

UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency
Washington, DC 20250

**Reimbursement Transportation Cost Payment
Program for Geographically Disadvantaged
Farmers and Ranchers
2-SP**

Amendment 5

Approved: Deputy Administrator, Farm Programs



Amendment Transmittal

A Reasons for Amendment

Subparagraph 2:

- A has been amended to include the following:
 - authority to administer the program according to the Agriculture Act of 2014
 - source of authority for FY 2014 funding
- B has been amended to provide that the program is authorized on an FY basis, subject to the availability of appropriated funds.

Subparagraph 12 A has been amended to include:

- applicable AGI forms for the applicable calendar years
- CCC-941 applicable to FY 2014 certifications.

Subparagraph 21:

- A has been amended to include the appropriated funding for FY 2014 RTCP payments
- B has been amended to update FY in the example
- F has been amended to provide accounting codes for FY 2014.

Subparagraph 32:

- A has been amended to include the period for accepting FSA-218's for FY 2014 RTCP-V
- C has been amended to update the deadline for changes to FSA-218.

Amendment Transmittal (Continued)

A Reasons for Amendment (Continued)

Subparagraph 35:

- B has been amended to update the deadline for submitting supporting RTCP documentation
- E has been amended to update the deadline for changing the transportation cost category on FSA-218
- G has been amended to include CCC-941 as an applicable form for AGI compliance.

Subparagraph 36 B has been amended to provide an updated example of FSA-218.

Subparagraph 41 F has been amended to provide the submission deadline for FSA-218-1 for FY 2014.

Subparagraph 42:

- C has been amended to provide an updated example of the RTCP Total - State Master Worksheet
- E has been amended to provide the date RTCP Total – State Master Worksheets must be received by the National Office.

Page Control Chart		
TC	Text	Exhibit
	1-1, 1-2 2-3, 2-4 3-1, 3-2 4-1, 4-2 4-5, 4-6 4-11 through 4-16 4-17 5-7, 5-8 5-11, 5-12	1, pages 1, 2

Part 1 Basic Program Provisions

1 Handbook Purpose, Availability, and Restrictions

A Purpose

This handbook provides general instructions for administering the RTCP Program for geographically disadvantaged farmers and ranchers.

B RTCP Program Availability

The RTCP Program is available to geographically disadvantaged farmers and ranchers in Alaska, Hawaii, and insular areas who paid to transport either of the following:

- an agricultural commodity
- an input used to produce an agricultural commodity.

C Restrictions

STC's and COC's, and representatives and employees thereof, do **not** have the authority to modify or waive any of the provisions of this handbook unless authorized by DAFP.

2 Sources of Authority and Related References

A Source of Authority

The source of authority for RTCP Program is the Food, Conservation, and Energy Act of 2008, Section 1621, (Pub. L. 110-246), as amended by the Agricultural Act of 2014, Section 1606 (PUB. L. 113-79). RTCP funding has been authorized according to the following:

- Agriculture, Rural Development, Food and Drug Administration, Section 741, and Related Agencies Appropriations Act of 2010 (Pub. L. 111-80) for FY 2010
- Department of Defense and Full-Year Continuing Appropriations Act of 2011 (Pub. L. 112-10), Section 1291 for FY 2011
- Consolidated and Further Continuing Appropriations Act of 2012 (Pub. L. 112-55), Section 724 for FY 2012
- The American Taxpayer Relief Act of 2012 (PUB. L. 112-240)
- Consolidated and Further Continuing Appropriations Act of 2012 (Pub. L. 113-6), Section 720 for FY 2013
- Consolidated Appropriations Act of 2014 (PUB. L. 113-76), Section 728 for FY 2014.

B RTCP Program Duration

The RTCP Program is authorized on a FY basis, subject to the availability of appropriated funds.

Note: No funding was appropriated for the RTCP Program for FY's 2008 and 2009; therefore, transportation costs in FY's 2008 and 2009 are **not** eligible for reimbursement.

