



BOARD OF SUPERVISORS AGENDA ITEM REPORT
AWARDS / CONTRACTS / GRANTS

Award Contract Grant

Requested Board Meeting Date: 2/21/23

or Procurement Director Award:

* = Mandatory, information must be provided

***Contractor/Vendor Name/Grantor (DBA):**

City of Tucson

***Project Title/Description:**

U.S. Department of Housing and Urban Development (HUD) Continuum of Care Program - Supportive Services-Coordinated Entry Project Intergovernmental Agreement (IGA) between the City of Tucson and Pima County

***Purpose:**

Coordinated Entry is a City of Tucson project funded through the HUD Continuum of Care (CoC) grant program. The program reduces the number of individuals experiencing homelessness in Pima County. Funds will be used to provide outreach, job training, and employment activities for chronically homeless individuals. This amendment will provide additional funding for the period October 1, 2022 to September 30, 2023.

Indirect costs: 10% de minimis.

Attachment: FY22/23 IGA Contract Amendment No. 19274

***Procurement Method:**

Not applicable.

***Program Goals/Predicted Outcomes:**

The goal is to provide job training and employment opportunities for chronically homeless individuals to move into and retain stable housing.

***Public Benefit:**

The program reduces the number of individuals experiencing homelessness in Pima County.

***Metrics Available to Measure Performance:**

County will submit quarterly reports and performance measures reports to the City.

***Retroactive:**

Yes. County received the amendment from the City of Tucson on 1/12/23; however a signature page needed to be added and there were a few typos. The final version was received on 1/26/23. The next available Board of Supervisors' meeting to place the amendment on is 2/21/23. If the amendment is not approved, several chronically homeless individuals will not receive HUD CoC funds for supportive services.

GMI Approves
AF 1/30/23

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information

Document Type: Department Code: Contract Number (i.e., 15-123):
Commencement Date: Termination Date: Prior Contract Number (Synergen/CMS):
Expense Amount \$ Revenue Amount: \$

*Funding Source(s) required:

Funding from General Fund? Yes No If Yes \$ %

Contract is fully or partially funded with Federal Funds? Yes No

If Yes, is the Contract to a vendor or subrecipient?

Were insurance or indemnity clauses modified? Yes No

If Yes, attach Risk's approval.

Vendor is using a Social Security Number? Yes No

If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: Department Code: Contract Number (i.e., 15-123):
Amendment No.: AMS Version No.:
Commencement Date: New Termination Date:
Prior Contract No. (Synergen/CMS):

Expense Revenue Increase Decrease

Is there revenue included? Yes No If Yes \$

*Funding Source(s) required:

Funding from General Fund? Yes No If Yes \$ %

Grant/Amendment Information (for grants acceptance and awards)

Award Amendment

Document Type: GTAM Department Code: CR Grant Number (i.e., 15-123): 23-040
Commencement Date: 10/1/22 Termination Date: 9/30/23 Amendment Number: 2
Match Amount: \$ 11,025.00 Revenue Amount: \$ 44,100

*All Funding Source(s) required: US Department of Housing & Urban Development (HUD)

*Match funding from General Fund? Yes No If Yes \$ 11,025.00 % 25

*Match funding from other sources? Yes No If Yes \$ %

*Funding Source:

*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?

Federal government HUD funds are passed through from the City of Tucson

Contact: Jenifer Darland/Rise Hart

Department: Community & Workforce Development

Telephone: 724-7312/724-5723

Department Director Signature: Date: 1/27/23

Deputy County Administrator Signature: Date: 30 Jan 2023

County Administrator Signature: Date: 1/31/2023

CITY OF TUCSON HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT
 PLANNING AND COMMUNITY DEVELOPMENT DIVISION
 HUMAN SERVICES PY 2022 CONTINUUM OF CARE
 GRANT AMENDMENT

AGENCY: Pima County	PROJECT COORDINATOR: Mayra Gamez
PROJECT NAME: Tucson/Pima Coordinated Entry	ACCOUNT NO.: 076 9276 268POR 0000 COCS21
AWARD AMOUNT: \$44,100	CONTRACT NO.: 19274
FUNDING PROGRAM: Continuum of Care	CFDA NO.: 14.267

Performance Period 10/01/2022 – 09/30/2023 SAM Unique Entity ID: Click or tap here to enter text.	
Research or Development: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Federal Award ID No.: AZ0210L9T012102	Federal Award Date: 06/16/2022
Match Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Match Amount: \$11,025	
Indirect Cost Rate: <input checked="" type="checkbox"/> Applied <input type="checkbox"/> Not Applied NICR: <input type="checkbox"/> _____ % De Minimis: <input checked="" type="checkbox"/> 10%	
Federally Negotiated Rate Certification Period: N/A	
De Minimis Rate Certification Date: 9/26/2022	
Determination: <input checked="" type="checkbox"/> Subrecipient <input type="checkbox"/> Contractor	

