

# ADMINISTRATION FOR

Office of Head Start | Region 8 | 1961 Stout Street, Room 08-148, Denver, CO 80294 | eclkc.ohs.acf.hhs.gov

Hon. Michale Hancock **Board Chairperson** 201 W Colfax Ave **Dept 1101** 

JUN 2 6 2019

Denver, CO 80202-5332

Grant Number: 08CH010552 / 2

Project Period:

7/1/2018 through 6/30/2023

Budget Period:

7/01/2019 through 6/30/2020

Amendment #:

Dear Hon. Hancock:

I am pleased to inform you that your grant application has been approved to assist you in financing the program referred to in the enclosed Notice of Award (NOA) which specifies the amount and duration of your grant. The attachments to the NOA provide instructions pertinent to the administration of your grant. The Grant Number referenced above has been assigned to your grant and should be used on all grant related correspondence.

The Program Specialist and Fiscal Specialist responsible for monitoring and assisting with your grant include:

**Program Specialist** Michelle Stewart Administration for Children and Families Office of Head Start 1961 Stout Street Room 8-148

Denver, CO 80294 (303) 844-1207

Michelle.stewart@acf.hhs.gov

Fiscal Specialist Bryan Johnson

Administration for Children and Families

Office of Grants Management

1961 Stout Street Room 8-148 Denver, CO 80294 (303) 844-1161

bryan.johnson@acf.hhs.gov

For information on the required financial reports related to your grant, please see the attached "Financial Reporting

Requirements". Further information is also available at:

https://www.acf.hhs.gov/discretionary-post-award-requirements#chapter-2

Sincerely,

Regional Program Manager

Office of Head Start, Region 8

Seffrey S. Newton

Regional Grants Officer

Office of Grants Management, Region 8

**Enclosures** 

cc:

Al Martinez, Head Start Director

Yvette Evans, Policy Council Chairperson

Lila Medina, Fiscal Officer

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

SAI NUMBER:

PMS DOCUMENT NUMBER:

