				
Sample Research Insitution					
SSN or EIN					
Required 123-45-6789					
			Close	Save	Save and Continue

In the second section (Figure 4), enter the financial institution information. The bank routing and account numbers are hidden except while editing and require double-key entry for confirmation.

For awards to individuals, you must use your personal bank account (i.e., not an institutional account). Leave the field "SAM EFT Indicator" blank.

Figure 4. The ACH Enrollment Form: Section 2 – Financial Institution Information

Payee/Company Information	Financial Institution	Information	Sign an	id Submit		
Name of Financial Institution						
Required						
Bank of America						
Nine-Digit Bank Routing Transit N	lumber					
Required						
******	Reenter to confirm	*******				
Depositor Account Title						
Required						
Sample Research Institute						
Depositor Account Number						
Required						
12345678901234567	Reenter to confirm	******				
Type of Account						
Required						
Checking	•					
			Close	Previous	Save	Save and Continue

In the last section (Figure 5), recipients of organizational awards enter the name and title of the authorized official. Recipients of individual awards enter their own name and title here. Then, certify that the information provided is true and accurate.

Recipients of organizational awards are required to confirm that the information corresponds to active UEI SAM.gov registration data and that you will wait 24 hours before submitting a payment request to allow Reach to transmit this data to NEH's financial system.

Once completed, make sure to click the "Submit" button.

Figure 5. The ACH Enrollment Form: Section 3 – Sign and Submit

Payee/Company Information	Financial Institution Information	Sign and Submit	
Name of Authorized Official			
Required			
Jane Smith			
Title of Authorized Official			
Required			
Grant Administrator			
I certify that the information provi	ided on this form is accurate and tru	ie.	
Required			
Yes	•		
By submitting this information, yo	ou agree;		
The information submittedNew payment requests usin	corresponds to active UEI SAM.gov ig newly submitted information mus	registration data, and at wait 24 hours to allow t	the systems to update
Required			
Yes	•		
		Close Previo	us Save Submit
		Your form was last sa	wed on 8/4/2022 at 6:53 PM.

Within an hour of submittal, the form will be locked (Figure 6) and can no longer be edited while the data is being transmitted to NEH's financial application and verified. If the information cannot be verified, NEH staff will contact you and ask you to redo the submission.

Figure 6. The ACH Enrollment form – locked.

Funding	Instructions	Documents	Forms & Reports	Products & Media	Venues	Change Requests	Messages (1)	Write Ups
Peporting	Poquiromonte							

Reporting Requirements

To submit a report, click on the pen next to the report's name. If the pen is not visible, the report has been received and the status has been updated by agency staff, or you do not have permission to submit the report.

Actions	Report Type	Special Instructions	Due Date 🔺	Extension	Submission Date	Submission Comments	Feedback	Status
	Final Financial		5/31/2024					Not Submitted
1	Final Performance Progress Report		5/31/2024					Not Submitted

Additional Forms

Complete any forms listed below.

Locked forms cannot be edited in Reach.

Actions	Required?	Campaign/Form	Availability Date	Due Date 🔹	Submission Date	Submission By	Locked?
Select Action 🔹		ACH Enrollment Form	7/1/2022	8/31/2022	8/4/2022 6:54:49 PM	Jane Smith	V

Award recipients can also request to have a new ACH enrollment form added if banking information changes by clicking on the "Change Requests" tab (Figure 7) and submitting a change request for ACH Enrollment (Figure 8).

Figure 7. Change Requests

eGMS REACH	Home	Awards	Account	Help				
NATIONAL ENDOWMENT FOR THE HUMANITIES	Awar	d: FZ	-1234 ding Inst	56-22 ructions Documents	Forms and Re	eports Products and Media	Venues	Change Requests
The National Endowment for the Humanities understands that COVID-19 may impact your funded project as activities are postponed or cancelled. Please contact your program officer and grants management specialist through eGMS Reach so we can help you explore options such as extensions, budget revisions, and scope changes. NEH program and grants management staff will work together to provide maximum flexibility within our governing authorities. It is important to note that the NEH Office of Grant Management is the only office authorized to change the funding, scope, duration or other terms and conditions of your award, and they will do so through eGMS Reach.	Change Requests The following change requests/amendments may be requested: ACH Enrollment Extension Request Participant Change Report Due Date Extension Scope/Work Plan/Budget Revision Request Submit a New Request Submit d New Requests							
	Actions	Deguasta	Change F	Request Type	\$	Submission Date	Rec	uestor
No Change Requests.								

Figure 8. Submitting a Change Request for ACH Enrollment.

Change Requests

Submit an Amendment or Change Request

What kind of change are you requesting? (Select one)

Sel	ect	Name	Description					
S	elect	ACH Enroliment	ACH Enrollment process allows awardees to provide or update bank routing and account information required for electronic funds transfers.					
S	elect	Extension Request	Extend the award period for an award to a later date.					
S	elect	Participant Change	An award recipient notifies NEH about a change in project personnel.					
S	elect	Report Due Date Extension	Request an extension for the due date of a post-award report.					
S	elect	Scope/Work Plan/Budget Revision Request	Amend the approved scope and/or work plan.					
Spe	Special Instructions							

Request access to an ACH Enrollment Form to provide or update bank routing and account information required for the electronic transfer of funds. This is an automated process. Please do not attach documents to this request. Within two hours, you will be provided access to an ACH Enrollment form that will allow you to securely submit your bank routing and account information to the NEH.

Our banking information has changed and we need to update our ACH enrollment form.

Upload documentation for your request.

Accepted file formats: PDF (,pdf), Microsoft Word (.doc/.docx), Microsoft Excel (,xls/,xlsx), Images (,jpg, ,gif, ,png, ,bmp, .tif).

Maximum file size: 100 MB.

Cancel Submit