DEPARTMENT OF HEALTH AND HUMAN SERVICES Expiration date: 3/31/2001 Form ACF-IV-E-1 Aministration for Children and Families

TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FINANCIAL REPORT

OMB Control No: 0970-0205

PART 1: QUARTERLY REPORT OF EXPENDITURES AND ESTIMATES

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

STATE:	CURRENT QUARTER ENDED:		NEXT QUARTER ENDING		New (N) or Revised (R):		
CATEGORY	Current Quarter Expenditures		Prior Quarter Adjustments		Next Quarter Estimate		
FOSTER CARE	(a) Total Computable	(b) Federal Share *	(c) Total Computable	(d) Federal Share	(e) Total Computable	(f) Federal Share*	
FMAP Rate:							
Maintenance Assistance Payments							
2. Fed. share Child Support Collections							
3. Net Assistance Payments (1 minus 2)							
4. Avg. Monthly No. of Children							
State and Local Administration: a. Case Planning & Management							
b. Pre-placement Activities							
c. Eligibility Determinations							
d. SACWIS - Operation costs							
e. Other Administration							
f. Total State and Local Administration . (a+b+c+d+e)							
6. SACWIS - Development costs							
7. State and Local Training							
8. Demonstration Projects							
9. Total **							

10. State share of next quarter Foster Care estimate [Line 9(e) minus 9(f)]	

^{*}The Federal share percentage of total computable for payments is the FMAP rate, administration is 50%, SACWIS is 50% and training is 75%.

^{**}For Line 9, Col. (a), (c), (d) & (e) = Lines 1+5(f)+6+7+8. Col. (b) & (f) = Lines 3+5(f)+6+7+8.

STATE:

Aministration for Children and Families

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TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FINANCIAL REPORT
PART 1: QUARTERLY REPORT OF EXPENDITURES AND ESTIMATES

NEXT QUARTER ENDING:

				<u> </u>					
CATEGORY	Current Quarter Expenditures		Prior Quarter Adjustments		Next Quarter Estimate				
ADOPTION ASSISTANCE	(a) Total Computable	(b) Federal Share *	(c) Total Computable	(d) Federal Share	(e) Total Computable	(e) Federal Share *			
FMAP Rate:									
Adoption Assistance Payments									
2. Avg. Monthly No. of Children									
3. State and Local Administration									
4. State and Local Training									
5. Demonstration Projects									
6. Total (Lines 1+3+4+5)									
			•						
7. State share of next quarter Adoption Assistance estimate [Line 6(e) minus 6(f)]									
*The Federal share percentage of total computable for payments is the FMAP rate, administration is 50% and training is 75%.									
This is to certify that all information reported on all parts of this form is accurate and true to the best of my knowledge and belief. This also certifies that the State's share of next quarter estimate									
reported in Part 1 for Foster Care and Adoption Assistance is or will be available to meet the non-Federal share of expenditures as required by law.									
Signature of Approving Official Date			Typed Name, Title, Agency Name						

Send completed form to: DHHS, ACF, ACYF

Office of Management Services

330 C Street, S.W.

Washington, D. C. 20447

CURRENT QUARTER ENDED:

Send a copy to your Regional Office

New (N) or Revised (R):

TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FINANCIAL REPORT							
PART 2 : PRIOR QUARTER ADJUSTMENTS - FOSTER CARE							
STATE:		CURRENT QUARTER END		Part 2 Page No.			
SECTION A: II	NCREASING ADJU	STMENTS					
(a) Part 1							
Funding	(b) For Quarter	(c) Total Computable		(e) Audit No. (If Applicable)			
Activity *	Ended (Mo/Yr)	Adjustment	(d) Federal Share	Other Comments			
SECTION B: D	ECREASING ADJU	JSTMENTS					
(a) Part 1							
Funding				(e) Audit No. (If Applicable)			
Activity *	Ended (Mo/Yr)	Adjustment	(d) Federal Share	Other Comments			

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TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FINANCIAL REPORT							
PART 2 : PRIOR QUARTER ADJUSTMENTS - ADOPTION ASSISTANCE							
STATE:		CURRENT QUARTER END		Part 2 Page No.			
CECTION A. I	NODEACING AD III	IOTA IENTO					
	NCREASING ADJU	SIMENIS					
(a) Part 1	(h) Far Overtor	(a) Total Commutable		(a) Audit No. (If Applicable)			
Funding Activity *	(b) For Quarter Ended (Mo/Yr)	(c) Total Computable	(d) Endoral Sharo	(e) Audit No. (If Applicable) Other Comments			
Activity *	Ended (MO/Yr)	Adjustment T	(d) Federal Share	Other Comments			
SECTION B: D	ECREASING ADJ	JSTMENTS					
(a) Part 1							
Funding	(b) For Quarter (c) Total Computable			(e) Audit No. (If Applicable)			
Activity *	Ended (Mo/Yr)	Adjustment	(d) Federal Share	Other Comments			

DEPARTMENT OF HEALTH AND HUMAN SERVICES Administration for Children and Families

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TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FINANCIAL REPORT PART 3 : SEMIANNUAL BUDGET PROJECTIONS

<u>Repealed</u>

Aministration for Children and Families From ACF-IV-E-1

TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE									
PART 4 : DEMONSTRATION PROJECTS									
STATE:	CURRENT QUARTER ENDED:		NEXT QUARTER ENDING:		Foster Care:		New(N) or Revised(R)		
	<u> </u>								
CATEGORY	Current Quarte		Prior Quarter Adjustments		- ' I		ter Estimate		
A. Quarterly Demonstration Costs	(a) Total Computable	(b) Federal Share	(c) Total Computable	(d) Federal Share	(e) Federal Share	(f) Total Computable	(g) Federal Share		
1. Experimental Group Operational Exp.									
2. Control/Comparison Group Operational Exp.									
3. Total Demonstration Operational Exp. (1 plus 2)									
4. Developmental and Evaluation Exp.									
5. Total Expenditures (3 plus 4)									
6. State share of next quarter estimate for Demonstration Proj	ects (5 col (f) minus 5 co	ol (g))							
	=								
B. Cost Neutrality Calculation									
7a. Cumulative Experimental Grp. Cost Neutrality Limit (CNL)*									
b. Cumulative Experimental Grp. Operational Exp.									
c. Cumulative Control/Comparison Grp. Operational Exp.									
d. Experimental Group Oper. Exp. in Excess of CNL									
e. Total Qrtly. Reimbursable. Exp. (5 (col e & g) minus 7d)									
f. Remaining Current Plus Prior Exp. (Holding Acct.)**									
C. Savings Calculation						a			
8a. Cumulative Savings Realized. (7a minus 7b)									
b. Cumulative Savings Prev. Exp. (from 8e prior qtrly. report)									
c. Total Savings Available for Exp. (8a minus 8b)									
d. Quarterly Expenditure of Available Savings									
e. Cumulative Expenditure of Savings (8b plus 8d)									
D. Quarterly Claim/Estimate	D. Quarterly Claim/Estimate								
9. Total (7e minus 2 plus 8d)									

^{*}CNL equals calculated amount per approved formula.

^{**}Line 5 minus 7e. Holding account amounts may be used within the constraints of 45 CFR 95.7.as a portion of the exp. of available savings. Amounts will be deemd as incurred in the current quarter of the quarterly report on which reported.