

# RFSI SEMI-ANNUAL PROGRESS REPORT

## GENERAL

### SEMI-ANNUAL PROGRESS REPORT PURPOSE

The purposes of a Semi-Annual Progress Report include:

- Communicating the progress made toward the completion of RFSI projects to DATCP, and identifying areas DATCP can support grant recipients.
- Evaluating and reflecting on past and future project successes, challenges, expenditures, and impact.
- Preparing information for the Final Performance Report.
- Sharing qualitative and quantitative data on the Wisconsin RFSI program to be reported to USDA-AMS.

*If a project is completed at the time of Semi-Annual Progress Report submission, the report should be submitted via Final Performance Report template.*

### RFSI PROGRAM PURPOSE

The purpose of the RFSI Program is to expand capacity and infrastructure for the aggregation, processing, manufacturing, storing, transporting, wholesaling, and distribution of locally and regionally produced food products, including specialty crops, dairy, grains for human consumption, aquaculture, and other food products.

Grants must expand middle of the food supply chain capacity for locally and regionally produced foods and offer more and better market opportunities to small and mid-sized agricultural producers, including those who may not have access to value-added opportunities or processing to meet market demand for premium or value-added products.

### GRANT RECIPIENT

**Recipient Organization Name:**

**Project Title:**

**Contract Number:**

**Project Site Address:**

**Recipient's Point of Contact Name:**

**Email:**

**Phone:**

**Select Grant Type:** Infrastructure Grant ☐

Equipment-Only Grant ☐

### REPORT INFORMATION

**Reporting Period/Period of Performance:**

**Date Report is Submitted:**

Your signed contract with DATCP, containing your accepted project proposal, represents your RFSI project plan. Please complete the following report by making as specific references to your plan as possible. Contact [datcprfsi@wisconsin.gov](mailto:datcprfsi@wisconsin.gov) with any questions.

## PERFORMANCE NARRATIVE

### ACTIVITIES PERFORMED

#### ACCOMPLISHMENTS

##### **Estimate the Total Percentage of Work Completed on the Project:**

*Provide a brief overview of activities, accomplishments, challenges, and progress conducted for this period of performance (250 words or less). This summary will be shared with USDA-AMS.*

*List your accomplishments or activities for this period of performance. (Infrastructure Grant recipients will indicate how these accomplishments assist in the fulfillment of project objective(s), identifying specific objective(s) from Accepted Project Proposal.)*

| #   | Accomplishment/Activity   |
|-----|---|
| Ex. | Refrigerated delivery vehicle has been purchased – operationalizing our goal of optimizing distribution routes by aggregating product from 6 local producers and making deliveries to X, Y and Z markets. |
| 1   |   |
| 2   |   |
| 3   |   |
| 4   |   |

#### DEVIATIONS FROM WORK PLAN

*Provide any challenges to the completion of your project, deviations from your work plan, or any positive developments outside of the project's original intent that you experienced during this reporting period. If those challenges or developments resulted or will result in corrective actions and/or changes to the project, include those in the space below.*

| #   | Challenge or Development   | Corrective Action or Project Change  |
|-----|--|--|
| Ex. | Significant lead times to purchase and install the juicing line delayed our anticipated acquisition of this equipment by approx. 5 months. | We explored other suppliers of this equipment, but the availability issue was universal. We pivoted to complete the loading dock construction a little bit ahead of schedule while we waited for the equipment to become available. Employee training on the new equipment has also been consequently delayed. |
| 1   |  |  |
| 2   |  |  |
| 3   |  |  |
| 4   |  |  |

## OUTCOME AND INDICATOR RESULTS TO DATE

Please provide the expected (as listed in your final proposal and contract) and actual cumulative totals for the following indicators. (Equipment-Only Grant recipients will leave all irrelevant indicators blank.)

