

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

625



FROM: Community Action Partnership of Riverside County

SUBMITTAL DATE:
November 25, 2013

SUBJECT: Ratify Financial Assistance Award #90EI0822-01-00 with the U.S. Department of Health and Human Services, Office of Community Services. Five (5) year contract. Districts 1 – 5. [\$17,000]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify the \$115,000 Financial Assistance Award #90EI0822-01-00 from the U.S. Department of Health and Human Services, Office of Community Services (DHHS) on behalf of the Community Action Partnership of Riverside County (CAP Riverside) for the Riverside County Individual Development Account Program (RivCo.IDA) covering the term Sept. 30, 2013 through Sept. 29, 2018;
2. Approve and direct the Auditor Controller to adjust the budget as detailed in the attached Schedule A.
3. Authorize the Executive Director of CAP Riverside to sign assurances, exhibits, and reports required by the award; and
4. Authorize the Executive Director of CAP Riverside to administer the award.


 Name: Maria Y. Juarez, CCAP
 Title: Executive Director

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 3,400	\$ 3,400	\$ 17,000	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	
SOURCE OF FUNDS: 100% DHHS Fund # 21050				Budget Adjustment: Yes	
				For Fiscal Year: 13/14	

C.E.O. RECOMMENDATION:

APPROVE

BY: 
Donna Shaw

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

FISCAL PROCEDURES APPROVED
 PAUL ANGULO, CPA, AUDITOR-CONTROLLER
 BY:  Susana Garcia for Paul Angulo
 11/27/13
 Departmental Council

FORM APPROVED COUNTY COUNSEL
 BY:  Neal R. Krenis
 DATE: 11/26/13

- A-30
- 4/5 Vote
- Positions Added
- Change Order

Prev. Agn. Ref.: 9/01/09 (3.21) | District: | Agenda Number:

3-11

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FORM 11: Ratify Financial Assistance Award #90EI0822-01-00 with the U.S. Department of Health and Human Services, Office of Community Services. Five (5) year contract. Districts 1 – 5. [\$17,000]

DATE: November 25, 2013

PAGE: Page 2 of 2

BACKGROUND:

Summary

RivCo.IDA is a savings incentive program for low-income participants in which for every dollar saved up to \$1,000, it is matched with two federal and two local dollars for a maximum of \$4,000 and held in a parallel savings account.

Three asset building goals are available for participants to save toward:

- Small business start-up or expansion
- Educational or vocational pursuit
- First time home purchase closing costs and/or down payment

Therefore, the Executive Director of CAP Riverside requests that the Board of Supervisors accept the Financial Assistance Award #90EI0822-01-00 from DHHS for the period Sept. 30, 2013 through Sept. 29, 2018, not to exceed \$115,000.

Impact on Citizens and Businesses

During the savings period (2-3 years) each participant will be required to participate in skill-building workshops in areas such as asset building, goal setting, credit counseling, money management, personal budgeting, business set up, home maintenance, education enrollment, etc., depending upon the particular goal designated.

Various services and group support meetings will provide reinforcement and motivation to savings participants as they work toward their savings goals. When the savings goal is reached, the monies saved are pooled and paid directly for small business costs, to the educational (vocational) institution, or directed toward a down payment and/or closing costs for the purchase of a first home.

SUPPLEMENTAL:

Additional Fiscal Information

No County General Funds are required. Administrative fees allowed under this five (5) year award are \$17,000 (14.78% for the total award). A sum of \$3,400 (Approx 2.96%) will be allocated to cover administrative costs for FY 2013/2014, with the remaining administrative fees budgeted in subsequent fiscal years over the term of the award. The balance of \$98,000 will be deposited into a bank account and be provided as match funds to the Individual Development Accounts of eligible participants.

Contract History and Price Reasonableness

On February 29, 2000 (Agenda #3.52), February 5, 2002 (Agenda #3.18), and December 2, 2003 (Agenda #3.13), the Board of Supervisors approved the acceptance of the multi-year Discretionary Award #90EI0040/01, covering the term September 30, 1999 through September 29, 2005, Award #90EI0150/01, covering the term September 30, 2001 through September 29, 2006, Award #90E10252/01, covering the term September 30, 2003 through September 29, 2008, Award #90EI0414/01, covering the term September 30, 2006 to September 29, 2011, and award #90EI0584/01 covering the term June 1, 2009 through May 31, 2014 from DHHS to empower low-income people to become economically self-sufficient.

