DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

SAI NUMBER:

PMS DOCUMENT NUMBER:

NO	HOL OI	ATTAINE		_							END NO
1. AWARDING OFFICE:				2. ASSISTANCE TYPE:			3. AWARD NO.: 90CT0157-05-03			4. AMEND. NO.	
ACYF - Children's Bureau				Discretionary Grant			90010107-00 00				
5. TIPE OF AWARD.				E OF ACTION			1	7. AWARD AUTHORITY: 42 USC 626(A)(1)(C)			
Demonstration			over request								
8. BODGET 1 E. 1.00 S.			JECT PERIOD: 10. CAT NO.: 93.648								
09/30/2014 THRU 09/29/2016 09/30/				/2010 THRU 09/29/2016 93.648 12. PROJECT / PROGRAM TITLE:							
11. RECIPIENT ORGANIZATION: Washoe County Health District PO BOX 11130 Reno, NV 89520-0027 Grantee Authorizing Official: Ken Retterath, Director Departr (Interim)				ment of Soc		Initia	itive to R	Reduce Long	Term	Foster	
13. COUNTY:		14. CONGR. DIST: 02			15. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR Jim Durand Project Director					ECTOR:	
Washoe		02									
16. APPROVED BUDGET:								MPUTATIO		00	44.440/
Personnel\$ 839,47		472.00	A. NON-FEDERAL SHARE					11.11%			
Fringe Benefits		•		B. FEDERAL SHARE\$ 3,734,754.00 00.08					88.89%		
•		¢ 0.485.00			18. FEDERAL SHARE COMPUTATION:						
Travol			A. TOTAL FEDERAL SHARE\$ 3,734,754.00								
Equipment\$		\$	0.00	B. UNOBLIGATED BALANCE FEDERAL SHARE\$ 1,068,087.00							
Supplies \$ 9,778.00			C. FED. SHARE AWARDED THIS BUDGET PERIOD\$ 2,666,667.00								
Contractual		\$ 1,987,	368.00	19. AMOL	JNT AWARDEI	D THIS	ACTION	N:	\$		0.00
Facilities/Construction		\$	0.00	20. FEDERAL \$ AWARDED THI PERIOD:			IIS PRO				.574,247.00
Other	ner\$ 302,780.00		PERIOD.				12	12,57 4,247.00			
Direct Costs		\$ 3,493,	134.00	21. AUTH	IORIZED TREA	TMEN	T OF PR	ROGRAM IN	COME	:	
Indirect Costs At % of \$		\$ 241,6	620.00	Addition	nal Costs						
In Kind Contributions\$		\$	0.00 22. APPI		ICANT EIN:		23. PAYEE EIN:		-	24. OBJECT CLASS:	
			754.00	886000138 1886000			000138A3	8A3 41.45			
Total / Ipproved = and			25. FII	NANCIAL II	NFORMATION			DUI	NS 0	737869	998
ORGN DOCUMENT N	O. A	PPROPRIA		CAN			EW AMT	UN	OBLIG	i.	NONFED %
90CT015705	_, .	75-12-1		2-G99	8011	\$	687,63	1.00			
90CT015703		75-12-1	536	2-G998011 (\$554,164.00)							
90CT015703		75-12-1	536	2-G99	8016	(\$1	33,467	7.00)			
26 PERMARKS: (Continued on senarate sheets)											

26. REMARKS: (Continued on separate sheets)

This amendment approves grantee's request dated September 13, 2015 to apply the unobligated balance from the 03 year to the 05 year and to apply the unobligated balance from 04 year to the 05 year. In the event that the actual unobligated balance is less than the estimated amount, no additional Federal funds will be made available to off-set the deficit.

27. SIGNATURE - ACF GRANTS OFFICER	DATE: 01/12/2016	28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY	
Ms. Bridget Shea Westfall			
29. SIGNATURE AND TITLE - PROGRAM OFF	DATE:		
Mr. Rafael Lopez -		01/12/2016	

SAI NUMBER:

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DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

4. AMEND. NO. 3. AWARD NO.: 2. ASSISTANCE TYPE: 1. AWARDING OFFICE: 90CT0157-05-03 Discretionary Grant ACYF - Children's Bureau 7. AWARD AUTHORITY: 6. TYPE OF ACTION: 5. TYPE OF AWARD: 42 USC 626(A)(1)(C) Carryover Request Demonstration 10. CAT NO.: 9. PROJECT PERIOD: 8. BUDGET PERIOD: 93.648 THRU 09/29/2016 09/30/2010 09/30/2014 09/29/2016 THRU

11. RECIPIENT ORGANIZATION:

Washoe County Health District

DOCUMENT NO.	APPROPRIATION	CAN NO.	NEW AMT.	UNOBLIG.	NONFED%
	75-13-1536	3-G998011	\$380,456.00		
		3-G998011	(\$380,456.00)		
	90CT015705 90CT015704	90CT015705 75-13-1536	90CT015705 75-13-1536 3-G998011	90CT015705 75-13-1536 3-G998011 \$380,456.00	90CT015705 75-13-1536 3-G998011 \$380,456.00

SAI NUMBER:

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DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

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1. AWARDING OFFICE: ACYF - Children's Bureau	2. ASSISTANCE TYPE: Discretionary Grant	3. AWARD NO.: 4. AMEND. NO. 3			
5. TYPE OF AWARD: Demonstration	6. TYPE OF ACTION: Carryover Request	7. AWARD AUTHORITY: 42 USC 626(A)(1)(C)			
8. BUDGET PERIOD: 09/30/2014 THRU 09/29/2016	9. PROJECT PERIOD: 09/30/2010 THRU 09/29/201	10. CAT NO.: 93.648			

11. RECIPIENT ORGANIZATION:

Washoe County Health District

STANDARD TERMS

Paid by DHHS Payment Management System (PMS), see attached for payment information. This
award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are
applicable to you based on your recipient type and purpose of this award.

This includes requirements in Parts I and II (available at https://www.hhs.gov/grants/grants-policies-regulations/index.html) of the HHS GPS. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS.

This award is subject to requirements or limitations in any applicable Appropriations Act.

This award is subject to the requirements of Section 106 (g) of the trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to http://www.acf.hhs.gov/grants/discretionary-competitive-grants

This award is subject to the Federal Financial Accountability and Transparency Act (FFATA or Transparency) of 2006 subaward and executive compensation reporting requirements.

For the full text of the award term, go to http://www.acf.hhs.gov/grants/discretionary-competitive-grants

This award is subject to requirement as set forth in 2 CFR 25.110 Central Contractor Registration (CCR) and DATA Universal Number System (DUNS). For full text go to https://www.acf.hhs.gov/grants/discretionary-competitive-grants

This award is subject to the requirements as set forth in 45 CFR Part 87.

This grant is subject to the requirements as set forth in 45 CFR Part 75.

Attached are terms and conditions, reporting requirements, and payment instructions.

Initial expenditure of funds by the grantee constitutes acceptance of this award. Future support is anticipated.