C Federal Regulations

Regulations governing the administration of the RTCP Program are provided in 7 CFR Part 755.

11 RTCP Program Eligibility (Continued)

E Eligible Entities

An eligible producer under the RTCP Program must share in the risk of producing an agricultural commodity in substantial commercial quantities and be entitled to a share of the agricultural commodity from the agricultural operation. An eligible producer may include any of the following entities engaged in an agricultural operation:

- individual or group of individuals who are citizens of, or legal resident aliens in, the U.S.
- association, cooperative, corporation, estate, partnership, trust, or other business enterprise or other legal entity whose members are a citizen of, or legal resident alien in, the U.S.

F Eligible Agricultural Operation

An eligible agricultural operation for RTCP Program purposes is as follows:

- a parcel or parcels of land; or body of water applicable to aquaculture, whether contiguous or noncontiguous, constituting a cohesive management unit for agricultural purposes
- located in a county in which the principal dwelling is situated, or if there is no dwelling thereon, it will be regarded to be in the county in which the major portion of the land or applicable body of water is located.

12 RTCP Program Eligibility Provisions

A AGI

Producers who certify on applicable CCC-926, CCC-931, or CCC-933 that their nonfarm average AGI exceeds \$500,000 are ineligible for RTCP Program benefits. The CCC-941 is used for certification with the \$900,000 AGI limitation for FY 2014 and subsequent FY's. The relevant periods for determining nonfarm average AGI are as follows:

- calendar years 2006 through 2008 for FY 2010 on CCC-926
- calendar years 2007 through 2009 for FY 2011 on CCC-926
- calendar years 2008 through 2010 for FY 2012 on CCC-931
- calendar years 2009 through 2011 for FY 2013 on CCC-933
- calendar years 2010 through 2012 for FY 2014 on CCC-941.

Note: The applicable AGI form must be completed and submitted to the County Office before an RTCP payment for the applicable FY can be disbursed.

Note: See 4-PL for guidance.

B HELC/WC Provisions

Eligible producers must comply with HELC/WC provisions according to 7 CFR Part 12. If not already completed and on file in the FSA County Office, then producers applying for benefits must certify compliance on AD-1026 **before** RTCP's are issued. See 6-CP for guidance.

C Foreign Person Provisions

Foreign persons legally admitted in the U.S., and in an eligible agricultural operation in an eligible area, are eligible to receive RTCP Program benefits, if they meet the eligibility requirements of paragraph 11 and:

- 7 CFR Part 1400
- 1-PL, Part 3.

See 62-FI, Part 5, for tax reporting guidelines when RTCP's are made to producers that are nonresident aliens.

D AD-3030

AD-3030 is required to be completed and submitted by corporate applicants when applying for RTCP benefits. Each time a corporate applicant applies for benefits, the applicant must complete and submit an executed AD-3030.

Part 3 Computing RTCP's

21 RTCP Program Payment Provisions

A Funding

Funding has been made available to producers under the RTCP Program for reimbursement of transportation costs according to the following table.

FY	RTCP Program	Appropriated Funding
2010	RTCP-I	\$2,600,000
2011	RTCP-II	\$1,996,000 <u>1/</u>
2012	RTCP-III	\$1,996,000
*--2013	RTCP-IV	\$1,841,538 <u>2/</u>
2014	RTCP-V	\$1,996,000--*

1/ After 0.20 percent across-the-board rescission is applied.

--2/ After 0.20 (\$3,892) and 2.513 percent (\$50,159) across, the board rescission is applied and 5.1 percent (\$100,411) sequestration.--

Because the spending authority is limited to FY appropriated funding, less a reserve, if funds are not sufficient to cover all FY requests, RTCP's may be prorated by a National factor based on the amount of eligible transportation costs eligible for RTCP.