|                                      | NOI  | ICE OF AWAR           |              |   |                     |              |                  |               |                 |               |
|--------------------------------------|--|-----------------------|--------------|---|---------------------|--------------|------------------|---------------|-----------------|---------------|
| 1. AWARDING OFFICE:                  |  |                       |              | 2. ASSISTANCE TYPE:                             |                     |              | 3. AWARD NO.:    |               | 3a. AMEND. NO.: |               |
| Office of Head Start                 |  |                       |              | Discretionary Grant                             |                     |              | 08CH010552-02-0  | -00 0         |                 |               |
| 4. FAIN:                             | 08CH010552   |                       |              |   |                     |              |                  |               |                 |               |
| 5. TYPE                              | OF AWARD:  |                       | 6. TYPE      | YPE OF ACTION: 7. AWARD AUTHO                   |                     |              | THORITY          | <b>':</b>     |                 |               |
|                                      |  |                       | Non-Com      | -Competing Continuation 42 USC 9801 ET SEQ      |                     |              |                  |               |                 |               |
| 8. BUDGET PERIOD: 9. PROJECT PERIOD: |  |                       | DD:          | 10. CFDA NO.:                                   |                     |              |                  |               |                 |               |
| 07/01/201                            | 07/01/2019 THRU 06/30/2020 07/01/2018 THRU 06/30/202 |                       |              |   | 93.600 - Head Start |              |                  |               |                 |               |
| 11. RECI                             | PIENT ORGANIZATION                                   | :                     |              | 12. PROJECT / PROGRAM TITLE:                    |                     |              |                  |               |                 |               |
| DENVER                               | R HEAD START OFFICE                                  |                       |              | Head Start                                      |                     |              |                  |               |                 |               |
|                                      | olfax Ave Dept 1101                                  |                       |              |   |                     |              |                  |               |                 |               |
|                                      | CO 80202-5332 Authorizing Official: Mich             | aad Hancock Mayor -   | City and Cou | inty of Denve                                   | ar                  |              |                  |               |                 |               |
| Grantee                              | Authorizing Official. Mich                           | iaei Harioock , Mayor | Oily and Ood | inty of Botto                                   | •                   |              |                  |               |                 |               |
| 13. COUN                             | NTY:   | 14. CONG              | R. DIST:     | 15. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR: |                     |              |                  | OR:           |                 |               |
| Denver                               |  | 01                    |              | Al Martinez Executive Director                  |                     |              |                  | or            |                 |               |
|                                      | 16. APPROVE  | D BUDGET:             |              |   |                     | 17. AV       | ARD COMPUTAT     | ION:          |                 |               |
|                                      |  |                       | 606 00 A.    | NON-FEDE  | RAL SHARE           | \$           | 2,               | 403,212.      | 00              | 20%           |
|                                      | el\$<br>enefits\$                                    |                       | 356.00 B.    | FEDERAL S                                       | SHARE               |              |                  | 612,847.      | 00              | 80%           |
| -                                    | \$   | 200,                  | 0.00         | 18. FEDERAL SHARE COMPUTATION:                  |                     |              |                  |               |                 |               |
|                                      | nt\$   |                       | 0.00         | A. TOTAL FEDERAL SHARE\$ 9,612,6                |                     |              |                  | 9,612,847.00  |                 |               |
| Supplies\$ 12,000.00                 |  |                       | 000 00 l     | B. UNOBLIGATED BALANCE FEDERAL SHARE            |                     |              |                  |               |                 |               |
|                                      |  |                       | 225 00       | C. FED. SHARE AWARDED THIS BODGETT ENIOD        |                     |              |                  | 9,612,847.00  |                 |               |
| Facilities/Construction \$           |  |                       | 0.00         | 19. AWOUNT AWARDED THIS ACTION:                 |                     |              | 0,012,041.00     |               |                 |               |
|                                      | \$   | 413,                  | 470.00       | PERIOD:   | , \$ AWANDED II     | 110 1 110    |                  |               | \$              | 19,060,462.00 |
| Direct Co                            | sts\$  | 9,612,                | 847.00       | ALITHODI  | ZED TREATMEN        | T OF P       | ROGRAM INCOM     | <br>E:        |                 |               |
| Indirect C                           | Costs\$  |                       | 0.00         | dditional Co                                    |                     | 0            |                  | <del></del> - |                 |               |
| In Kind C                            | Contributions  | \$                    | 0.00 22.     | APPLICAN  | IT EIN:             | 2            | 3. PAYEE EIN:    |               | 24. 0           | BJECT CLASS:  |
| Total Approved Budget \$ 9,612,847.  |  | 847.00 8              | 846000580    |   |                     | 1846000582A1 | 46000582A1 41.51 |               |                 |               |
|                                      |  |                       | 25. FIN      | NANCIAL IN                                      | FORMATION:          |              |                  | DUNS          | 170147          | 7354          |
| ORGN                                 | DOCUMENT NO.   | APPROPR               |              | CAN   |                     | N            | EW AMT. U        | JNOBLIG       | ).              | NONFED %      |
|                                      | 08CH01055202   | 75-19-                | 1536         | 9-G08   | 4122                |              | \$9,500,365.00   |               |                 |               |
|                                      | 08CH01055202   | 75-19-                | 1536         | 9-G08   | 4120                |              | \$112,482.00     |               |                 |               |
|                                      |  |                       |              |   |                     |              |                  |               |                 |               |
|                                      |  |                       | DEMARK       | D. (O   | d en concrete che   | noto)        |                  |               |                 |               |

26. REMARKS: (Continued on separate sheets)

| 27. SIGNATURE - ACF GRANTS OFFICER                 | ISSUE DATE: | 28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY |            |  |
|--|-------------|---|------------|--|
| Jeffrey S Newton<br>1961 Stout Street, Room 08-148 | 06/24/2019  | Mr. Omar Barrett                              | 06/24/2019 |  |
| Denver, CO 80294                                   |             |   |            |  |
| Phone: N/A   |             |   |            |  |
|  |             |   |            |  |
| 29. SIGNATURE AND TITLE - PROGRAM OFFICIAL(S)      |             | DATE:   |            |  |