### Outcome 2: Capacity in the Middle of the Supply Chain for Local/Regional Food Products

| Indicator | Description  | Expected Numbers | Actual Numbers |
|-----------|--|------------------|----------------|
| 2.1       | Number of new facilities constructed:  |                  |                |
| 2.2       | Number of existing facilities improved or expanded:  |                  |                |
| 2.3       | Number of processing, packaging, labeling equipment units purchased and installed:                               |                  |                |
| 2.4       | Number of processing, packaging, labeling equipment units modernized through upgrades, repairs, or retooling:    |                  |                |
| 2.5       | Number of aggregation, storage, distribution equipment units purchased and installed:                            |                  |                |
| 2.6       | Number of aggregation, storage, distribution equipment units modernized through upgrades, repairs, or retooling: |                  |                |
| 2.7       | Number of new or existing employees trained on new equipment and processes:                                      |                  |                |
| 2.8       | Number of new or existing employees that received food safety training:  |                  |                |
| 2.9       | Number of new or existing employees that received worker safety training:  |                  |                |
| 2.1       | Number of new or improved wastewater management systems:   |                  |                |
| 2.11      | Number of new or improved information technology (IT) systems:   |                  |                |

### Outcome 3: Increase economic Viability of Local/Regional Producers and Processors

| Indicator | Description   | Expected Numbers | Actual Numbers |
|-----------|---|------------------|----------------|
| 3.1       | Number of new jobs created:   |                  |                |
| 3.2       | Number of local/regional agricultural producers (e.g., farmers, ranchers; not processors) who benefited from the new or improved processing/aggregation/storage or distribution capacity: |                  |                |
| 3.3       | Number of new local/regional products* processed, aggregated, stored or distributed:  |                  |                |
| 3.4       | Number of new value-added products developed:   |                  |                |
| 3.5       | Number of new market-outlets established (e.g., restaurant, school district, grocery store chain):  |                  |                |

\*A new product would include any item not previously offered by the grant recipient. For example, lettuce that was previously sold wholesale by the box is now packaged and sold individually in clamshells (1 new product) and in a salad mix (1 new product).

## DISCUSSION OF ACTIVITIES PERFORMED/OUTCOMES REPORTED

Provide any additional information that has not already been covered in the Accomplishments and Deviations sections. Specifically, use the box below to elaborate on the "Actual Numbers" reported for Outcome 3 in the table.

## EXPENDITURES TO DATE

Columns 1 and 3 are to be completed according to the most recently approved version of your RFSI contract. (Equipment-Only Grant recipients will complete only the Equipment Funds boxes in the following table.)

| Cost Category         | Total Reimbursable Funds Approved in Budget | Actual Reimbursed Funds To-Date | Total Approved Matching Funds | Actual Matched Funds To-Date |
|-----------------------|---|---------------------------------|-------------------------------|------------------------------|
| Personnel             |   |                                 |                               |                              |
| Fringe Benefits       |   |                                 |                               |                              |
| Travel                |   |                                 |                               |                              |
| Equipment             |   |                                 |                               |                              |
| Supplies              |   |                                 |                               |                              |
| Contractual           |   |                                 |                               |                              |
| Construction          |   |                                 |                               |                              |
| Other                 |   |                                 |                               |                              |
| Direct Costs Subtotal |   |                                 |                               |                              |
| Indirect Costs        |   |                                 |                               |                              |
| Total Federal Costs   |   |                                 |                               |                              |

## UPCOMING ACTIVITIES

Describe activities you plan to complete during the next period of performance (over the next 6 months).

| #          | Activity  | Anticipated Completion Month |
|------------|---|------------------------------|
| <b>Ex.</b> | <i>Hire ABC Consulting to provide food safety and forklift training for new and existing employees over the course of three sessions.</i> | <i>May 2025</i>              |
| <b>1</b>   |   |                              |
| <b>2</b>   |   |                              |
| <b>3</b>   |   |                              |
| <b>4</b>   |   |                              |
| <b>5</b>   |   |                              |

## DISCUSSION OF EXPENDITURES

Include a statement explaining how the remaining grant funds will be expended and project activities completed by the end date of the grant agreement. Please note if any budget amendments have been made or are currently under review.

## OPTIONAL FEEDBACK

What can DATCP do to assist you at this time? What types of resources/workshops/publications/etc. would be helpful in accomplishing your goals? Use this space to let us know how our team can best support you, and/or provide feedback on the RFSI program.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-NEW. The time required to complete this information collection is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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