Although the RTCP Program was authorized for FY's 2008 through 2013, there was no appropriated funding for the RTCP Program for FY's 2008 and 2009. Funds were *--appropriated for FY 2010 through FY 2014 **only**.--*

B Basis of RTCP's

RTCP's will be:

- computed based on the amount of costs incurred by the producer for transportation of the agricultural commodity or inputs during a FY and multiplied by applicable percentage of COLA's for the applicable FY in the applicable area

Note: See Exhibit 6 for the applicable COLA's.

*--**Example:** Producer A incurred actual transportation costs in Hawaii for FY 2014 totaling \$15,000. The FY 2014 percentage of allowance in Maui County--* Hawaii is 25 percent. \$15,000 x 25 percent = \$3,750. Producer A would receive direct reimbursement in the amount of \$3,750.

- subject to \$8,000 per applicant per FY
- subject to assignments, offsets, and withholdings
- subject to a National factor, if applicable
- subject to sequestration, if applicable

21 RTCP Program Payment Provisions (Continued)

B Basis of RTCP's (Continued)

- issued after the date announced for submitting supporting documentation and after all FSA-218's have been filed to determine if the funds available are sufficient to pay each applicant.

C Advance RTCP's

There will be **no** advance RTCP's issued under the RTCP Program.

D Assignments and Offsets

RTCP's are subject to assignment and offset.

E Direct Deposit Requirement

DCIA requires any recipient of Federal payments who becomes eligible for that payment after July 25, 1996, to receive the payment by EFT. All producers receiving benefits under the RTCP Program must file SF-3881 or retain SF-1199A according to 1-FI, Part 7.

Note: New ACH/Direct Deposit information shall be obtained on SF-3881 only. County Offices may retain prior SF-1199A.

F Accounting Codes

The RTCP Program accounting codes are:

- 10RTCP-2773, for FY 2010 (RTCP-I)
- 11RTCP-2785, for FY 2011 (RTCP-II)
- 12RTCP-2789, for FY 2012 (RTCP-III)
- 13RTCP-2823, for FY 2013 (RTCP-IV)
- *--14RTCP-2836, for FY 2014 (RTCP-V).--*

Part 4 RTCP Application Process**31 Applying for RTCP Benefits****A Filing FSA-218's**

Eligible producers must use FSA-218 to apply for RTCP benefits. All persons who share in the risk of transportation cost losses for the applicable FY must certify to the information on FSA-218 **before** being considered complete for review by FSA. More than one FSA-218 is **not** acceptable by the same producers during the eligible signup period.

B FSA-218 Availability

FSA-218 is available electronically at either of the following:

- Public eForms web site at <http://forms.sc.egov.usda.gov/>
- FFAS Employee Forms/Publications Online Website at <http://fsaintranet.sc.egov.usda.gov/dam/ffasforms/forms.html>.

FSA-218 may also be obtained from the County Office where the agricultural operation is physically located as follows:

- in person
- by FAX
- by mail
- by telephone.

FSA-218's must be completed correctly, signed, and returned to the applicable County Office by COB, on the deadline date for the applicable FY provided in subparagraph 32 A, to be considered eligible for RTCP benefits.

Note: Multi-county producers **must** return completed FSA-218's to their administrative County Office to apply for RTCP benefits.

32 Application Period

A Period for Accepting FSA-218's

Eligible applicants may file FSA-218 for benefits anytime during the application period for the applicable FY. Completed FSA-218's must be submitted to either the County Office where the agricultural operation is located or in the producer's administrative County Office. Established application periods are as follows:

- August 3, 2010, through September 10, 2010, for FY 2010 (RTCP-I)
- July 25, 2011, through September 9, 2011, for FY 2011 (RTCP-II)
- July 23, 2012, through September 10, 2012, for FY 2012 (RTCP-III)
- July 22, 2013, through September 9, 2013, for FY 2013 (RTCP-IV)
- *--July 21, 2014, through September 8, 2014, for FY 2014 (RTCP-V).--*

For areas where FSA County Offices do **not** exist, FSA-218's may be submitted to the respective State Office.

