

Yes

Yes

The Federal Funding Accountability and Transparency Act (FFATA) annual certification enumerated below represent material facts upon which DFPS relies when reporting information to the federal government required under federal law. If the Department later determines that the subrecipient knowingly rendered an erroneous certification, DFPS may pursue all available remedies in accordance with Texas and U.S. law. Signor further agrees that it will provide immediate written notice to DFPS if at any time Signor learns that any of the certifications provided for below were erroneous when submitted or have since become erroneous by reason of changed circumstances. *If the signatory cannot certify all of the statements contained in this section, signatory must provide written notice to DFPS detailing which of the below statements it cannot certify and why.*

Enter your organization's Dun & Bradstreet (D&B) DUNS Number: 061519781 Enter the parent DUNS Number, if applicable:

Did your organization have gross income, from all sources, of less than \$300,000 in your previous tax year?

No	N/A	Х	(if e
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 \mathbf{N} (if entity does not generate income)

If your answer is Yes, skip Parts A, B, C, and D and complete Part E.

If your answer is No or N/A, complete Parts A and B.

PART A. Certification Regarding % of Annual Gross from Federal Awards

Did your organization receive 80% or more of its annual gross income from federal awards in the previous tax year?



PART B. Certification Regarding Amount of Annual Gross from Federal Awards

Did your organization receive \$25 million or more in annual gross income from federal awards in the previous tax year?

/es		No	Х
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If your answer is Yes to both A and B, you must complete Part C.

If your answer is No to either A or B, skip Parts C and D, and complete Part E.

PART C. Certification Regarding Public Access to Compensation Information

Does the public have access to information about the compensation [17 CFR 229.402(c)(2)] of the senior executives (e.g., officers, managing partners, or any other employees in management positions) in your business or organization (including parent organization, all branches, and all affiliates worldwide) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Νο	N/A X (if entity reports through some other means, state how:) Annual Audited Financial Statements posted on the County Website

If your answer is Yes, skip Part D and complete Part E.

If your answer is No, you must provide compensation information to DFPS for FFATA reporting in Part D. If N/A, you may still be required to supply compensation information pending DFPS or federal awarding

agency approval. Skip Part D until requested by DFPS to supply compensation information and proceed to complete Part E.



PART D. Certification Regarding Executive Compensation

The Names and Total Compensation of the top five (5) executives if:

- More than 80% of annual gross revenues from the Federal government,
- Those revenues are greater than \$25M annually, and .
- Compensation information is not already available through reporting to the SEC. •

Subrecipient Executive Names	Total Compensation		

PART E. General FFATA Certification

As the duly authorized representative (Signatory) of the subrecipient named below, I hereby certify that the responses that I have provided to the questions in this certification form are true, complete and correct to the best of my knowledge.

Sydney Murphy
Printed Name of Authorized Representative
County Judge
Title of Authorized Representative

1	A second state of the second	
Polk County		
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Legal Name of Subrecipient

LivingSton, Polk County	
Principal Place of Performance (POP) (City, County)	<u> </u>
Congressional District 36	
POP Congressional District	

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)ate

TX

State

24728993

Agency Account ID Number

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THIS SECTION FOR DFPS USE ONLY

CONTRACT MANAGER INFOR	MATION
Name	Dawn Johnson
Division	Purchased Client Services (CPS)
Region	Region 5
Phone	936-569-5335
Email	dawn.johnson@dfps.texas.gov
Date form received	
CONTRACT INFORMATION	
Contract Number	HHS000285000012
Fiscal Year	2022
Federal Funding Agency	U.S. Department of Health and Human Services
CFDA # (s)	93.658
Award No./FAIN	2201TXFOST
Contract Start Date	10/01/2018 Contract End Date 09/30/2025
FY Contract Amount	\$4,730.16
SCOR Subject	General Goods and Services
SCOR Purpose	DFPS Title IV-E (Child Welfare) Funded Services

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Budget for Title IV-E County Child Welfare Services Contract

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K909-Form 2030CWIVE July 24, 2018