HUMAN SERVICES GRANT AMENDMENT DOCUMENTS

The following list constitutes the Contract Documents incorporated as a part of this Amendment:

- Grant Amendment
- Entire Amendment
- Exhibit B – Indirect Cost Recovery Affidavit
- Exhibit C – Project Budget
- Exhibit D – Payment Request Form
- Exhibit E – DHUD Income Limits
- Exhibit F – Equal Employment Opportunity Commission (EEOC) Employment Data Form
- Exhibit G – Performance Measures and Quarterly Reporting
- Subrecipient Billing Worksheet
- Applicable Match Commitment Letter
- Subcontractor Determination

GRANT AMENDMENT

THIS GRANT AMENDMENT is made and entered into by and between **The City of Tucson**, a municipal corporation of the State of Arizona, hereinafter referred to as the “**City**,” and Pima County.

WHEREAS, the City of Tucson and Pima County entered into Agreement #19039 for administration of the Tucson/Pima Coordinated Entry effective October 1, 2021, and

WHEREAS, the aforementioned Agreement permits the City of Tucson and Pima County to extend the Agreement subject to available funds and mutual amendment, and

WHEREAS, the City of Tucson received \$372,595 through (AZ0210L9T012102) from the U.S. Department of Housing and Urban Development to administer Continuum of Care Grant funds; and

WHEREAS, the City has determined that the activities and proposed costs of Agency meet CoC eligibility requirements as defined in 24 CFR 578.1-109, and

WHEREAS, the City of Tucson and Pima County are desirous of extending Agreement #19039 to maintain Agency participation as a project subrecipient through September 30, 2023;

NOW THEREFORE, the parties agree to the following:

TERMS AND CONDITIONS: All terms and conditions as stated and approved in the original grant agreement shall be applicable to this AMENDMENT except as follows:

1. The performance period shall be extended until September 30, 2023.
2. The Agreement #19039 shall be amended to Contract Number 19274
3. Funding for eligible and pre-approved costs defined in original agreement shall be reimbursable using funds awarded to the City of Tucson by the U.S. Department of Housing and Urban Development through the extended period of Grant #AZ0210L9T012102 (CFDA #14.267).
4. Each Reimbursement Request must be submitted to City by the 20th calendar day of the month following the month in which the expenditures were made. At least a quarter of the Subaward Amount should be requested for payment by the 20th calendar day following the end of each quarter during the term of this Amendment unless the Scope of Work reflects a different timeline. In the event that the 20th calendar day falls on a weekend or City holiday, Agency will submit the reimbursement request on or before the previous business day. The final Reimbursement Request must be submitted by the end of the fiscal year or the end of the Term of this Amendment, whichever is earlier.

11/20/22	12/18/22	1/20/23	2/20/23	3/20/23	4/20/23
5/20/23	6/9/23	7/9/23	8/19/23	9/20/23	10/20/23
City of Tucson—End of Fiscal Year					

GRANT ACKNOWLEDGEMENT: Agency shall acknowledge the City's financial support of the Agency's services as provided through this Amendment and shall include the City's logo on materials that market, announce or describe the programs and services that are supported by the City's financial participation.

EXPENDITURE DEADLINES: Agency shall submit eligible invoices demonstrating expenditure of 25% of awarded funds within the first quarter of the performance period, 50% of awarded funds within the second quarter of the performance period, 75% of awarded funds within the third quarter of the performance period, and 100% of awarded funds by the end of the performance period. Failure to meet expenditure thresholds as established may result in the recapture of unexpended funds by the City of Tucson at its sole discretion.

25% 12/30/2022	50% 3/30/2023	75% 6/30/2023	100% 9/30/2023
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CITY OF TUCSON PROJECT COORDINATOR for this Amendment is:

Name: Mayra Gamez Phone Number: (520) 837-5023

ENTIRE AMENDMENT

This document constitutes the entire amendment between the parties pertaining to the subject matter it addresses, and supersedes all prior or contemporaneous agreements and understandings, oral or written. No verbal amendments or conversations with any representative, agent, or employee of City prior to or after the execution of this Amendment will affect or modify any of the terms or conditions in any documents comprising this Amendment. Any such verbal amendments are unofficial and in no way binding upon City.

