



Recipient Information

1. Recipient Name

Texas
Dept. of Family and Protective Services
P.O. Box 149030; Mail Code: E654

AUSTIN, TEXAS 78714 9030

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1742639167A1

5. Data Universal Numbering System (DUNS)

808730360

6. Recipient's Unique Entity Identifier

*See Remarks

7. Project Director or Principal Investigator

Grant Administrator

ausra.benavides@dfps.state.tx.us

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

Sona Cook
Grants Management Officer
sona.cook@acf.hhs.gov
214-767-2973

10. Program Official Contact Information

Joseph Bock
Program Authorizing Official
ACYF - Children's Bureau
Bock.Joseph@acf.hhs.gov
111-111-1111

Federal Award Information

11. Award Number

2101TXCWSS

12. Unique Federal Award Identification Number (FAIN)

2101TXCWSS

13. Statutory Authority

Tit IVB Subpart 1 Soc Sec

14. Federal Award Project Title

*See Remarks

15. Catalog of Federal Domestic Assistance (CFDA) Number

93.645

16. CFDA Program Title

Stephanie Tubbs Jones Child Welfare Services Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

Financial Information

19. Budget Period Start Date 10-01-2020

End Date 09-30-2022

20. Total Amount of Federal Funds Obligated by this Action

\$7,174,307.00

20a. Direct Cost Amount

*See Remarks

20b. Indirect Cost Amount Administrative Offset

*See Remarks

21. Authorized Carryover

*See Remarks

22. Offset

*See Remarks

23. Total Amount of Federal Funds Obligated this budget period

\$27,851,373.00

24. Total Approved Cost Sharing or Matching, where applicable

*See Remarks

25. Total Federal and Non-Federal Approved

*See Remarks

26. Project Period Start Date 10-01-2020 -

End Date 09-30-2022

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

Sona Cook

Footnotes

Grants Management Officer

This award action reflects the 4th quarter awarding for the Children's Welfare Social Services Program.



Recipient Information

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Employer Identification Number (EIN): XXXXXXXXXXXXX

Data Universal Numbering System (DUNS): 808730360

Recipient's Unique Entity Identifier: *See Remarks

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u> <u>Award to Date</u>	<u>Document Number</u>	<u>Funding Type</u>
75-21-1536	2021,G998000	\$27,851,373.00	\$7,174,307.00	\$27,851,373.00	G-2101TXCWSS	Formula

Terms and Conditions



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2101TXCWSS

FAIN# 2101TXCWSS

Federal Award Date: July 1, 2021

By acceptance of awards for this program, the grantee agrees to comply with the requirements included in both the General and Supplemental Terms and Conditions for this program.

The administration of this program is authorized under Title IV, Part B, Subpart 1, sections 421-425 and section 428 of the Social Security Act (the Act). The program is codified at 42 U.S.C. §§621-625, 628 and program-specific implementing regulations are located at 45 CFR Parts 1355 and 1357.

As applicable to insular areas identified under 45 CFR §97.11, 45 CFR Part 97 – Consolidation of Grants, applies to this program.

The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards is located under 45 CFR Part 75. In accordance with 45 CFR §75.101 Applicability, this program must comply with 45 CFR Part 75 in its entirety. No exceptions were identified.

Additional applicable regulations and requirements can be found in the General Terms and Conditions for Mandatory: Formula, Block and Entitlement Grants.

The Federal Financial Participation (FFP) rate, per section 424(a) of the Act, is 75 percent of the amount expended for this program. States only: In accordance with Section 424(f) of the Act, the FFP percentage may be reduced based on a determination that the State failed to meet performance standards for caseworker visits with children in foster care. The Children's Bureau will notify the State of any adjustment to the matching requirements.

The States and Tribes are required to contribute the remaining 25 percent of the total expended for this program. States and Tribes contribution may be in cash, donated funds, and non-public third party in-kind contributions. See 45 CFR §1357.30(e) for States and 45 CFR §1357.40(d)(5)(ii) for Tribes. States only: In accordance with section 424(d) of the Act, any amount of non-federal expenditures exceeding the amount spent under the State plan developed for this subpart in fiscal year 2005 on foster care maintenance payments will not be considered match for Title IV, Part B, Subpart 1 of the Act.

This program has an Administrative Cost requirement. According to sections 422(b)(14) and 424(e) of the Act grantees must limit administrative costs to no more than 10 percent of the Federal funds. Section 422(c)(1) of the Act defines administrative costs.

Funding (project) period and obligation period. In accordance with 45 CFR §1357.30(i) for States and 45 CFR §1357.40(d)(5)(iv) for Tribes, this program has a 2-year project/obligation period starting the first day of the Federal Fiscal Year, October 1, for which funds were awarded and ending the last day of the following Federal Fiscal Year, September 30. Any Federal funds not obligated by the end of the respective obligation period will be recouped by this Department.

Liquidation period: In accordance with 45 CFR §75.309(b), all obligated Federal funds awarded under this grant must be liquidated no later than 90 days after the end of the funding/obligation period. Any Federal funds not liquidated by December 30 will be recouped by this Department.

Financial Reporting form and submission. The expenditure reporting form used is the SF-425 Federal Financial Report.

This report is submitted annually and must be submitted no later than December 30- 90 days following the end of each Federal Fiscal year. Two SF-425 reports must be submitted for each grant award: (1) an interim report covering year one of the project period and (2) a final report (cumulative) covering the entire project period. These annual reports must be submitted electronically through the HHS Payment Management System (PMS)

In accordance with 45 CFR §§1357.15 and 1357.16, a five-year Child and Family Services Plan, or Annual Progress and Service Report and CFS-101, forms are required no later than June 30 each year. These reports must establish goals and objectives for a five-year period, provide information on accomplishments and progress made during the previous fiscal year, and provide updates on program areas selected for improvement and other activities in the next year. These annual reports must be submitted to the appropriate ACF Regional Office.

Real Property Reports (SF-429s). The SF-429 Real Property forms are not applicable to this program. Purchase, construction, and major renovation are not an allowable activity or expenditure under this grant.

Points of contact for additional information or questions concerning either the operation of the program or related financial or grant matters may be found on the Notice of Award.ound on the Notice of Award.d.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.