Summar	y .	· · · · · · · · · · · · · · · · · · ·			
	County:	Polk			
Age	ncy Account ID:	*			
	t Effective Date:				
Cost Category	Estimated Total Expenses Allocable to Title IV-E	10/1/2018-9/3 Total Anticipated Federal Reimbursement	Total Anticipated County Match		
A. Administration					
A.1. Direct Personnel Salaries	\$0.00	\$0.00	\$0.00		
A.2. Direct Personnel Fringe Benefits	\$0.00	\$0.00	\$0.00		
A.3. Direct Personnel Travel	\$0.00	\$0.00	\$0.00		
A.4. Direct Materials and Supplies	\$300.00	\$49.50	\$250.50		
A.5. Direct Equipment	\$0.00	\$0.00	\$0.00		
A.6. Direct Other Costs	\$100.00	\$16.50	\$83.50		
Total Administration	\$400.00	\$66.00	\$334.00		
B. Training					
B.1. Title IV-E Training (75%)	\$0.00	\$0.00	\$0.00		
B.2. Title IV-E Fostering Connections Training (75%)	\$0.00	\$0.00	\$0.00		
B.3. Non-Title IV-E Training (50%)	\$0.00	\$0.00	\$0.00		
Total Training	\$0.00	\$0.00	\$0.00		
C. Supplemental Foster Care Maintenance (SFCM)					
Total SFCM	\$8,200.00	\$4,664.16	\$3,535.84		
D. Indirect Costs (if applicable)					
Indirect Cost Base	\$0.00	\$0.00	\$0.00		
Grand Total	\$8,600.00	\$4,730.16	\$3,869.84		
*Estimated Federal Reimbursement for expenses based on Eligi quarter of the preceding fiscal year: Actual reimbursement will be based on EPR in effect for the county d incurred.	uring the month in v	which expenses were	33.000% 		
* Estimated Federal Reimbursement for Supplemental Foster Ca Federal Medicaid Assistance Percentage (FMAP) rate in effect du Actual reimbursement will be based on FMAP rate in effect at the tim	uring preceding fis	scal year:			
	e reinibursement is	made to contractor.			
Indirect Cost Rate, if applicable (attach a copy of the approved Certificate of Indirect Costs):					
<u>Contractor Certi</u>	rication				
Signature Sydney Murphy Polk County Judge Printed Name & Title	· .	August 28, 20 Dafe	18		

Budget for Title IV-E County Child Welfare Services Contract

K909-Form 2030CWIVE July 24, 2018

			istration rsonnel Salarie	S		ा है। ² साम सामान का देवें 2000
	County:	Pol	k			
Age	ncy Account ID:	24728	993			
Budge	t Effective Date:	10/1/2018-9	/30/2019			
Position or Title	A	B	C	<u>D</u>	E	
	Monthly Salary	% of Time Spent on IV-E Activities	Number of Months of Service	Estimated Total Expanse* (AxBxC)	Anticipated Federal Reimbursement (eatimated EPR x 50% FFP)	Anticipated County Match
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0,00	\$0.00
				\$0.00	\$0.00	\$0.00
	•	Total Direct Pers	onnel Salaries	\$0.00	\$0.00	\$0.00

Budget for Title IV-E County Child Welfare Services Contract

K909-Form 2030CWIVE July 24, 2018

	Inistration onnel Fringe Bene	fits			
	County:	Po	lk		
Ag	епсу Account ID:	24728	3993		
Budg	et Effective Date:				
Type of Fringe Benefits	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 50% FFP)	Anticipated County Match		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
		\$0.00	\$0.00		
	· · · ·	\$0.00	\$0.00		
		\$0.00	\$0.00		
-		\$0.00	\$0.00		
Total Direct Personnel Fringe Benefits	\$0.00	\$0.00	\$0.00		

* estimated total cost for Title IV-E related activities

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Budget for Title IV-E County Child Welfare Services Contract

	Iministration Intersonnel Tra	avel	
	County:	Po	lk
Ager	cy Account ID:	2472	
	Effective Date:	10/1/2018	9/30/2019
Type of Travel Expense Note: only include travel <u>NOT</u> related to personnel training	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 50% FFP)	Anticipated County Match
		\$0.00	\$0.00
· · · · · · · · · · · · · · · · · · ·		\$0.00	\$0.00
	· · · · · · · · · · · · · · · · · · ·	\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
Total Direct Personnel Travel	\$0.00	\$0.00	\$0.00

Budget for Title IV-E County Child Welfare Services Contract

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	inistration aterials and Supp	blies	
	County: ncy Account ID: t Effective Date:	2472	olk 18993 -9/30/2019
Materials and Supplies (description)	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 50% FFP)	Anticipated County Match
Foster/Adoptive Recruitment	\$100.00	\$16.50	\$83.50
Overhead expenses	\$200.00	\$33.00	\$167.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
		\$0.00	\$0.00
Total Direct Materials and Supplies	\$300.00	\$49.50	\$250.50

Budget for Title IV-E County Child Welfare Services Contract

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		nistration ct Equipment	· · · · · · · · · · · · · · · · · · ·		
	County:	P	olk		
Agency	Account ID:	247	28993		
Budget E	ffective Date:	10/1/2018	-9/30/2019		
Equipment (description)	Method Used (rent/lease/ purchase)	Estimated Anticipated Federal Reimbursement (estimated EPR x 50% FFP)		Anticipated County Match	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
			\$0.00	\$0.00	
Total Dire	ect Equipment	\$0.00	\$0.00	\$0.00	