SIGNATURE PAGE TO FOLLOW

IN WITNESS WHEREOF, the parties hereto have executed this Amendment:

City of Tucson

Enter Agency Name

E-SIGNED by Jason Thorpe
on 2022-10-28 20:35:54 GMT

E-SIGNED by Daniel Sullivan
on 2022-11-02 18:27:05 GMT

Reviewed and Approved by
Jason Thorpe, Housing and Community
Development Department Administrator, for the
City of Tucson, and not Personally
Date: October 28, 2022

Executed by Authorized Signatory (signature)
and not Personally

Daniel Sullivan

E-SIGNED by Jennifer Bonham
on 2022-10-28 20:59:16 GMT

Daniel Sullivan, Director (typed/printed)
and not Personally

Approved as to from
City Attorney's Office and not Personally

Date: November 02, 2022

Date: October 28, 2022

Countersigned for the
City Clerk and not Personally.

Date: 11/3/22

PIMA COUNTY

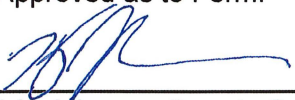
Adelita Grijalva
Chair, Board of Supervisors

Date

ATTEST

Clerk, Board of Supervisors

Approved as to Form:


Kyle Johnson, Deputy County Attorney

**CITY OF TUCSON – PY22 HUMAN SERVICES EXHIBIT B
INDIRECT COST RECOVERY AFFIDAVIT**

Funding Program: Continuum of Care
Organization Name: Pima County
Project Name: SSO-Coordinated Entry

SECTION A: INDIRECT COSTS TO BE RECOVERED THROUGH PROJECT

Select only one option and enter the rate to be charged under this agreement, if applicable.

Organization has a current federally negotiated indirect cost rate agreement and intends to charge the full authorized amount under this agreement.

Currently Approved Indirect Cost Rate:

Organization has a current federally negotiated indirect cost rate agreement and intends to charge a lesser indirect cost rate under this agreement. The proposed rate may not exceed the federally negotiated rate and is binding for the duration of the project agreement.

Reduced Rate to be Charged Under this Agreement:

Organization does not have a current federally negotiated indirect cost rate agreement and intends to charge the full de minimis indirect cost rate under this agreement (10% of modified total direct costs).

Organization does not have a current federally negotiated indirect cost rate agreement and intends to charge less than the full de minimis indirect cost rate under this agreement. The proposed rate may not exceed the de 10% de minimis rate and is binding for the duration of the project agreement.

Reduced Rate to be Charged Under this Agreement:

Organization does not have a current federally negotiated indirect cost rate agreement and is ineligible to recover indirect costs using the de minimis indirect cost rate. Organization will not charge indirect costs to this agreement.

* Per 2 CFR 200.414(f), state and local government departments or agency units that receive more than \$35 million in direct federal funding are ineligible to use the de minimis rate.

Organization declines to recover indirect costs under this agreement even if it possesses a federally negotiated indirect cost rate agreement or is eligible to use the 10% de minimis rate. This selection is binding for the duration of the project agreement and the organization will not be reimbursed for indirect costs.

SECTION B: FEDERALLY NEGOTIATED RATE CERTIFICATION

By signing this affidavit, organizations which elected to recover indirect costs using the de minimis rate above, including organizations which elected to recover less than the approved rate identified in the organization's federally negotiated indirect cost rate agreement, certify the following:

1. The federally negotiated indirect cost rate agreement provided is current and duly authorized by the organization's federal cognizant agency.
2. The indirect cost base does not include any costs that are not eligible for reimbursement under federal awards.

3. The indirect cost base does not include significant expenses that will not benefit this program equitably to other programs. If a considerable portion of the indirect cost base (10% or more of indirect cost base) reflects indirect costs that will not benefit this project, a reduced rate must be used that removes those costs (e.g., if 15% of indirect cost base is associated with management of electronic health records not required for this project, those costs must be removed to calculate a reduced indirect cost rate).
4. Indirect cost payments will reduce to the de minimis rate immediately if a new indirect cost agreement authorizing a continuing provisional or final indirect cost rate is not received prior to the expiration of the indirect cost rate agreement attached to this affidavit.

SECTION C: DE MINIMIS RATE CERTIFICATION

By signing this affidavit, organizations which elected to recover indirect costs using the de minimis rate above, including organizations which elected to recover less than the allowable 10% of modified total direct costs, certify that the organization is eligible to use the 10% de minimis rate for indirect cost reimbursement and certifies that it meets each of the following eligibility criteria:

1. The subrecipient does not have a current provisional or final Federally-negotiated indirect cost rate for any federal awards.
2. The subrecipient has received less than \$35 million in direct federal funding for the fiscal year requested.
3. The de minimis rate approved will be applied to Modified Total Direct Cost (MTDC). This base includes all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs.
4. The project costs will be consistently charged as either indirect or direct and will not be double charged or inconsistently charged as both.