B Late-Filed FSA-218's

Late-filed provisions will **not** apply to the RTCP Program. FSA-218's received after the deadline date will **not** be approved. This includes FAXed FSA-218's.

C Changing FSA-218's

Producers, who timely file FSA-218 on or before the application deadline provided in subparagraph A, may change or modify the information on FSA-218 on or before *--November 3 of the applicable year, if supporting documentation cannot be provided. Any--* changes to an already approved FSA-218 **must** be reviewed and approved by STC, COC, or designee.

35 RTCP Documentation**A Supporting Documentation**

To be eligible for reimbursement of actual transportation costs, the producer must provide supporting documentation that substantiates the actual costs incurred for transportation of each eligible agricultural commodity and/or input. Producers will be required to certify on FSA-218 whether he/she have actual documentation.

B Deadline to Submit Supporting Documentation

Producers who request RTCP benefits for actual transportation cost rates **must** submit *--supporting documentation to the State or County Office by COB November 3 following the applicable FY. If supporting documentation to support actual transportation costs is not received in the State or County Office on or before November 3 following the applicable FY, the State or County Office will use the approved fixed or set rate established for the applicable agricultural commodity and/or input.

Producers who request RTCP benefits using either the fixed or set transportation cost rate must also submit supporting documentation to the State and County Office by COB November 3 following the applicable FY.--*

C Compliance Checks

Since proof of eligible reimbursement costs incurred will be submitted when FSA-218 is submitted, no further compliance check will be necessary by the State or County Office.

D Documentation Exceeding \$10,000

To alleviate some potential burden on the producer and FSA State and County Offices, supporting documentation exceeding a total of \$10,000 in eligible reimbursement costs incurred per applicant will **not** be required. However, if the County Office determines at the conclusion of signup, based on the amount of applicants, that eligible reimbursable transportation costs do not meet State or County Office's expectations, those applicants must be contacted for the additional supporting documentation.

35 RTCP Documentation (Continued)

E Changing Transportation Cost Category

Producers, who originally submit FSA-218 for a fixed and/or set transportation cost category, can make changes to FSA-218 to request the actual transportation cost category, if supporting documentation to substantiate the actual costs incurred can be provided to the State or County Office by COB November 3 following the applicable FY. Any change made to the transportation cost category **must** be made in ink and initialed and dated by the producer.

F Verifiable Records

Eligible verifiable records supporting eligible actual, fixed, and set transportation costs include, but are **not** limited to:

- account statements
- bill of lading
- contractual agreements
- financial statements
- invoices
- retail sales receipts.

Verifiable records must show:

- name of producers, except on retail sales receipts
- commodity, unit (quantity), and unit of measure, or unit price
- type of inputs associated with transportation costs
- date of service/sale
- name of person or entity providing the service/sale, as applicable.

Note: Additional supporting documents may be requested from the producer, as necessary, to help STC or COC determine whether the quantity of inputs claimed is reasonable.

G Other Applicable Forms

The following forms are also required to apply for RTCP benefits:

- AD-1026, for HELC/WC compliance
- CCC-901, as applicable
- CCC-902I or CCC-902E
- *--CCC-926, CCC-931, CCC-933, or CCC-941 as applicable, for AGI compliance.--*

36 Completing FSA-218's (Continued)

B Example of FSA-218

The following is an example of FSA-218.

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This form is available electronically.