Budget for Title IV-E County Child Welfare Services Contract

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Adı	ninistration		
A.6. Dir	ect Other Costs		
	County:	Po	lk
Agei	ncy Account ID:	2472	8993
	t Effective Date:	10/1/2018-	9/30/2019
Other Costs (description)	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 50% FFP)	Anticipated County Match
Citation by Publication	\$100.00	\$16.50	\$83.50
		\$0.00	\$0.00
		\$0 <u>.00</u>	\$0.00
		\$0.00	\$0.00
· · · · · · · · · · · · · · · · · · ·		\$0.00	\$0.00
Total Direct Other Costs	\$100.00	\$16.50	\$83.50

Budget for Title IV-E County Child Welfare Services Contract

				B. Training		Version of the second se		<u>, , , , , , , , , , , , , , , , , , , </u>	νης:
			B.1. Titl	e IV-E Training	(75%)				
Agency	County: Account ID:		olk		• • • • • • • • • • • • • • • • • • •				
	fective Date:	10/1/2018	-9/30/2019		· · · · · · · · · · · · · · · · · · ·			A statestad	
Training (Description and Title)	Registration* (amount allocable to Title (V-E)	Lodging* (amount allocable to Title IV-E)	Meals* (amount allocable to Title IV-E)	Transportation* (amount allocable to Title IV-E)	Subtotal	Number of Employees Attending	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 75% FFP)	Anticipated County Match
NOTE: Form 9321 Training E	 Exnense Docum	entation Form	must be subm	nitted to DFPS for	review/approva	al by Federa	Funds prior to	training.	
None at this time.				1	\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
	+				\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0,00
					\$0.00		\$0,00	\$0,00	\$0.00
				· ·	\$0.00		\$0.00	\$0.00	\$0.00
and and an an an and a second seco					\$0,00		\$0.00	\$0.00	\$0,00
and and a second se				Total Training		- 1	\$0.00	\$0.00	\$0.00

* estimated amount allocable to Title IV-E

Note: Please refer to Title IV-E Finance Handbook for detailed information regarding allowable expenses, documentation requirements, etc. http://www.dlips.state.tx.us/handbooks/Title_IVE_County/default.isp.

Budget for Title IV-E County Child Welfare Services Contract

				B. Training	-				
		B.2. Ti	tle IV-E Foste	ering Connecti	ons Trainin	g (75%)	· · · · · · · · · · · · · · · · · · ·		
	County:	Po	olk	•					
Agen	cy Account ID: _	2472	8993	- '					
Budget	Effective Date:	10/1/2018	-9/30/2019					A-stalingted	
Training (Description and Title)	Registration* (amount allocable to Title IV-E)	Lodging* (amount allocable to Title IV-E)	Meats* (amount allocable to Title IV-E)	Transportation* (amount allocable to Title IV-E)	Subtotal	Number of Attendees	Estimated Total Expense*	Anticipated Federal Reimbursoment (estimated EPR x 75% FFP)	Anticipated County Match
NOTE: Form 9321 Training E			L	d to DEPS for rev		by Federal F	unds prior to tra	aining.	
	xpense Document	ation Porm in			\$0.00		\$0.00	\$0.00	\$0.00
None at this time.		<u></u>			\$0.00		\$0.00		\$0.00
<u> </u>	-[]			· · · · ·	\$0.00		\$0.00	\$0.00	\$0.00
		·	<u> </u>		\$0.00		\$0,00	\$0.00	\$0.00
		·			\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
		·			\$0.00	****	\$0.00	\$0.00	\$0,00
<u> </u>			<u>.</u>	Total Training			\$0.00	\$0,00	\$0.00

* estimated amount allocable to Title IV-E

Budget for Title IV-E County Child Welfare Services Contract

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				B. Training	· · · · ·				
				tle IV-E Training	g (50%)				
2118877999999	County:			-	<u></u>	a var i			
	y Account ID: iffective Date:		8993 -9/30/2019	-					
Training (Description and Title)	Registration* (amount allocable to Title IV-E)	Lodging* (amount allocable to Title IV-E)	Meals* (amount allocable to Title IV-E)	Transportation* (amount allocable to Title IV-E)	Subtotal	Number of Employees Attending	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated EPR x 50% FFP)	Anticipated County Match
NOTE: Form 9321 Training Exp	ense Documente	ntion Form mus	st be submitted	to DFPS for revie	w/approval b	y Federal Fu	nds prior to trai	ning.	
None at this time.					\$0.00		\$0,00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
a and an and a second as a					\$0.00		\$0.00	\$0.00	\$0.00
	• •	<u> </u>			\$0.00		\$0.00	\$0.00	\$0.00
					\$0.00		\$0.00	\$0.00	\$0.00
	-				\$0.00		\$0.00	\$0.00	\$0.00
		·····			\$0.00		\$0.00	\$0,00	\$0.00
		7 1 - 16 THAT AND AND A			\$0.00	······	\$0.00	\$0,00	\$0.00
				Total Training			\$0.00	\$0,00	\$0,00