The proper use and application of the de Minimis rate is the responsibility of the subrecipient and subject to monitoring by the City of Tucson and/or the awarding federal agency. If financial monitoring results in the determination of non-compliance with 2 CFR 200 and/or other applicable federal guidelines, funds must be returned to the City of Tucson.

SECTION D: CERTIFICATION

By signing this document, I certify that the information provided above is true and complete. I also certify that I am authorized to submit this document and enter into the above binding commitments for the organization.

SUBMITTED BY AUTHORIZED ORGANIZATIONAL REPRESENTATIVE:

Signature: _____
E-SIGNED by Daniel Sullivan on 2022-11-02 18:27:21 GMT

Printed Name: Daniel Sullivan

Title: Director

**CITY OF TUCSON - CONTINUUM OF CARE
EXHIBIT C - PROJECT BUDGET WORKSHEET**

Enter budget figures into canary shaded (pale yellow) cells. No other changes may be made to this document. Project budget must be supported by detailed budget justification which describes the specific costs to be paid in each eligible budget item, calculation methodologies, and quantity detail sufficient for reviewers to determine budget appropriateness and eligibility. Indirect costs may only be charged against direct costs which are identified within the organization's direct cost base included in the negotiated indirect cost rate agreement or, if the organization is using the de minimis rate, costs included in the modified total direct cost base defined in 2 CFR 200.68.

**Pima County
SSO-Coordinated Entry**

ASSESSMENT OF SERVICES NEEDS	DIRECT	INDIRECT	TOTAL
Staff Wages and Employee-Related Expenses	\$36,234.00	\$4,026.00	\$40,260.00
Transportation	\$1,566.00	\$174.00	\$1,740.00
Assessment of Services Needs Subtotal	\$37,800.00	\$4,200.00	\$42,000.00

ADMINISTRATION	DIRECT	INDIRECT	TOTAL
Administrative Cost	\$1,890.00	\$210.00	\$2,100.00
Administration Costs Subtotal	\$1,890.00	\$210.00	\$2,100.00

	DIRECT	INDIRECT	TOTAL
TOTAL PROJECT BUDGET	\$39,690.00	\$4,410.00	\$44,100.00
Match			\$11,025.00
TOTAL PROJECT BUDGET + MATCH			\$55,125.00
Total Number of Households to be Served by Project (Must match proposal narrative)			
Project Cost / Household Served	#DIV/0!		

Send original signed request and
COPY OF GENERAL LEDGER TO:
Mayra Gamez, Project Coordinator
Mayra.gamez@tucsonaz.gov
CoC Collaborative Applicant Section
City of Tucson, HCDD/PCD
P.O. Box 27210, Tucson, AZ 85726-7210

NOTE: IF PAYMENT REQUEST INCLUDES
ANY CHARGES FOR PERSONNEL AND/OR
ERE THEN COPIES OF TIME WORKED
RECORDS MUST BE PROVIDED

EXHIBIT D

**CITY OF TUCSON HUMAN SERVICES
FY 2022 PROJECT PAYMENT REQUEST**

Contract Number: 19274

Total Contract Amount: \$44,100

Vendor Number: Click or tap here to enter text.

Invoice Number: Click or tap here to enter text.

Agency Name: Pima County

Project Name: Tucson/Pima County Coordinated Entry

Period for Reimbursement: Click or tap to enter a date. to Click or tap to enter a date.

- A. Total Award Amount** **\$ 44,100**
- B. Prior Expenditures** Click or tap here to enter text.
- C. Total Amount Requested for this Payment** Click or tap here to enter text.
- D. Total Expenditures Plus New Costs Incurred (B plus C)** Click or tap here to enter text.
- E. Balance After Requests (A minus D)** Click or tap here to enter text.

Prepared By: Click or tap here to enter text
First and Last Name
enter text.

Phone Number: Click or tap here to

Approved By: Click or tap here to enter text
First and Last Name

Date: Click or tap to enter a date

FOR CITY OF TUCSON USE ONLY:

Account Number(s)	Amount
Total Amount Approved	

Approved By: _____
First and Last Name

Date: _____

PAYMENT PROCESSTING INSTRUCTIONS: Payment Requests must include Exhibit D Payment Request Form, Subrecipient Billing Worksheet, Agency Invoice, Agency General Ledger of Itemized Direct Costs and Indirect Cost of Eligible Activities, Time and Effort Reporting (less accruals not yet paid), and any relevant/necessary backup documentation for direct costs allocated to the grant during the reimbursement period. Failure to submit timely quarterly performance measures reports, may delay the processing of payment requests.

**EXHIBIT E
CITY OF TUCSON
DHUD INCOME LIMITS
(Effective 6/15/2022)**

Agencies are required to use current income limits in determining client eligibility. They are revised by the Department of Housing and Urban Development (HUD) periodically; agencies are advised to check the HUD web site regularly at: <http://www.huduser.org/portal/datasets/il.html> for updates.