FSA-218 (07-22-14)	U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency	1. State Code	2. County Code	3. Fiscal Year	
REIMBURSEMENT TRANSPORTATION COST PAYMENT PROGRAM (RTCP) FOR GEOGRAPHICALLY DISADVANTAGED FARMERS AND RANCHERS APPLICATION		4. Application Number: <div style="background-color: black; color: white; text-align: center; padding: 2px;">FOR FSA USE ONLY</div> 5. Cost of Living Rate (COLA): _____ %			
<p>NOTE: <i>The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a – as amended). The authority for requesting the information identified on this form is 7 CFR Part 755 and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility for direct reimbursement payments to a geographically disadvantaged farmer or rancher to transport an agricultural commodity or inputs used to produce an agricultural commodity. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for direct reimbursement payments to a geographically disadvantaged farmer or rancher to transport an agricultural commodity or inputs used to produce an agricultural commodity.</i></p> <p><i>This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration).</i></p> <p><i>The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</i></p>					
6A. Producer's Name and Address (Including Zip Code)		7A. Contact Producer's Name and Address (Including Zip Code)			
6B. Phone and/or Cell No. (Include Area Code): <input type="checkbox"/> Home <input type="checkbox"/> Cell		7B. Phone and/or Cell No. (Optional) (Include Area Code): <input type="checkbox"/> Home <input type="checkbox"/> Cell			
6C. Email (Optional):		7C. Email (Optional):			
PART A – TRANSPORTATION RATES					
There will be three types of transportation rates used to determine reimbursable amounts. These are defined as: actual, fixed, and set transportation rates.					
<p>ACTUAL TRANSPORTATION RATES: are rates based on the actual costs incurred by the applicant and must be determined from verifiable records in all cases.</p> <p>FIXED TRANSPORTATION RATES: are established by State FSA Committee (STC) with Deputy Administrator for Farm Programs (DAFP) concurrence and reflects transportation rates applicable to certain agricultural commodities or inputs used to produce the agricultural commodity.</p> <p>SET TRANSPORTATION RATES: are established by STC with DAFP concurrence and reflects a percent of the total costs used to reflect the transportation cost incurred. This rate will be used only if the input does not have a fixed rate established or a breakdown of the transportation costs cannot occur.</p> <p>NOTE: <i>For those applicants who certified their costs, and either a fixed transportation rate or set transportation rate is used to determine reimbursable amounts, a compliance spot check will be developed in which those selected applicants would be required to provide verifiable proof that the transportation of the agricultural commodity and/or inputs occurred for the applicable fiscal year.</i></p>					
8. Do you have actual documentation? <input type="checkbox"/> YES <input type="checkbox"/> NO If you checked "YES", complete Part B.		9. Select the Type of Transportation Cost (You may select a combination of costs): <input type="checkbox"/> Actual Rate <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Set Rate			
PART B – ACTUAL TRANSPORTATION COSTS (Continued on Page 5)					
10. Eligible Agricultural Commodity and/or Input	11. Unit (Quantity)	12. Unit of Measure	13. Actual Cost Per Unit	FOR FSA USE ONLY	
				14. Transportation Cost (Item 11 x Item 13)	15. Reimbursable Amount (Item 14 x Item 5)
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
16. Total Actual Transportation Costs:				\$	

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36 Completing FSA-218's (Continued)

B Example of FSA-218 (Continued)

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FSA-218 (07-22-14)					Page 2 of 7	
PART C – FIXED TRANSPORTATION COSTS (Continued on Page 6)						
17. Eligible Agricultural Commodity and/or Input	18. Unit (Quantity)	19. Unit of Measure	FOR FSA USE ONLY			
			20. Approved Rate	21. Transportation Cost (Item 18 x Item 20)	22. Reimbursable Amount (Item 21 x Item 5)	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
<i>23. Total Fixed Transportation Costs:</i>					\$	
PART D – SET TRANSPORTATION COSTS (Continued on Page 7)						
24. Eligible Agricultural Commodity and/or Input	25. Unit (Quantity)	26. Unit of Measure	FOR FSA USE ONLY			
			27. Approved Rate	28. Transportation Cost (Item 25 x Item 27)	29. Reimbursable Amount (Item 28 x Item 5)	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
<i>30. Total Set Transportation Costs:</i>					\$	
PART E – TOTAL PAYMENT – FOR FSA USE ONLY						
31. Total all transportation costs from Parts B, C, and D. <i>(Sum of Items 16, 23, 30, 44, 51 and 58)</i>				\$		
32. Enter the total from Item 31, if less than \$8,000. If greater than \$8,000, enter \$8,000.				\$		
33. Factored amount, if applicable.				\$		