* estimated amount allocable to Title IV-E

Budget for Title IV-E County Child Welfare Services Contract

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C. Supplemental Foster Care Maintenance (SFCM)							
	County:	Po	lk				
	ncy Account ID:	2472	······································				
Budge	et Effective Date:	10/1/2018-	9/30/2019				
Other Costs (description)	Estimated Total Expense*	Anticipated Federal Reimbursement (estimated FMAP)	Anticipated County Match				
Allowances	\$500.00	\$284.40	\$215.60				
Clothing	\$500.00	\$284.40	\$215.60				
Gifts	\$5,000.00	\$2,844.00	\$2, <u>156.00</u>				
Graduation Expenses	\$600.00	\$341.28	\$258.72				
Personal Items	\$500.00	\$284.40	\$215.60				
School Supplies	\$1,000.00	\$568.80	\$431.20				
Reasonable Child Specific Travel	\$100.00	\$56.88	\$43.12				
Total Direct Other Cost	\$8,200.00	\$4,664.16	\$3,535.84				

Budget for Title IV-E County Child Welfare Services Contract

K909-Form 2030CWIVE July 24, 2018

Budget Narrative	
County:	Polk
Agency Account ID:	24728993
Budget Effective Date:	10/1/2018-9/30/2019
Clearly describe each expense to be incurred and billed to this contract. Refer to Title IV-E detailed information regarding allowable expenses, documentation requirements, etc. http://www.dfps.state.tx.us/handbooks/Title_IVE_County/default.asp	Finance Handbook for
A. Administration	
A.1. Direct Personnel Salaries	
N/A	
A.2. Direct Personnel Fringe Benefits	
N/A	
A.3. Direct Personnel Travel	
N/A	
A.4. Direct Materials and Supplies Supplies for recruitment of foster nomes, such as ribbons, phamphiets, etc. Overhead expenses related to conducting Title IV-E related business. such as post	ace. stationarv. bankinc
A.5. Direct Equipment	
N/A	
A.6. Direct Other Costs Citatin by Publication as required for eligible youth in foster care.	
B. Training	
<u>B.1. Title IV-E Training (75%)</u> N/A	
<u>B.2. Title IV-E Fostering Connections Training (75%)</u> N/A	
<u>B.3. Non-Title IV-E Training (50%)</u> N/A	
C. Supplemental Foster Care Maintenance (SFCM)	
Expenses paid on behalf of eligible Title IV-E youth in foster care including allowang graduation expenses, personal items, school supplies, and travel for children visiting relatives, and other caregivers.	ce, clothing, gifts, ng parents, siblings,
D. Indirect Costs (if applicable)	

Miller, Lou A. (DFPS)

From: Sent: To: Cc: Subject: Lindsey, John M (DFPS) Wednesday, August 8, 2018 12:02 PM Miller, Lou A. (DFPS) Rasberry, Stanley (DFPS) RE: Polk County Proposed FFY19 Child Welfare Services Budget

Udget Approval

Lou,

DFPS Budget approves this FY19 contract for Polk County CWS.

John Lindsey Prevention and Early Intervention/Title IV-E Budget Analyst 512-438-3356

- Protecting the Unprotected -

From: Miller,Lou A. (DFPS) Sent: Tuesday, July 31, 2018 9:46 AM To: Lindsey,John M (DFPS) <John.Lindsey@dfps.state.tx.us> Subject: FW: Polk County Proposed FFY19 Child Welfare Services Budget

Mr. Lindsey, Please use this form to review and approve the Polk County Child Welfare Services budget-Form 2030CWIVE. I had sent it in previously on an old form.

Thank you,

Lou Ann Miller CPS Regional Contract Manager 2027 N Stalling Dr P O Box 630050 Nacogdoches, Texas 75963-0050 Phone: 936-569-5335 Fax: 512-276-3080

From: Miller, Lou A. (DFPS) Sent: Wednesday, July 25, 2018 1:41 PM To: 'davidafrasier@flash.net' <<u>davidafrasier@flash.net</u>>; 'shendix@bigsandyisd.net' <<u>shendix@bigsandyisd.net</u>> Cc: 'Kayla Pitts' <<u>pittscrew@yahoo.com</u>> Subject: Polk County Proposed FFY19 Child Welfare Services Budget

Please review the attached <u>Proposed FFY19</u> Polk County Child Welfare Services budget. This proposed budget does not require approval/signature by the Judge at this