



**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	2017	2018	2019	2020	2021
Capital Expenditures					
Operating Costs	4,455,578	3,182,555			
External Revenue	(4,455,578)	(3,182,555)			
Program Income					
In-Kind Match (County)					
<b>NET FISCAL IMPACT</b>	-0-	-0-			

# ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included In Current Budget? Yes X No \_\_\_\_\_

Budget Account No.:

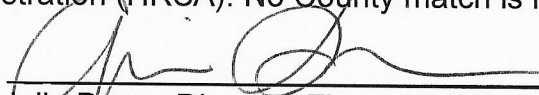
Fund 1010 Dept 142 Unit Varies Object Varies Program Code Varies

Program Period GY17

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**


Funding source is the Department of Health and Human Services, Health Resources and Service Administration (HRSA). No County match is required.

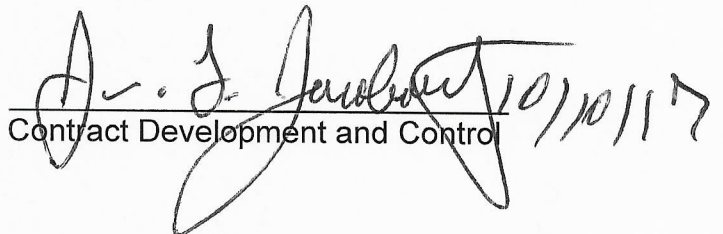
**C. Departmental Fiscal Review:**

  
Julie Dowe, Director, Financial & Support Svcs

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development and Control Comments:**

 10/5/17  
OFMB AR ✓ 10/2 9B 10/4

 10/10/17  
Contract Development and Control

**B. Legal Sufficiency:**

 10-10-17  
Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_  
Department Director