36 Completing FSA-218's (Continued)

B Example of FSA-218 (Continued)

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FSA-218 (07-22-14)	Page 3 of 7			
PART F – PRODUCER CERTIFICATION				
<p><i>Payments under the Reimbursement Transportation Cost Payment program will be made to provide cost assistance to geographically disadvantaged farmers and ranchers by reimbursing them for a portion of the transportation cost of their agricultural commodity, and/or transporting inputs used to produce an agricultural commodity during a fiscal year. By signing this application, the producer:</i></p> <ol style="list-style-type: none"> 1. <i>Agrees to provide FSA any documentation it requires to determine eligibility that verifies and supports all information provided, including the producer's certification, and understands the application may be disapproved if they fail to provide any such information requested by FSA;</i> 2. <i>Agrees to comply with, and acknowledges they are subject to, all the regulations governing the program and understands that instructions and assistance are available for completing this form;</i> 3. <i>Authorizes FSA to obtain from third parties, such as, but not limited to, other government agencies, individuals, auction barns, contractors, or processors, feed cooperatives, feed supply companies and rendering services, any records or other evidence that substantiates the information provided on this application or any supporting documentation provided; and</i> <p>I certify that:</p> <ol style="list-style-type: none"> 1. <i>If applying as an individual, that I am a citizen of or legal resident alien in the United States; if applying as a partnership, the members of the partnership are citizens of the United States; or if applying as a corporation, limited liability corporation, or other farm organization structure, the entity is organized under State law.</i> 2. <i>All information on this application and all supporting documents provided are true and correct;</i> 3. <i>I understand that this application may be disapproved if information or evidence provided is false or in error, and that other sanctions or penalties could apply.</i> 4. <i>I understand that if necessary, additional information may be required to determine program eligibility, to the satisfaction of the State and/or County FSA Committee.</i> 5. <i>I understand that this program is subject to the regulations found in 7 CFR Part 755, and understand that this application must be received no later than the deadline date established by FSA.</i> 6. <i>I hereby apply for payment to the extent that the State and/or County FSA Committee determines me eligible to receive payment and understand that payment of transportation cost assistance will be contingent upon the availability of funds to the U.S. Department of Agriculture to pay such claims.</i> 7. <i>I understand that payments are subject to conditions imposed by regulation and FSA, and that this is an application only.</i> 8. <i>I have already reported whether I have actual documentation.</i> <p><i>Note: Providing a false certification to the Government is punishable by imprisonment, fines, or other penalties. All information provided herein is subject to verification by FSA. The criminal and civil fraud statutes that apply to this certification, may include 18 USC 286 714m, 18USC 286, 297, 371, 641, 651, and 1001; and 31 USC. Other authorities may apply.</i></p>				
34A. Signature (By)	34B. Title/Relationship of the Individual Signing in the Representative Capacity	34C. Date Signed (MM-DD-YYYY)	34D. Share	34E. Tax ID No. (4 Digits)
				%
				%
				%
				%
				%

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36 Completing FSA-218's (Continued)

B Example of FSA-218 (Continued)

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FSA-218 (07-22-14)		Page 4 of 7	
PART G – STC OR COUNTY COMMITTEE DETERMINATION (FOR FSA USE ONLY)			
35A. STC, COC or Designee Signature	35B. Title of STC, COC or Designee	35C. Date (MM-DD-YYYY)	35D. Determination (Check one): <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved (Complete Item 35G) <input type="checkbox"/> Partially Approved (Complete Item 35G)
35E. Name and Address of County FSA Office		35F. Telephone Number (Include Area Code)	35G. Justification for Disapproval/Partial Approval
36A. Signature of Second Party Review	36B. Title of Second Party Reviewer		36C. Date Signed (MM-DD-YYYY)
37. Additional Remarks			

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41 FSA-218-1's (Continued)

F Submitting FSA-218-1

For each approved RTCP applicant, County Offices **must** submit to their applicable State Office copies of the following documents:

- FSA-218
- FSA-218-1.