FROM: Community Action Partnership
of Riverside County

DATE: November 25, 2013

SUBJECT: Department of Health and Human Services
Award #90E10822-01-00

PAGE: 3 of 3

SCHEDULE A
Community Action Partnership of Riverside County
Budget Adjustment
Fiscal Year 2013/2014

INCREASE IN EST. REVENUE:

CAARC-21050-5200300000-767220	Fed-Other Operating Grants	\$ 3,400
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INCREASE IN APPROPRIATIONS:

CAARC-21050-5200300000-510040	Regular Salaries	\$ 3,400
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BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 06/30/2014

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Assets for Independence	93.602	\$	\$	\$ 115,000.00	\$ 115,000.00	\$ 230,000.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 115,000.00	\$ 115,000.00	\$ 230,000.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Assets for Independence	(2)	(3)	(4)	
a. Personnel	\$ 14,730.00	\$ 14,730.00			\$ 29,460.00
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies	2,270.00	2,270.00			4,540.00
f. Contractual					
g. Construction					
h. Other	96,000.00	96,000.00			196,000.00
i. Total Direct Charges (sum of 6a-6h)	115,000.00	115,000.00			\$ 230,000.00
j. Indirect Charges	0.00	0.00			
k. TOTALS (sum of 6i and 6j)	\$ 115,000.00	\$ 115,000.00	\$	\$	\$ 230,000.00
7. Program Income					
	\$	\$	\$	\$	\$

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8. Assets for Independence	\$ 115,000.00	\$	\$ 115,000.00	\$ 230,000.00
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)	\$ 115,000.00	\$	\$ 115,000.00	\$ 230,000.00

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 3,400.00	\$ 0.00	\$ 1,100.00	\$ 1,100.00	\$ 1,200.00
14. Non-Federal	\$ 3,400.00	\$ 0.00	\$ 1,100.00	\$ 1,100.00	\$ 1,200.00
15. TOTAL (sum of lines 13 and 14)	\$ 6,800.00	\$ 0.00	\$ 2,200.00	\$ 2,200.00	\$ 2,400.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. Assets for Independence Demonstration program	\$ 32,000.00	\$ 32,000.00	\$ 34,000.00	\$ 0.00
17.				
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	\$ 32,000.00	\$ 32,000.00	\$ 34,000.00	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:		22. Indirect Charges:	Predetermined: Base \$230,000 Rate=14.78%,=\$34,000
23. Remarks:			

AVAILABILITY OF ADDITIONAL NON-FEDERAL RESOURCES

CAP Riverside will secure in-kind support reflective of the award reduction. In-kind support includes, but is not limited to: individual counseling; training; workshop materials; and training space.

BUDGET AND BUDGET JUSTIFICATION

Of the \$115,000 AFI funds requested, 14.78% (\$17,000) will be allocated to financial education and related costs for participants opening an AFI-funded IDA, general program administrative costs, and data collection:

Description	Percentage	Year 1	5-Year Total
Financial Education and Related Costs for Participants Opening an AFI-Funded IDA	5.50%	\$1,265	\$ 6,325
General Program Administrative Costs	7.28%	\$1,675	\$ 8,375
Data Collection	2.00%	\$ 460	\$ 2,300
TOTALS:	14.78%	\$3,400	\$17,000

The remaining 85.22% (\$98,000) will be allocated towards 49 graduating program participants at \$2,000 per graduate. CAP Riverside established an AFI Project Reserve Fund during its first round of AFI funding. CAP Riverside has sustained this reserve fund throughout all five rounds. All interest earned on participants' funds are credited as accrued through the bank to the individual participant. All interest earned on project funds are rolled- back into the program. CAP Riverside uses a spreadsheet to determine interest income allocation to program participants when they close out their account.

CAP Riverside is committed to providing \$115,000 in non-federal funds for the required local cash match. A Letter of Cash Match Commitment from CAP Riverside was submitted with the proposal.



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES

Office of the Assistant Secretary, Suite 600
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

September 30, 2013

Ms. Maria Y. Juarez
Executive Director
Community Action Partnership of Riverside County
2038 Iowa Avenue, Suite B-102
Riverside, CA 92507-2412

Dear Ms. Juarez:

Congratulations on receiving your Office of Community Services (OCS) Fiscal Year 2013: Assets for Independence (AFI) award! We are pleased to welcome the new grantees to the OCS family, and we look forward to a long and prosperous partnership with you.

We know that you are eager to begin working on your project, and we would like to help get you started. You should have received preliminary information from the Office of Grants Management. AFI will be hosting a series of grantee orientation webinars designed to provide you with guidance, resources, and tools as you kick-off your grant. The webinars, beginning in October, will address topics such as reporting requirements, rules and regulations, helpful contact information, and more. More details regarding dates and information on how to register for these webinars will be sent to you via email.

Throughout the course of your grant, you will also receive important notifications, reminders, and updates related to your grant from the AFI Resource Center: info@idaresources.org. To ensure you do not miss any important emails, we strongly recommend adding this email to your contacts to avoid having messages go to your spam folders.

Additionally, an OCS Program Specialist has been assigned to your grant and will be available to assist you with any programmatic questions you encounter during the course of your grant. Your Program Specialist will be contacting you shortly to introduce themselves and touch base on the details of your grant. If you have any questions prior to hearing from your Program Specialist, please contact the AFI Resource Center at 1-866-778-6037 or email info@idaresources.org.