**This summary is not to be used as a basis for payment.**

<b>1. DATE ISSUED:</b> 06/16/2017		<b>2. PROGRAM CFDA:</b> 93.914		 <p><b>NOTICE OF AWARD</b>  <b>AUTHORIZATION (Legislation/Regulation)</b>  Public Health Service Act, Title XXVI, Section 2603b  Public Health Service Act Section 2603(b), 42 U.S.C 300ff-13(b)  FY 2007 Title XXVI of the PHS Act, 42 U.S.C. section 300-ff-11 et seq (as amended), Part A  Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)  Public Health Service Act, Sections 2601-2610  Public Health Service Act, Sections 2601-2610 (42 USC 300ff-11 – 300ff-20), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)  Public Health Service Act, Sections 2601-2610, and 2693(b)(2)(A) (42 USC 300ff-11 – 300ff-20, and 300ff-121(b)(2)(A)), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)</p>																																																					
<b>3. SUPERSEDES AWARD NOTICE dated:</b> 01/18/2017 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.																																																									
<b>4a. AWARD NO.:</b> 6 H89HA00034-24-01		<b>4b. GRANT NO.:</b> H89HA00034	<b>5. FORMER GRANT NO.:</b> BRH890034																																																						
<b>6. PROJECT PERIOD:</b> <b>FROM:</b> 04/04/1994 <b>THROUGH:</b> 02/28/2018																																																									
<b>7. BUDGET PERIOD:</b> <b>FROM:</b> 03/01/2017 <b>THROUGH:</b> 02/28/2018																																																									
<b>8. TITLE OF PROJECT (OR PROGRAM):</b> HIV EMERGENCY RELIEF PROJECT GRANTS																																																									
<b>9. GRANTEE NAME AND ADDRESS:</b> PALM BEACH COUNTY BOARD OF COMMISSIONERS PO BOX 4036 West Palm Bch, FL 33402-4036 <b>DUNS NUMBER:</b> 078470481			<b>10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR)</b> Channell Wilkins PALM BEACH COUNTY BOARD OF COMMISSIONERS MailStop Code: 810 Datura St. Division Line: Dept. of Community Services 810 Datura St. West Palm Beach, FL 33401																																																						
<b>11. APPROVED BUDGET:</b> (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation			<b>12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:</b>																																																						
<table border="0"> <tr><td>a. Salaries and Wages :</td><td>\$0.00</td></tr> <tr><td>b. Fringe Benefits :</td><td>\$0.00</td></tr> <tr><td>c. Total Personnel Costs :</td><td>\$0.00</td></tr> <tr><td>d. Consultant Costs :</td><td>\$0.00</td></tr> <tr><td>e. Equipment :</td><td>\$0.00</td></tr> <tr><td>f. Supplies :</td><td>\$0.00</td></tr> <tr><td>g. Travel :</td><td>\$0.00</td></tr> <tr><td>h. Construction/Alteration and Renovation :</td><td>\$0.00</td></tr> <tr><td>i. Other :</td><td>\$0.00</td></tr> <tr><td>j. Consortium/Contractual Costs :</td><td>\$0.00</td></tr> <tr><td>k. Trainee Related Expenses :</td><td>\$0.00</td></tr> <tr><td>l. Trainee Stipends :</td><td>\$0.00</td></tr> <tr><td>m. Trainee Tuition and Fees :</td><td>\$0.00</td></tr> <tr><td>n. Trainee Travel :</td><td>\$0.00</td></tr> <tr><td>o. TOTAL DIRECT COSTS :</td><td>\$7,638,133.00</td></tr> <tr><td>p. INDIRECT COSTS (Rate: % of S&amp;W/TADC) :</td><td>\$0.00</td></tr> <tr><td>q. TOTAL APPROVED BUDGET :</td><td>\$7,638,133.00</td></tr> <tr><td>    i. Less Non-Federal Share:</td><td>\$0.00</td></tr> <tr><td>    ii. Federal Share:</td><td>\$7,638,133.00</td></tr> </table>			a. Salaries and Wages :	\$0.00	b. Fringe Benefits :	\$0.00	c. Total Personnel Costs :	\$0.00	d. Consultant Costs :	\$0.00	e. Equipment :	\$0.00	f. Supplies :	\$0.00	g. Travel :	\$0.00	h. Construction/Alteration and Renovation :	\$0.00	i. Other :	\$0.00	j. Consortium/Contractual Costs :	\$0.00	k. Trainee Related Expenses :	\$0.00	l. Trainee Stipends :	\$0.00	m. Trainee Tuition and Fees :	\$0.00	n. Trainee Travel :	\$0.00	o. TOTAL DIRECT COSTS :	\$7,638,133.00	p. INDIRECT COSTS (Rate: % of S&W/TADC) :	\$0.00	q. TOTAL APPROVED BUDGET :	\$7,638,133.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$7,638,133.00	<table border="0"> <tr><td>a. Authorized Financial Assistance This Period</td><td>\$7,638,133.00</td></tr> <tr><td>b. Less Unobligated Balance from Prior Budget Periods</td><td></td></tr> <tr><td>    i. Additional Authority</td><td>\$0.00</td></tr> <tr><td>    ii. Offset</td><td>\$0.00</td></tr> <tr><td>c. Unawarded Balance of Current Year's Funds</td><td>\$0.00</td></tr> <tr><td>d. Less Cumulative Prior Awards(s) This Budget Period</td><td>\$3,404,398.00</td></tr> <tr><td>e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td><td>\$4,233,735.00</td></tr> </table>			a. Authorized Financial Assistance This Period	\$7,638,133.00	b. Less Unobligated Balance from Prior Budget Periods		i. Additional Authority	\$0.00	ii. Offset	\$0.00	c. Unawarded Balance of Current Year's Funds	\$0.00	d. Less Cumulative Prior Awards(s) This Budget Period	\$3,404,398.00	e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$4,233,735.00
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<b>15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:</b> <b>A=Addition B=Deduction C=Cost Sharing or Matching D=Other</b> <span style="float: right;">[A]</span> Estimated Program Income: \$0.00																																																									
<b>16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:</b> a. The grant program legislation cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.																																																									
<b>REMARKS:</b> (Other Terms and Conditions Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No)																																																									

