

State of Nevada

Department of Health and Human Services

Aging and Disability Services Division (ADSD)

Award Number:	16-000-45-EX-19			
Date:	09/28/2018			
New or Revised:	New			
Funding FY:	2018/2019			
Award Type:	Categorical			

NOTICE OF SUBAWARD

ADSD Program Name:			9	Subrecipient	Name and Ad	dress:		
Planning, Advocacy and Community Services (PAC) Unit		nit V	Washoe County					
Grants Management			1	001 E 9th Str	reet, Reno, NV	89512		
Address:			<u> </u>	Program Nam	ne and Addres	<u>ss</u> :		
3416 Goni Road, #D-132		V	Washoe County Senior Services					
Carson City, NV 89706		1	1155 E 9th Street, Reno, NV 89512					
Funded Service:			S	Subrecipient'	<u>s</u> :			
Family Caregiver Support					EIN:	88-6000138	3	
Budget Period:			Vendor #: T40283400C					
09/30/18 - 09/29/19			Dun & Bradstreet: 737869					
Purpose of Award: Funding	g for Fiscal Ye	ear 2019 Social	Service Progra	ım				
Region(s) to be served:	Statewi	ide ☑ Spe	ecific county or	counties:	Washoe			
Approved Budget Categori	<u>es</u> :		<u>A</u>	WARD COMP	UTATION:			
1. Personnel		\$24,972		Total Obligated by This Action:			\$108,909	
2. Travel/Training		\$1,440		Cumulative Prior Awards this Budget Period:			\$0	
3. Operating		\$0		Total Federal Funds Awarded to Date:			\$108,909	
4. Equipment		\$0		Total State Funds Awarded to Date:			\$0	
5. Contractual/Consultant		\$80,000		Total Funds Awarded:			\$108,909	
6. Other		\$0		Match Required ☐ Y ☑N				
TOTAL DIRECT COSTS		\$106,412		Amount Required This Action:			\$0	
7. INDIRECT COSTS		\$2,497		Amount Required Prior Awards:			\$0	
8. MATCH		\$0		Total Match Amount Required:			\$0	
TOTAL APPROVED BUDGE	ĒΤ	\$108,909 R			Research and Development (R&D) ☐Y ☑N			
Source(s) of Funds and %: Award: Supplement		Supplement:	Deobligation:	Total Awarded:	CFDA / Federal Award Agency & Award #:			
OAA Title III-E	100.0%	\$108,909			\$108,909	93.052 / ACL 18AANVT3FC		
Terms and Conditions:				1				

<u> [erms and Conditions:</u>

Special Conditions:

Submit Projected Output Measures form.

In accepting these funds, it is understood that:

- 1. This award is subject to the availability of appropriate funds.
- Expenditures must comply with any statutory guidelines, ADSD Requirements and Procedures for Grant Programs (RPGPs), and the State Administrative Manual.
- 3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented.
- 4. Subrecipient must comply with all applicable Federal and State regulations.
- 5. Subrecipient must comply with the scope of services, outreach, budget and assurances defined in its approved grant application.
- 5. Financial, programmatic reports and/or data entry are due according to ADSD's Subrecipient Reporting Schedule, unless specific exceptions are provided in writing by the award administrator, or funds may be withheld. The Reporting Schedule is available online at:
 - $\underline{\text{http://adsd.nv.gov/uploadedFiles/adsdnvgov/content/Programs/Grant/ReportingSchedule.pdf}}$
- 7. Subrecipient agrees to a limited scope audit to settle any financial disagreements or disputes. Audit costs are to be paid by the Subrecipient.

8. Subrecipients are required to:

(a) Support meaningful involvement of clients in the planning, implementation, and evaluation of the funded program; (b) Demonstrate ability to deliver culturally competent and accessible services to the community the Subrecipient services; (c) Demonstrate accountability for collaboration; (d) Adhere to ADSD's General Service Specifications and the Service-Specific Service Specifications for the funded service; and (e) Submit accurate, up-to-date information on this funded service to Nevada 2-1-1 for inclusion in its resource directory at www.Nevada211.org.

Incorporated Documents:

Included with the Notice of Subaward:

Section A: Confidentiality Addendum (signature required)

Section F: Financial Report and Request for Funds

Download the following documents online for review/signature: http://adsd.nv.gov/Programs/Grant/SubawardIncorporatedDocs/

Section B: Assurances

Section C: Budget and Financial Reporting Requirements

Section D: Current/Former State Employee Disclaimer (signature required)

Section E: Audit Information Request (signature required)

Subaward Acceptance:

<u> </u>					
Subrecipient Authorized Official - Name and Title:	Signature:	Date:			
ADSD Authorized Official - Name and Title:	Signature:	Date:			
Jeffrey S. Duncan, PAC Social Services Chief II for Dena Schmidt, Administrator	Jh S:]	10/09/2018			

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