<i>Number of Persons In Household</i>	<i><u>Extremely Low Income 30 % Median</u></i>	<i><u>Very Low Income 50% Median</u></i>	<i><u>Low Income 80% Median</u></i>
1 Person Family	\$16,100	\$26,850	\$42,950
2 Person Family	\$18,400	\$30,700	\$49,100
3 Person Family	\$20,700	\$34,550	\$55,250
4 Person Family	\$23,000	\$38,350	\$61,350
5 Person Family	\$24,850	\$41,450	\$66,300
6 Person Family	\$26,700	\$44,500	\$71,200
7 Person Family	\$28,550	\$47,600	\$76,100
8 Person Family	\$30,400	\$50,650	\$81,000

This table, of the most recent client eligibility income limits set by DHUD, is to be used when determining client eligibility for all City of Tucson CDBG-funded projects.

Demographic information is submitted at the end of the City's fiscal year, June 30, via the End of Year Report contained as an exhibit to agency agreements. Agencies are not required to submit individual client demographic information quarterly.

EXHIBIT G

CITY OF TUCSON HUMAN SERVICES PY 2022 QUARTERLY PERFORMANCE REPORTING

Agency Name: Pima County

Project Name: Tucson/Pima Coordinated Entry

Contract No.: 19274

Funding Source: Continuum of Care (CoC)

Due Dates: Q1: 01/15/2022 Q2: 04/15/2023 Q3: 07/15/2023 Q4: 10/15/2023

Per the City of Tucson Housing & Community Development Department all awards funded under the People, Communities, and Homes Investment Plan (P-CHIP) are required to participate in the implemented collective impact measurement strategy.

All organizations receiving Community Development Block Grant, Emergency Solutions Grant, Housing Opportunities for Persons with AIDS Program, and General Fund grant awards from the City of Tucson are required to submit quarterly performance reports within fifteen (15) days of the end of the quarter being reported. Failure to submit timely quarterly performance reports, may delay the processing of payment requests.

For organizations funded outside of the P-CHIP process, quarterly performance must be reported using the attached approved Quarterly Report Form provided by the assigned Project Coordinator.

For organizations funded through the P-CHIP process, quarterly performance must be reported online, via the Quarterly P-CHIP Reporting Tool.

View the Step-by-Step Video Tutorial [HERE](#)

Complete the Online Quarterly P-CHIP Report [HERE](#)

All reporting includes two (2) main components:

1. Data Reporting—

Provides data collected in the HMIS reflective of the priorities, goals, outputs, and outcomes indicated in the grant agreement and scope of work.

2. Narrative Reporting—

The narrative report provides an opportunity to share information regarding successes, challenges, and data issues that are pertinent to monitoring and performance evaluation.

P-CHIP reporting includes three (3) additional components:

1. Project Participant Demographic Reporting—

The reporting categories are aligned to meet Federal reporting requirements issued by the U.S. Department of Housing and Urban Development. The City of Tucson recognizes that these categories do not always accurately reflect the identities of individuals being served and encourages grant recipients to honor the actual identities of persons served in all interactions while asking them to self-identify within these Federally designated categories only for the purpose of mandated HUD reporting.

2. Project/Participant Success Story—

Each quarterly performance report must include one story/narrative that highlights the success of the project and its participants. Stories should highlight specific activities and events with quotes from project participants and/or highlights of individual participant success that reflect project's impact as it relates to individuals and families served.

3. Project Impact Photo—

Each quarterly performance report must include one image that corresponds to the project/participant success story. Organizations are not required to provide images of the specific individual or family served rather, the submitted photograph should visually illustrate the impact of the project. Please provide image release if the photo includes the face of an adult or child.

Submit within 15 days of quarter to:

Mayra Gamez, Project Coordinator
 Mayra.gamez@tucsonaz.gov
 City of Tucson, Housing and Community Development Department
 310 N. Commerce Park Loop – Santa Rita Building
 Tucson, AZ 85745