FY15 FRML - \$136,483.00  
 FY15 MAI - \$17,459.00  
 FY17 Formula - \$4,326,463.00  
 FY17 MAI - \$645,224.00  
 FY17 Supplemental - \$2,512,504.00  
  
 Total Funding - \$7,638,133.00

*Electronically signed by Brad Barney, Grants Management Officer on : 06/16/2017*

**17. OBJ. CLASS:** 41.15    **18. CRS-EIN:** 1596000785A1    **19. FUTURE RECOMMENDED FUNDING:** \$0.00

FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
17 - 3778239	93.914	17H89HA00034	\$1,187,561.00	\$0.00	FRML	HIV1-17
15 - 3773215	93.914	17H89HA00034	\$136,483.00	\$0.00	FRML	HIV1-17
17 - 3778240	93.914	17H89HA00034	\$2,512,504.00	\$0.00	SUPPL	HIV1-17
17 - 3778238	93.914	17H89HA00034	\$379,728.00	\$0.00	MAI	HIV1-17
15 - 3773214	93.914	17H89HA00034	\$17,459.00	\$0.00	MAI	HIV1-17

**BOARD OF COUNTY COMMISSIONERS  
PALM BEACH COUNTY, FLORIDA  
BUDGET AMENDMENT**

BGEX - 142 - 090117\*1787  
BGRV - 142 - 090117\*0489

**FUND (1010) - Ryan White Care Program**

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	ENCUMBERED AS OF 09/01/17	REMAINING BALANCE
<b>REVENUE</b>								
142 1475	3169 Federal Grant Other -Human Services	4,672,155	5,407,741	1,760,502		7,168,243		
142 1477	3169 Federal Grant Other -Human Services	653,412	874,088	284,740		1,158,828		
142 1479	3169 Federal Grant Other -Human Services	2,371,921	2,886,830	1,140,550		4,027,380		
<b>Total Revenue</b>		<b>7,697,488</b>	<b>9,271,443</b>	<b>3,185,792</b>	<b>0</b>	<b>12,457,235</b>		
<b>EXPENDITURE</b>								
142 1475	1201 Salaries & Wages Regular	259,844	813,092	40,000		853,092		853,092
142 1475	3401 Other Contractual Services	30,000	30,000	200,000		230,000		
142 1475	8101 Contributions Other Govtl Agency	1,637,283	1,637,283	1,000,000		2,637,283	255,363	2,381,920
142 1475	8201 Contributions-Non-Govts Agnces	2,493,983	2,493,982	520,502		3,014,484	895,609	2,118,875
142 1477	8201 Contributions-Non-Govts Agnces	519,513	634,513	284,740		919,253	95,579	823,674
142 1479	1201 Salaries & Wages Regular	123,464	298,464	140,000		438,464		438,464
142 1479	8201 Contributions-Non-Govts Agnces	2,077,018	2,477,018	1,000,550		3,477,568	240,459	3,237,109
<b>Total Expenditures</b>		<b>7,697,488</b>	<b>9,271,443</b>	<b>3,185,792</b>	<b>0</b>	<b>12,457,235</b>	<b>1,487,010</b>	<b>9,853,134</b>

**COMMUNITY SERVICES**  
**INITIATING DEPARTMENT/DIVISION James Green**  
**Administration/Budget Department Approval**  
**OFMB Department - Posted**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*mal* \_\_\_\_\_ *9/29/17* \_\_\_\_\_

**By Board of County Commissioners**  
**At Meeting of October 17, 2017**  
 \_\_\_\_\_  
**Deputy Clerk to the**  
**Board of County Commissioners**