



Texas Department of Family and Protective Services

Commissioner
Stephanie Muth

July 7, 2023

Honorable Judge Tim O'Hare
100 E Weatherford St, Rm 506
Fort Worth, Texas 76196

**Re: FY 2024 Title IV-E County Legal Services Annual Review
Contract Number HHS000285100013**

Dear Honorable Judge Tim O'Hare:

The Texas Department of Family and Protective Services (DFPS) must comply with federal regulations by conducting an annual review of your Title IV-E contract which includes the following contract actions:

- Identifying the budget to be used for the new contract period. This may include obtaining and approving a revised budget or confirmation of the continued use of the currently approved budget; and
- Obtaining a current Form 4734 Federal Funding Accountability and Transparency Act (FFATA) Certification.

Attached are the documents required to be updated annually:

1. Budget Form 2030CLIVE
 - o Required to be returned if changes are needed to your currently approved budget. Complete and return the updated budget form and the associated budget narrative to support the projected expenditures.
 - o If a revised budget is not necessary, indicate in your return correspondence that the budget will remain as previously submitted.
If your county claims an indirect cost rate, return a copy of your agency's current approved indirect cost rate certification.

2. FFATA Certification Form 4734.

3. Internal Control Structure Questionnaire: DFPS must assess whether a contractor has accounting systems and procedures in place to reduce incidents of fiscal errors and/or reduce the opportunity for dishonesty. DFPS - Regional CPS Contracting Forms

- o Must include all attachments

701 W. 51ST ST. ♦ P.O. BOX 149030 ♦ AUSTIN, TEXAS 78714-9030 ♦ (512) 438-4800
An Equal Opportunity Employer and Provider

Please return the above required documents within 30 calendar days of receipt to Jessica.delgado@dfps.texas.gov

If you have any questions, do not hesitate to contact me via email at Jessica.delgado@dfps.texas.gov or by telephone at 469-669-1035

Sincerely,

A handwritten signature in black ink, appearing to read "Jessica Delgado". The signature is fluid and cursive, with the first name "Jessica" and last name "Delgado" clearly distinguishable.

Jessica Delgado
CPS Contract Manager

Enclosures:

- Budget for Title IV-E County Legal Services (Form 2030CLIVE)
- FFATA Certifications (Form 4734)
- Internal Control Structure Questionnaire (Form 9007CLIVE)



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 Unique Entity Identifier (generated by SAM.gov): DBH1UNN8U5J3

Enter the parent Unique Entity Identifier, if applicable: N/A

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

Yes ☐ No ☒ N/A ☐ (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?

Yes ☐ No ☒

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?

Yes ☒ No ☐

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?

Yes ☐ No ☐ N/A ☒ (if entity reports through some other means, state how:)

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 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.

Tim O'Hare		
Printed Name of Authorized Representative	Signature of Authorized Representative	
County Judge		
Title of Authorized Representative	Date	
Tarrant County	HHS000285100013	
Legal Name of Subrecipient	Agency Account ID Number	
Fort Worth, Tarrant	Texas	76196-0103
Principal Place of Performance (POP) <small>(City, County)</small>	State	9-Character Zip Code <small>(Zip +4)</small>

12th Congressional District

POP Congressional District

Budget for Title IV-E
County Legal Services Contract

CLIVE Summary

Please select your County and Budget Effective Date from drop down boxes below.

County: TARRANT COUNTYContract Number: HHS000285100013Budget Effective Date: 10/1/2023-9/30/2024

Cost Category	Estimated Total Expenses Allocable to Title IV-E	Total Anticipated Federal Reimbursemen	Total Anticipated County Match
A. Administration			
A.1. Direct Personnel Salaries	\$1,009,057.68	\$0.00	\$1,009,057.68
A.2. Direct Personnel Fringe Benefits	\$353,759.12	\$0.00	\$353,759.12
A.3. Direct Personnel Travel	\$7,000.00	\$0.00	\$7,000.00
A.4. Direct Materials and Supplies	\$0.00	\$0.00	\$0.00
A.5. Direct Equipment	\$0.00	\$0.00	\$0.00
A.6. Direct Other Costs	\$0.00	\$0.00	\$0.00
Total Administration	\$1,369,816.80	\$0.00	\$1,369,816.80
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. Indirect Costs (if applicable)			
Total Indirect Costs	\$1,009,057.68	\$255,594.31	\$0.00
Grand Total	\$1,625,411.11	\$0.00	\$1,625,411.11

*Estimated Federal Reimbursement for expenses based on Eligible Population Rate (EPR) during 2nd quarter of the preceding fiscal year. Actual reimbursement will be based on EPR in effect for the county during the month in which expenses were incurred.

0.00%

Indirect Cost Rate, if applicable (attach a copy of the approved Certificate of Indirect Costs):

25.33%

Contractor Certification

Signature

Date

Printed Name & Title



CONTRACT MANAGER'S CERTIFICATION

This form is to be used as a supplement to Form 4734, Federal Funding Accountability and Transparency (FFATA) Certification. A separate form should be completed and submitted with Form 4734 for each funding stream a grantee receives. Please select the submission type in regards to the Award No./FAIN.

SUBMISSION TYPE



Annual



Subsequent

CONTRACT MANAGER INFORMATION

Name Jessica Delgado

Division Purchased Client Services (CPS)

Region Select Your Region

Phone 469-669-1035

Email jessica.delgado@dfps.texas.gov

Date

CONTRACT INFORMATION

Agency Account ID Number 24736954

Contract Number HHS000285100013

Fiscal Year 2024

Federal Funding Agency US Department of Health & Human Services

Assistance Listing No. (CFDA) 93.658

Award No./FAIN 1901TXFOST

Contract Start Date 10/1/2018

Contract End Date 9/30/2025

FY Contract Amount \$294,598.83

SCOR Purpose DFPS Title IV-E (Legal)