State Offices shall coordinate and provide instruction to their County Offices for the safe and secure transmission of FSA-218's and FSA-218-1's to the State Office, either by FAX or encrypted electronic transmission. FSA-218's and FSA-218-1's **must** be received in the State Office according to the following table.

FY	Submission Deadline
FY 2010	COB February 18, 2011
FY 2011	COB November 30, 2011
FY 2012	COB November 30, 2012
FY 2013	COB November 29, 2013
--FY 2014	COB November 28, 2014--

G Secondary Review

All data entered into FSA-218-1 shall be reviewed and verified by a second person to ensure data accuracy. The secondary reviewer shall enter their name and the date the data was reviewed according to subparagraph D. All discrepancies discovered during the review **must** be corrected **before** transmitting FSA-218-1's to the State Office.

H Converting Set Transportation Cost Rates to Percentages

Set transportation cost rate percentages must be manually converted to a dollar value rate **before** entering the set rate in FSA-218-1. To convert the set rate to a dollar value rate, apply the FSA-approved set rate percentage to the agricultural commodity and/or input used to produce the agricultural commodity.

Example: A bag of fertilizer is \$20. The FSA-approved set rate percentage for imports/exports without a fixed rate is 15 percent. The result of multiplying the price of fertilizer times the set rate percentage is \$3 (\$20 x 15 percent = \$3). The result of \$3 is the dollar value to be entered in FSA-218-1, Part C, item 10.

42 RTCP Totals – State Master Worksheets (Continued)

C Entering RTCP FSA-218-1 Totals Into the RTCP Totals - State Master Worksheets (Continued)

The total of all transportation costs obtained from each applicant’s information entered in the RTCP Totals - State Master Worksheet is displayed in red at the top of the worksheet and will be automatically totaled as entered. These totals will assist the National Office PSD in determining if a factor will be applied. No entries should be made in the grayed-out columns for factored RTCP’s and total capped RTCP.

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RTCP Totals - State Master Worksheet										
State Code	County Code	Application Number	Producer Name	Tax ID Number	Tax ID Type	Total Transportation Costs	Factored Payment (%)	Total Capped Payment (If applicable)	Data Loader Initials	2nd Reviewer Initials
						\$ 212,750.00	\$ -	\$ 40,950.00		
15 003	001	001	ABC Dairy Operation	123-45-6789		\$ 300.00		\$ 300.00	MAC	DLC
15 007	001	001	J & J Farms	011-11-1111		\$ 25,300.00		\$ 8,000.00	MAC	DLC
15 009	001	001	Pineapple Express, Inc.	11-2345678		\$ 15,000.00		\$ 8,000.00	DLC	MAC
15 009	002	002	Papaya Unlimited	22-1234567		\$ 150.00		\$ 150.00	MAC	DLC
15 005	001	001	XYZ Dairy Partners	12-1212122		\$ 55,000.00		\$ 8,000.00	DLC	GMC
15 009	005	005	Coconut Cove LLC	13-1456784		\$ 89,000.00		\$ 8,000.00	MAC	GMC
15 009	005	005	Maple Farms	48-9568443		\$ 27,500.00		\$ 8,000.00	DLC	MAC
15 003	003	003	D & D Inc.			\$ 500.00		\$ 500.00	DLC	GMC
								\$ -		
								\$ -		

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D Secondary Review

All data entered into the RTCP Totals - State Master Worksheet shall be reviewed and verified by a second person to ensure data accuracy. The secondary reviewer shall enter their name or initials in the RTCP Totals - State Master Worksheet under the appropriate header. The State Office shall correct all discrepancies discovered during the review **before** transmitting the RTCP Totals - State Master Worksheet to the National Office PSD.