I hope this information is helpful to you and once again, congratulations. Please let me know if I can be of further assistance.

Sincerely,

Jeannie L. Chaffin
Director
Office of Community Services

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

SAI NUMBER:
PMS DOCUMENT NUMBER:

1. AWARDING OFFICE: Office of Community Services		2. ASSISTANCE TYPE: Discretionary Grant		3. AWARD NO.: 90EI0822-01-00		4. AMEND. NO.: 0		
5. TYPE OF AWARD: Demonstration			6. TYPE OF ACTION: New			7. AWARD AUTHORITY: PL 105-285 42 USC 604		
8. BUDGET PERIOD: 09/30/2013 THRU 09/29/2018			9. PROJECT PERIOD: 09/30/2013 THRU 09/29/2018			10. CAT NO.: 93.602		
11. RECIPIENT ORGANIZATION: Community Action Partnership of Riverside County 2038 Iowa Ave Ste B-102 Riverside, CA 92507-2412 Grantee Authorizing Official: Maria Juarez						12. PROJECT / PROGRAM TITLE: Assets for Independence (AFI) Demonstration Program		

13. COUNTY: Riverside		14. CONGR. DIST.: 41		15. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR: Maria Y Juarez			
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16. APPROVED BUDGET:				17. AWARD COMPUTATION:				
Personnel.....	\$	0.00		A. NON-FEDERAL SHARE.....	\$	115,000.00	50%	
Fringe Benefits.....	\$	0.00		B. FEDERAL SHARE.....	\$	115,000.00	50%	
Travel.....	\$	0.00		18. FEDERAL SHARE COMPUTATION:				
Equipment.....	\$	0.00		A. TOTAL FEDERAL SHARE.....	\$	115,000.00		
Supplies.....	\$	0.00		B. UNOBLIGATED BALANCE FEDERAL SHARE.....	\$	0.00		
Contractual.....	\$	0.00		C. FED. SHARE AWARDED THIS BUDGET PERIOD...\$		0.00		
Facilities/Construction.....	\$	0.00		19. AMOUNT AWARDED THIS ACTION:				
Other.....	\$	230,000.00		20. FEDERAL \$ AWARDED THIS PROJECT PERIOD:				
Direct Costs.....	\$	230,000.00		\$ 115,000.00				
Indirect Costs.....	\$	0.00		21. AUTHORIZED TREATMENT OF PROGRAM INCOME:				
At % of \$				Additional Costs				
In Kind Contributions.....	\$	0.00		22. APPLICANT EIN:		23. PAYEE EIN:		24. OBJECT CLASS:
Total Approved Budget.....	\$	230,000.00		956000930		1956000930A6		41.45

25. FINANCIAL INFORMATION:							DUNS 105920057
ORGN	DOCUMENT NO.	APPROPRIATION	CAN NO.	NEW AMT.	UNOBLIG.	NONFED %	
	90EI082201	751536	3-G991115	\$115,000.00			

26. REMARKS: (Continued on separate sheets)

RESTRICTION PLACED ON FEDERAL FUNDS
Within 30 days of receipt of this award, you must contact your Grants Management Specialist to clarify and resolve budget issues. Questions regarding this FAA should be submitted to Britney Yannayon at 202-401-5680.

27. SIGNATURE - ACF GRANTS OFFICER		DATE:	28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY	
Katrina Morgan		09/26/2013	Mr. William Dekoladenu	
29. SIGNATURE AND TITLE - PROGRAM OFFICIAL(S)		DATE:		
Ms. Jeannie Chaffin - Director, Office of Community Serv		09/26/2013		

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

SAI NUMBER:

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11. RECIPIENT ORGANIZATION: Community Action Partnership of Riverside County				

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
09/30/2013	09/30/2013	Semi-Annual	10/30/2013
10/01/2013	03/31/2014	Semi-Annual	04/30/2014
04/01/2014	09/30/2014	Semi-Annual	10/30/2014
10/01/2014	03/31/2015	Semi-Annual	04/30/2015
04/01/2015	09/30/2015	Semi-Annual	10/30/2015
10/01/2015	03/31/2016	Semi-Annual	04/30/2016
04/01/2016	09/30/2016	Semi-Annual	10/30/2016
10/01/2016	03/31/2017	Semi-Annual	04/30/2017
04/01/2017	09/30/2017	Semi-Annual	10/30/2017
10/01/2017	03/31/2018	Semi-Annual	04/30/2018
04/01/2018	09/29/2018	Final	12/28/2018

STANDARD TERMS

1. 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 the purpose of this award. This includes requirement in Parts I and II (available at <http://www.hhs.gov/asfr/ogapa/grantinformation/hhsgps107.pdf>) of the HHS GPS. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 74 or 92, 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 the <https://www.acf.hhs.gov/grants/discretionary-competitive-grants>.
This grant is subject to the requirements set forth in 45 CFR Part 87. Attached are terms and conditions, reporting requirements, and payment instructions.
(**) Reflects only federal share of approved budget.