

Amendment No. 3 to Attachment No. HOPWA-CV
HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS, Supplemental HUD Contract No. CPD-20-05
Tarrant County Samaritan Housing, Inc.
July 1, 2020 through June 30, 2023

1. Scope of Work

The Tarrant County Samaritan Housing, Inc. accepts this Amendment and will revise the Work Plan to fulfill the Amendment's goals. Total funding, including this Amendment, is \$99,681.00. The following service categories change:

Original Budget			Revised Budget	
Service Categories	\$ Amount	be Served	\$ Amount	be Served
Administrative Costs	\$ 9,968.00	0	\$ 9,968.00	0
Short-Term Rent, Mortgage, and Utilities (STRMU)	\$ 40,713.00	4	\$ 85,013.00	10
Supportive Services	\$ 49,000.00	30	\$ 4,700.00	5

2. Special Provisions

HOPWA FY 20-23 (07/01/2020 - 06/30/2023)

Budget Line Item	Original Budget	Revised Budget
Personnel	\$ 46,444.00	\$ 4,700.00
Fringe	\$ 12,524.00	\$ -
Travel	\$ -	\$ -
Equipment	\$ -	\$ -
Supplies	\$ -	\$ -
Contractual	\$ -	\$ -
Other	<u>\$ 40,713.00</u>	<u>\$ 94,981.00</u>
Total HOPWA FY20-21 Budget	\$ 99,681.00	\$ 99,681.00

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SIGNED AND EXECUTED this _____ day of _____, 2022.

Tarrant County Samaritan Housing, Inc.

929 Hemphill St.

Fort Worth, TX 76104

Attn: Kim Robinson

By: Kim Robinson
Title: President & CEO
Date: April 26, 2022

**COUNTY OF TARRANT
STATE OF TEXAS**

B. Glen Whitley
County Judge

APPROVED AS TO FORM:

CERTIFICATION OF
AVAILABLE FUNDS: \$ _____

James Marvin Nichols
Criminal District Attorney's Office*

Tarrant County Auditor

*By law, the Criminal District Attorney's Office may only approve contracts for its clients. We reviewed this document as to form from our client's legal perspective. Other parties may not rely on this approval. Instead those parties should seek contract review from independent counsel.

Federal Award Identification Checklist
(Grants Awarded After 12/26/2014)

		Part A	Part B / State-R	State Services	HOPWA - CV
1.	Subrecipient Name	Tarrant County Samaritan Housing, Inc. (SAM)	Tarrant County Samaritan Housing, Inc. (SAM)	Tarrant County Samaritan Housing, Inc. (SAM)	Tarrant County Samaritan Housing, Inc. (SAM)
2.	Subrecipient DUNS Number	836578245	836578245	836578245	836578245
3.	Federal Award Identification Number (FAIN)	2 H89HA00047-26-00	Contract # 537-17-0161-00001	Contract # 537-18-0013-00001 (State Funds)	Contract # CPD-20-05
4.	Federal Award Date	Original Award: January 2021 (Subject to #2 CFR 200)	February 2021 (Subject to #2 CFR 200)	May 2021	June 2021
5.	Subaward Period of Performance Start and End Date	March 1, 2021 - February 28, 2022	April 1, 2021 - March 31, 2022	September 1, 2021 - August 31, 2022	July 1, 2020 - June 30, 2023
6.	Amount of Federal Funds Obligated by This Action	\$0	\$0	\$0	\$0
7.	Total Amount of Federal Funds Obligated to the Subrecipient	\$136,438	\$17,658	\$30,181	\$99,681
8.	Total Amount of the Federal Award	\$4,840,007	\$1,801,583	\$461,125	\$99,681
9.	Federal Award Project Description, as required by FFATA	HIV Emergency Relief Project Grants	Pass-through Grant from HRSA through DSHS for HIV & AIDS Services	N/A (State Funds)	Provide Supportive Services, Short Term Rent, Mortgage & Utility, and Administration.
10.	Name of Federal Awarding Agency	Health Resources & Service Administration (HRSA)	Pass-through from HRSA to Texas Department of State Health Services (DSHS)	N/A (State Funds)	Housing and Urban Development (HUD)
11.	Pass-Through Entity	Tarrant County	Tarrant County	Tarrant County	Tarrant County
12.	Contact Information for Awarding Official	Tarrant County 100 E. Weatherford Street Fort Worth, TX 76196-0001	Tarrant County 100 E. Weatherford Street Fort Worth, TX 76196-0001	Tarrant County 100 E. Weatherford Street Fort Worth, TX 76196-0001	Tarrant County 100 E. Weatherford Street Fort Worth, TX 76196-0001
13.	CFDA Number and Name	93.914 HIV Emergency Relief Project Grants	93.917 HIV Care Formula Grants	HIV/SRVS HIV/STD Prevention and Care Branch State Services	14.241 Housing Opportunities for Persons with AIDS
14.	Identification if the Award is R&D	N/A	N/A	N/A	N/A
15.	Indirect Cost Rate	N/A	N/A	N/A	N/A

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Tarrant County Samaritan Housing, Inc
Fort Worth, TX United States

Certificate Number:
2022-858545

Date Filed:
03/08/2022

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Tarrant County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

Ryan White A, B, SS, and SS-R
Services to individuals diagnosed with HIV/AIDS

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



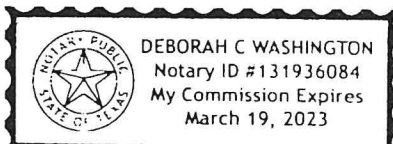
6 UNSWORN DECLARATION

My name is Kimberly Robinson, and my date of birth is 01/26/1969.

My address is 929 Hemphill Street, Fort Worth, TX, 76104, USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 9th day of March, 20 22.
(month) (year)



Kimberly Robinson
Signature of authorized agent of contracting business entity
(Declarant)