Ms. Cheryl Lutz - Program Specialist - Head Start

06/24/2019

SAI NUMBER:

PMS DOCUMENT NUMBER:

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

| AWARDING OFFICE:     Office of Head Start  |  | 2. ASSISTANCE TYPE: Discretionary Grant     | 3.AWARD NO.:<br>08CH010552-02-00          | 3a. AMEND. NO.: |
|--|--|---|---|-----------------|
| 4. FAIN: 08CH010552  |  |   |   |                 |
| 5. TYPE OF AWARD:<br>Service   |  | TYPE OF ACTION:<br>n-Competing Continuation | 7. AWARD AUTHORITY:<br>42 USC 9801 ET SEQ |                 |
| 8. BUDGET PERIOD: 9. PROJECT PERIOD: 07/01/2019 THRU 06/30/2020 07/01/2018 THRU 06/30/2023 |  | 10. CFDA NO.:<br>93.600 - Head Start        |   |                 |
| 11. RECIPIENT ORGANIZATION   |  |   |   |                 |

#### 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 the purpose of this award.

This includes requirements in Parts I and II (available at http://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/discretionary-post-award-requirements
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/discretionary-post-award-requirements. This award is subject to requirements as set forth in 2 CFR 25.110 Central Contractor Registration (CCR) and DATA Universal Number System (DUNS). For full text go to http://www.acf.hhs.gov/discretionary-post-award-requirements

Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the HHS awarding agency, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner, in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the following addresses:

The Administration for Children for Children and Families U.S. Department of Health and Human Services Office of Grants Management ATTN: Grants Management Specialist 330 C Street, SW., Switzer Building Corridor 3200 Washington, DC 20201 AND

U.S. Department of Health and Human Services Office of Inspector General ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW, Cohen Building Room 5527 Washington, DC 20201 Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email: MandatoryGranteeDisclosures@oig.hhs.gov

Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 & 376 and 31 U.S.C. 3321).

This award is subject to the requirements as set forth in 45 CFR Part 87. This award is subject to HHS regulations codified at 45 CFR Chapter XIII, Parts 1301, 1302, 1303, 1304 and 1305. Attached are terms and conditions, reporting requirements, and payment instructions. Initial expenditure of funds by the grantee constitutes acceptance of this award.

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# **AWARD ATTACHMENTS**

City and County of Denver

08CH010552-02-00

1. Remarks

# 26. REMARKS (Continued from previous page)

This grant action awards \$9,500,365 for Head Start operations and \$112,482 for training and technical assistance for the 07/01/2019-06/30/2020 budget period.

Head Start population: 1,153 children.

Designated Head Start service area(s): City and County of Denver, Colorado.

Approved program option(s) for the Head Start program: Center-based, Home-based.

This grant is subject to the requirements for contribution of the non-federal match and approval of key staff, the limitations on development and administrative costs and employee compensation, and prior written approval for the purchase of equipment and other capital expenditures and the purchase, construction and major renovation of facilities as specified in Attachment 1.

This grant action awards the cost-of-living adjustment increase for the Head Start program for Fiscal Year 2019.

It has been determined the grantee's request for a transportation waiver has met the requirements of 45CFR 1303.70(c)(1)ii of the Head Start Program Performance Standards. This grant action approves the transportation waiver only for bus monitors in the Head Start program.