**EXHIBIT G
 CITY OF TUCSON HUMAN SERVICES
 PY 2023 QUARTERLY REPORT/PERFORMANCE MEASURES REPORT**

Agency Name: Pima County Project Name: Tucson/Pima County Coordinated Entry Contract Number: 19274 Quarterly Reporting Period: <input type="checkbox"/> 1 st Quarter, Oct 1 -Dec 31, 2022 <input type="checkbox"/> 2 nd Quarter, Jan 1 – Mar 30, 2023 <input type="checkbox"/> 3 rd Quarter, Apr 1 – Jun 30, 2023 <input type="checkbox"/> 4 th Quarter, Jul 1 – Sept 30, 2023			
Projected Annual Performance Outputs and Outcomes	Unduplicated Number and/or Percent Served During Quarter Reported	Cumulative Year-to-Date Number and/or Percent	Narrative: 1. Provide additional information relating to the status/progress of your project 2. Explain significant variance in outcomes compared to what was predicted 3. Describe outstanding project achievements 4. If program is not yet delivering service, describe actual status of project
Outputs (unduplicated number of clients served in Coordinated Entry): Provide services for 20 hours/week <i>Indicate the number of participants served in the 20 hours per week funded through this grant. Partial assessments (Triage and Diversion for participants who are not eligible for housing or Homelessness Prevention assistance) and updates to existing Coordinated Entry Assessments should also be included in this number.</i>			
Outcome (per Human Services Subcategory): 75% of participants will have immediate housing needs addressed through coordinated referral to emergency shelter, navigation, diversion, and/or personal resources <i>Indicate the number and percent of participants served whose immediate needs were met.</i>			
Outputs (unduplicated number of clients served in Coordinated Entry): Provide not less than 15 assessments per week <i>Indicate the number of participants for which coordinated entry assessments were completed per week. Partial assessments (Triage and Diversion for participants who</i>			

Submit within 15 days of quarter to:

Mayra Gamez, Project Coordinator

Mayra.gamez@tucsonaz.gov

City of Tucson, Housing and Community Development Department

310 N. Commerce Park Loop – Santa Rita Building

Tucson, AZ 85745

are not eligible for housing or Homelessness Prevention assistance) and updates to existing Coordinated Entry Assessments should also be included in this number.			
Outcome (per Human Services Subcategory): 80% of participants will receive referral to mainstream benefits and social services for which they are eligible <i>Indicate the number and percentage of participants who received referral to mainstream benefits and social services.</i>			
Outputs (unduplicated number of clients served in Coordinated Entry eligible for housing assistance or homelessness prevention assistance):			
Outcome (per Human Services Subcategory): 100% of referrals to the TPCH Coordinated Entry system will be actionable (diversion/triage screening complete and eligible for services) <i>Indicate the number and percentage of participants eligible for housing assistance or homelessness prevention assistance who received actionable referrals to the Coordinated Entry System</i>			
GRANT EXPENDITURE			
Output: The agency will submit Exhibit D Payment Request by the 20 th of each month <i>Indicate the number payment requests submitted by the due date in the quarter.</i>			
Outcome: The agency will fully expend awarded funds by the performance period end date. <i>Indicate the dollar amount and percent of the award amount expended in the quarter.</i>			

Failure to submit timely quarterly performance reports, may delay the processing of payment requests.

PY22 SUPPORTIVE SERVICES ONLY: COORDINATED ENTRY GRANT
SUBRECIPIENT MONTHLY BILLING BACKUP SUMMARY (October 2022 - September 2023)
SUBRECIPIENT ORGANIZATION: PIMA COUNTY

	BUDGET	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	TOTAL EXPENDED	BALANCE REMAINING
Payments to Organizations (Direct)															
Staff Wages and Employee-Related Expenses	\$36,234.00													\$0.00	\$36,234.00
Staff Wages and Employee-Related Expenses (Indirect)	\$4,026.00													\$0.00	\$4,026.00
Transportation	\$1,566.00													\$0.00	\$1,566.00
Transportation (Indirect)	\$174.00													\$0.00	\$174.00
Subtotal	\$42,000.00	\$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	\$42,000.00
Payments to Organizations (Admin)															
Administrative Cost	\$1,890.00													\$0.00	\$1,890.00
Administrative Cost (Indirect)	\$210.00													\$0.00	\$210.00
Subtotal	\$2,100.00	\$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	\$2,100.00
TOTAL	\$44,100.00	\$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	\$44,100.00
Match	\$11,025.00													\$0.00	\$11,025.00
TOTAL + MATCH	\$55,125.00	\$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	\$55,125.00

*This form must be completed monthly and submitted along with Exhibit D - Payment Request and all accompanying backup.



PIMA COUNTY
COMMUNITY & WORKFORCE
DEVELOPMENT

October 19, 2022

Re: FY 2022 Match Commitment for Tucson/Pima Coordinated Entry

To Whom It May Concern:

Pima County commits **\$11,025.00** in match toward the Fiscal Year 2022 application for Continuum of Care funds for Tucson/Pima Coordinated Entry Grant. Matching funds will be made available for a period of one year beginning October 1, 2022.