42 RTCP Totals – State Master Worksheets (Continued)

E Submitting RTCP Totals - State Master Worksheets to the National Office PSD

State Offices shall:

- transmit 1 RTCP Totals - State Master Worksheet containing data for all approved applicants in their State and responsible insular area, as applicable, to Dani Cooke, PSD, by e-mail to danielle.cooke@wdc.usda.gov
- encrypt the RTCP Totals - State Master Worksheet **before** transmitting according to subparagraph F, to ensure safe electronic transmission.

RTCP Totals - State Master Worksheets **must** be received by the National Office PSD by:

- **COB February 28, 2011**, for FY 2010 (RTCP-I)
- **COB December 9, 2011**, for FY 2011 (RTCP-II)
- **COB December 7, 2012**, for FY 2012 (RTCP-III)
- **COB December 6, 2013**, for FY 2013 (RTCP-IV)
- ***--COB December 5, 2014**, for FY 2014 (RTCP-V).--*

F Encrypting and Transmitting RTCP Totals - State Master Worksheets

The State Office shall follow these steps to encrypt the RTCP Totals - State Master Worksheet **before** transmitting to the National Office PSD.

Step	Action
1	Choose an encryption password and write it down using paper and pen. This is critical so that users can relay the password to the National Office PSD.
2	<ul style="list-style-type: none"> • CLICK “” • CLICK “Prepare” • CLICK “Encrypt Document”.
3	In Encrypt Document dialog box, enter user’s chosen password and CLICK “ OK ”.
4	In Confirm Password dialog box, in the “Reenter password” box, re-enter user’s chosen password and CLICK “ OK ”, CLICK “ Save ”, and close the file.
5	E-mail the encrypted Excel file to contact in subparagraph E.
6	Provide the encryption password in a separate e-mail to contact in subparagraph E.

43-50 Reserved

Reports, Forms, Abbreviations, and Redelegations of Authority

Reports

Reports are available through the Common Payment Reporting System.

Forms

This table lists all forms referenced in this handbook.

Number	Title	Display Reference	Reference
AD-1026	Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification		12, 35
CCC-770 Eligibility	Eligibility Checklist		33, 34
CCC-901	Member’s Information 2009 and Subsequent Years		35
CCC-902E	Farm Operating Plan for Entity 2009 and Subsequent Program Years		35
CCC-902I	Farm Operating Plan for Individual 2009 and Subsequent Program Years		35
CCC-926	Average Adjusted Gross Income (AGI) Statement		12, 35
CCC-941	Average Adjusted Gross Income (AGI) Certification and Consent to Disclosure of Tax Information - Agricultural Act of 2014		12, 35
FSA-218	Reimbursement Transportation Cost Payment Program (RTCP) For Geographically Disadvantaged Farmers and Ranchers Applications	36	3, 31-35, 41, 51
FSA-218-1	RTCP Worksheet Calculator Tool	41	42
FSA-218-2	State Committee (STC) Established Fixed and Set Transportation Cost Rate for Reimbursement Transportation Cost Payment (RTCP) Program	23	
SF-1199A	Direct Deposit Sign-Up Form		21
SF-3881	ACH Vendor/Miscellaneous Payment Enrollment Form		21

Abbreviations Not Listed in 1-CM

The following abbreviations are not listed in 1-CM.

Approved Abbreviation	Term	Reference
COLA	cost of living allowance	21, 36, 41, Ex. 6
RTCP	Reimbursement Transportation Cost Payment	Text, Ex. 6

Reports, Forms, Abbreviations, and Delegations of Authority (Continued)

Redelegations of Authority

This table lists the redelegation of authority in this handbook.

Redelegation	Reference
Except for RTCP requests in which CED has a monetary interest, COC may delegate the authority to approve or disapprove FSA-218's, and any other RTCP Program documents, to CED.	3
Except for RTCP requests in which the person approving has a monetary interest, CED may delegate the authority to approve or disapprove FSA-218's, and any other RTCP Program documents, to Federal and non-Federal County Office employees.	3