#### **Attachment 1**

**Award Number: 08CH010552/02** 

**Recipient Organization: Denver Head Start Office** 

This grant is subject to Section 640(b) of the Head Start Act and 45 C.F.R. § 1303.4 requiring a non-federal match of 20 percent of the total cost of the program. This grant is also subject to the requirements in Section 644(b) of the Head Start Act and 45 C.F.R. §1303.5 limiting development and administrative costs to a maximum of 15 percent of the total costs of the program, including the non-federal match contribution of such costs. The requirements for a non-federal match of 20 percent and the limitation of 15 percent for development and administrative costs apply to the 07/01/2019-06/30/2020 budget period unless a waiver is approved. Any request for a waiver of the non-federal match, or a portion thereof, that meets the conditions under Section 640(b)(1)-(5) of the Head Start Act and 45 C.F.R. § 1303.4 or a waiver of the limitation on development and administrative costs that meets the conditions under 45 C.F.R. §1303.5 must be submitted in advance of the end of the budget period. Any waiver request submitted after the expiration of the project period will not be considered.

The HHS Uniform Administrative Requirements (see 45 C.F.R. § 75.308(c)(1)(ii)) provide the authority to ACF to approve key staff of Head Start grantees. For the purposes of this grant, key staff is defined as the Head Start Director or person carrying out the duties of the Head Start Director if not under that title and the Chief Executive Officer, Executive Director and/or Chief Fiscal Officer if any of those positions is funded, either directly or through indirect cost recovery, more than 50 percent with Head Start funds.

Section 653 of the Head Start Act prohibits the use of any federal funds, including Head Start grant funds, to pay any portion of the compensation of an individual employed by a Head Start agency if that individual's compensation exceeds the rate payable for Level II of the Executive Schedule.

Prior written approval must be obtained for the purchase of equipment and other capital expenditures as described in 45 C.F.R. § 75.439(a). Prior written approval must also be obtained under 45 C.F.R. § 75.439(b)(3) and 45 C.F.R. Part 1303 Subpart E – Facilities to use Head Start grant funds for the initial or ongoing purchase, construction and major renovation of facilities. No Head Start grant funds may be used toward the payment of one-time expenses, principal and interest for the acquisition, construction or major renovation of a facility without prior written approval of the Administration for Children and Families.

### DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS) ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF)

## ADMINISTRATION FOR CHILDREN AND FAMILIES, REGION VIII DISCRETIONARY PROGRAMS FINANCIAL REPORTING REQUIREMENTS

#### **Audits**

The Grantee is requested to send a courtesy copy of the audit with a copy of any management letters issued by the auditor to:

ACF Regional Grants Officer Administration for Children and Families / Head Start 1961 Stout Street Room 8-148 Denver, CO 80294

### **Audit Report Packages**

Audit Report packages are to be electronically submitted in accordance with both 2 C.F.R. 200.500 and 45 C.F.R. 75.500. As indicated in the Circular, the web address of the Federal clearinghouse currently designated by OMB is: <a href="http://harvester.census.gov/sac/">http://harvester.census.gov/sac/</a>

Auditors may obtain assistance regarding planning, conducting, or reporting on audits covering HHS funds or cognizance responsibilities from:

DHHS Office of Audit Services National External Audit Review Center 1100 Walnut St., Suite 850 Kansas City, MO 64106-2197 Telephone: (800) 732-0679 Hours: 8:00 AM – 4:00 PM Central

### Federal Financial Report (SF-425 Reports)

Federal Financial Report (FFR) SF-425 <u>Cash Transaction Reports</u> are due to the Division of Payment Management 30 days after the end of each quarter (March, June, September and December). Any questions or issues regarding the FFR FCTR SF-425 reports can be directed to the following:

DHHS Division of Payment Management 5600 Fishers Lane – 11 – 33 11<sup>th</sup> Floor, Head House Wing Rockville, MD 20857 Telephone: (877) 614-5533

Hours: 7:30 AM – 6:00 PM ET Email: PMSSupport@psc.gov

Electronic website access: www.dpm.psc.gov

FFR SF-425 Expenditure <u>Federal Financial Reports</u> (formerly SF-269) are to be submitted in the Payment Management System (PMS) per the semi-annual reporting schedule noted in the table below. Every grantee should have a PMS account to allow access to complete the SF-425. If your office needs user account assistance, please contact your PMS Representative as listed in the "Contact Us" section of PMS. This information will no longer be reported separately by hard copy, fax or email.