Match Source: Pima County General Fund

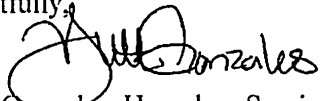
Matching Funds Committed: \$11,025.00

Type of Match: Cash

Source: Government

Use: Staff/personnel costs, supportive facility costs, utilities and equipment

Respectfully,



Yvette Gonzales, Homeless Services Program Manager

Pima County Community & Workforce Development

520-724-7310

Yvette.gonzales@pima.gov

cc: Daniel Sullivan, Director, Community & Workforce Development
Jenifer Darland, Deputy Director, Community & Workforce Development
Andrew Flagg, Deputy Director, Community & Workforce Development

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Sullivan Jackson Employment Center

101 E. 26th St. Tucson, Arizona 85713 • Phone: 520.724.7300 • Fax: 520.724.7310

RECIPIENT CHECKLIST FOR DETERMINING IF THE ENTITY RECEIVING FUNDS HAS A CONTRACTOR OR SUBRECIPIENT RELATIONSHIP

This document is intended to help a recipient of federal funds make a judgment as to whether each agreement it makes, for the disbursement of federal program funds, casts the entity receiving the funds in the role of a subrecipient or a contractor. Based on 2 CFR Chapter I, Chapter II, Part 200 et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), issued by the U.S. Office of Management and Budget (OMB) on December 26, 2013, and effective for non-federal entities on December 26, 2014, the following information is intended for use by all non-federal entities.

Important Terms:

Recipient: A non-federal entity that receives a federal award directly from a federal awarding agency to carry out an activity under a federal program. The term recipient does not include subrecipients. (See 2 CFR 200.86 of the Uniform Guidance.)

Subrecipient: A non-federal entity that receives a subaward for the purpose of carrying out part of a federal award. The subaward creates a federal assistance relationship with the subrecipient. (See 2 CFR 200.93 & .330 (a) of the Uniform Guidance.)

Contractor: A non-federal entity that receives a contract for the purpose of providing goods and services for the awarding non-federal entity's own use. The contract creates a procurement relationship with the contractor. The Uniform Guidance replaced the term "Vendor" with "Contractor." (See 2 CFR 200.22 & .330 (b) of the Uniform Guidance.)

Instructions: The "Characteristics" column in this checklist is based on language in the Uniform Guidance. The column lists characteristics that support the classification of a non-federal entity as a subrecipient or contractor. Since all of the characteristics listed may not be present in all cases, the Uniform Guidance recognizes that the recipient "...must use judgment in classifying each agreement as a subaward or a procurement contract." (2 CFR 200.330 (c).) In the "Explanations" column, AGA provides additional information to assist in answering the questions under "Characteristics." Answer each question by checking "yes" or "no" where indicated. Based on responses to the questions, a key provided at the end of each section will help in making a judgment as to whether a subrecipient or contractor relationship exists. White space is provided in between the "Characteristics" column and the "Explanation" column so that users can tailor this checklist to accommodate the unique aspects of various programs or jurisdictions.

Note: One check in a subrecipient box does not necessarily mean the entity is a subrecipient. A judgment should be based on the totality of responses.

Office City of Tucson- Housing and Community Development

Entity receiving funds Pima County

Funding Source(s) HUD FY21 COC- Supportive Services Only Coordinated Entry

Notes:



CHARACTERISTICS

Nature of Award

200.330 a. 1 Determines who is eligible to receive what Federal assistance;

a. Does the entity determine who is eligible to participate in the federal program?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

200.330 a.3 Has responsibility for programmatic decision making;

a. Does the entity have the ability to make decisions about how services will be delivered to participants, in accordance with federal programmatic requirements?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

OR

200.330 b.4 Provides goods or services that are ancillary to the operation of the Federal program;

b. Does the entity provide goods or services for the recipient's own use?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

b. Does the entity provide services designated by the recipient to serve the recipient's participants without regard to specific federal programmatic requirements?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you selected "yes" to EITHER item a, this is an indicator of a subrecipient relationship.
If you selected "yes" to EITHER item b, this is an indicator of a contractor relationship.

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If the entity determines whether a participant meets a federal program's eligibility requirements for assistance, it is most likely a subrecipient.

A contractor may provide services to clients in a program after eligibility has been determined by the recipient.

If the entity has authority to make decisions regarding the delivery of service, operations, or types of assistance provided within the terms of the agreement, it is typically a subrecipient.

If the entity provides goods or services directly to the recipient or to program participants at the direction of the recipient and does not make programmatic decisions or adhere to program requirements, it is typically a contractor.

Nature of Award

200.330 a. 2 Has its performance measured in relation to whether objectives of a federal program were met;

a. Are the scope of work (or portion, if applicable) and terms and conditions of the agreement the same for the entity as they are for the recipient that received the federal funds?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

a. Is the entity carrying out completion of the goal of the grant (or part, if applicable) as stated in the federal award?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

OR

200.330 b.5 Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons.

b. Does the recipient develop the scope of work and terms and conditions of the agreement to meet the recipient's needs?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you selected "yes" to EITHER item a, this is an indicator of a subrecipient relationship.
If you selected "yes" to item b, this is an indicator of a contractor relationship.