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Please note Box 12 of the Final report must include the following:

- o Total Amount of U.S. Department of Agriculture (USDA) Reimbursement: \$\_\_\_\_\_
- O Total Development and Administrative Expenditures: \$\_\_\_\_\_\_(federal and non-federal)
- o If an Unobligated balance of federal funds is being reported on line 'h,' the grantee must provide a breakdown of total federal expenditures for each 'CAN NO.' which appears in box 25, Financial Information, on the most recent Notice of Award for the budget period.

| Semi-Annual Reporting Deadlines |          |         |         |         |  |  |  |  |
|---------------------------------|----------|---------|---------|---------|--|--|--|--|
| Budge                           | t Period | FFR Due | FFR Due | FFR Due |  |  |  |  |
| Begin                           | End      | Date    | Date    | Date    |  |  |  |  |
| 1-Jan                           | 31-Dec   | 30-Jul  | 30-Jan  | 30-Apr  |  |  |  |  |
| 1-Feb                           | 31-Jan   | 30-Oct  | 30-Apr  | 30-Apr  |  |  |  |  |
| 1-Mar                           | 28-Feb   | 30-Oct  | 30-Apr  | 30-Jul  |  |  |  |  |
| 1-Apr                           | 31-Mar   | 30-Oct  | 30-Apr  | 30-Jul  |  |  |  |  |
| 1-May                           | 30-Apr   | 30-Jan  | 30-Jul  | 30-Jul  |  |  |  |  |
| 1-Jun                           | 31-May   | 30-Jan  | 30-Jul  | 30-Oct  |  |  |  |  |
| 1-Jul                           | 30-Jun   | 30-Jan  | 30-Jul  | 30-Oct  |  |  |  |  |
| 1-Aug                           | 31-Jul   | 30-Apr  | 30-Oct  | 30-Oct  |  |  |  |  |
| 1-Sep                           | 31-Aug   | 30-Apr  | 30-Oct  | 30-Jan  |  |  |  |  |
| 1-Oct                           | 30-Sep   | 30-Apr  | 30-Oct  | 30-Jan  |  |  |  |  |
| 1-Nov                           | 31-Oct   | 30-Jul  | 30-Jan  | 30-Jan  |  |  |  |  |
| 1-Dec                           | 31-Nov   | 30-Jul  | 30-Jan  | 30-Apr  |  |  |  |  |

For further information on updates to the SF-425 and SF-428 reporting process please refer to Program Instruction ACF-PI-17-04 at: <a href="https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-17-04">https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-17-04</a>

# Real Property Status Report (SF-429 Report) and Tangible Personal Property Report (SF-428 Report)

SF-429 Real Property Status Reports must be submitted annually on the same date that the Annual Federal Financial Report (SF-425) for the budget period is due. The report is now available for online data entry in GrantSolutions/Online Data Collection System. Every grantee should have a GrantSolutions account to allow access to complete the reports. If your office needs user account assistance, please contact the GrantSolutions Help Desk at <a href="help@grantsolutions.gov">help@grantsolutions.gov</a> or 866-577-0771. This information will no longer be reported separately by hard copy, fax or email. For information on the implementation of these reports please refer to Information Memorandum ACF-IM-HS-17-03 at: <a href="https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-17-03">https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-17-03</a>

## SF-428 Tangible Personal Property Reports

The SF-428 Tangible Personal Property Report and SF-428B, and if needed SF-428S, are due every five years not later than 90 days after the close of the five year project period. They are to be scanned and uploaded into the Grant Notes section of

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GrantSolutions. Every grantee should have a GrantSolutions account to allow access to upload the SF-428. If your office needs user account assistance, please contact the GrantSolutions help desk. This information will no longer be reported separately by hard copy, fax or email.

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