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If the entity is providing a service for the recipient to meet the goal of the grant, it is a contractor; if the entity is providing a service that carries out a goal within the scope of the grant, it is a subrecipient. When a grant program contains multiple goals, it is possible for the recipient to complete part of the goals and for the entity to perform another part.

If the scope of the agreement is per the federal program terms/guidance, the entity is a subrecipient. A subrecipient may also provide programmatic or progress reports to ensure compliance with federal program requirements.

Conversely, if the scope of the agreement is per the recipient's terms and not federal program guidance, and if the recipient's oversight is governed only by the contract terms and conditions, it is a contractor.

200.330 a.4 Is responsible for adherence to applicable Federal program requirements specified in the Federal award;

a. Funding to the entity depends on the entity's ability to best meet the objectives of the award. Although performance is measured against federal award objectives, the entity assumes little risk if the objectives are not met.

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

OR

200.330 b.5 Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons.

b. The entity assumes financial risk if they fail to deliver the goods or services agreed upon.

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you selected "yes" to item a, this is an indicator of a subrecipient relationship.
If you selected "yes" to item b, this is an indicator of a contractor relationship.

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If the funding is given to the entity with a purpose of completing the goal of the grant, the recipient will be required to ensure the entity adheres to federal grant program guidance. The recipient will also be required to monitor the activities of the entity per Uniform Guidance section 200.331. The entity assumes little risk should federal grant guidance not be met. The risk falls with the recipient.

If the recipient directs specific activities to be completed by the entity, by providing goods or services, the risk falls on the entity to deliver, per the agreement terms. In this case, the entity would not be required to adhere to the federal grant program requirements, just the terms and conditions in the agreement with the recipient.

Criteria for Selection

200.330 a.5 In accordance with its agreement, uses the Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity.

a. Does the entity demonstrate a financial or public need for funding to carry out a project or provide a service?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

a. Will the entity be contributing match or other non-Federal funding in support of the award?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

a. Will the entity be reimbursed for only actual costs incurred?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

OR

200.330 b.3 Normally operates in a competitive environment;

b. Were procurement policies applied in the selection of the entity?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

b. Was the entity's proposed price a factor in the selection process?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

b. Will the entity derive a profit from the agreement?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you selected "yes" to **ANY** item a, this is an indicator of a subrecipient relationship.
If you selected "yes" to **ANY** item b, this is an indicator of a contractor relationship.

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If the entity was chosen because it has the best widgets or service for the price, it has a contractor relationship with the recipient. Typically, a procurement method is followed, such as a competitive bid or RFP process. In this type of agreement, the entity usually makes a profit by delivering this good or service to the recipient. Payments to contractors are typically made based on contract terms.

Conversely, if the entity was chosen because it was already providing a service within the guidelines of the grant program and wants to partner with the recipient to expand the delivery or assist in meeting the goal of the grant, it may be a subrecipient. Typically, the entity may not make a profit and may provide its own non-federal funding as match or cost sharing. The entity may have been chosen through an application process or an announcement of funding, as opposed to the procurement process described above. Payment to a subrecipient is generally based on actual expenses unless awarded on a fixed amount subaward (2 CFR 200.332). It is typical of subrecipients to submit budgets, financial reports, or copies of invoices to the recipient, to document activity.

200.330 b.1 Provides the goods and services within normal business operations;

b. Is the entity's normal business to provide the goods or services being purchased in the agreement?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

200.330 b.2 Provides similar goods or services to many different purchasers;

b. Does the entity provide the same goods or services to other organizations?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If a federal program provides funding to modify public buildings for handicapped accessibility and the recipient provides funds to an entity to update the entity's building, per the terms of the award, then a subrecipient relationship exists.

Conversely, if the recipient hires an entity to update their own building to be handicapped accessible, then a contractor relationship exists.

If you selected "no" to **EITHER** item, it is an indicator of a subrecipient relationship. If you selected "yes" to **BOTH** items, it is an indicator of a contractor relationship.

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Determination

Final Determination

Subrecipient	Contractor
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Review all the entries and make an overall determination of the relationship. **Check the appropriate box in this section.**

Determined by Karen Fogas
(enter name of person initially making decision)

9/23/22
(date)

Approved by _____
(enter name of person reviewing)

(date)

Based on the relationship determined above, see additional guidance on requirements governing agreements. Section 200.331 - "Requirements for pass-through entities," for subrecipient agreements, Section 200.317 through 200.326 - "Procurement Standards," for contractor agreements.
