Adm	DEPARTMENT OF HEALTH an inistration on Children, Youth Iren's Bureau <u>FORM CB-4</u>	and Families	/-E PROGRAMS	S QUARTERI		REPORT	Control No. 0970-020 Expires 09/30/20x
State	Tribe:	Cur	: EXPENDITUR rent (Claiming) arter Ended:	Next	IMATES (Estimating) ter Ending:	Mari Box	
	TION A: FOSTER CARE PF 0% FFP rate for all cost categories, except where noted		Quarter Claims	Prior Quart (C) Total	er Adjustments (D) Fed Share	Next Qua	arter Estimates
1	Maintenance Assistance Payments (FMAP rate)	\$	\$	\$	\$	\$	\$
2	Tribe/State Agreement Maint Assist				l		
3	Payments (Applicable FMAP Rate) Federal Share of Child Support Collections - From Form OCSE-34A	5	s	5	5	5	s
4	Net Maintenance Assistance Payments		\$		\$		\$
5	In-Placement Administrative Costs - Case Planning and Management	\$	\$	\$	\$		
6	In-Placement Administrative Costs - Eligibility Determinations	\$	\$	\$	\$		
7	In-Placement Administrative Costs - Provider Management	\$	\$	\$	\$		
8	In-Placement Administrative Costs - Agency Management	\$	\$	\$	\$		
9	Total In-Placement Administrative Costs	\$	\$	\$	\$		
10	Candidate Administrative Costs -	Ť	Ť	ľ	Ť		

Current Quarter Claims

(B) Fed Share

(A) Total

Prior Quarter Adjustments

(D) Fed Share

(C) Total

Next Quarter Estimates

(F) Fed Share

(E) Total

Form CB- 496 [Part 1 - Page 1 of 2] (10/01/2010) Replaces Form ACF-IV-E-1, now obsolete.

\$

Pre Placement Activities

Project 1 - APD Required SACWIS Developmental Costs: Project 2 - APD Required

Other SACWIS Costs No APD Required

(75% FFP Rate)

Total Costs

SACWIS Operational Costs SACWIS Developmental Costs:

Training Costs - Staff and Provider

Training Costs - Professional Partner (Transitional FFP Rate)

Demonstration Project Costs -From Part 3, Line 17

Non-Federal (State or Tribe) Share of Total Costs

SECTION B: ADOPTION ASSISTANCE PROGRAM

Tribal Share of Costs from TRIBES Third Party In-Kind Sources

Adoption Assistance

Administrative Costs -

Administrative Costs -Non-Recurring

(75% FFP Rate) Training Costs - Professional

Total Costs

Agency

Payments (FMAP rate) Tribe/State Agreement Adopt Assist

Payments (Applicable FMAP Rate)

Training Costs - Staff and Provider

Partner (Transitional FFP Rate) Demonstration Project Costs From Part 3, Line 17

Non-Federal (State or Tribe) Share of Total Costs

Tribal Share of Costs from TRIBES Third Party In-Kind Contributions

11

12

13 14

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STATES 23

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25

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27 28

29

30

U.S. DEPARTMENT OF HEALTH and HUMAN SERVICES DRAFT MAY 2010 Control No. 0970-0205										
Admi	nistration on Children, Youth		Control No. 0970-0205 Expires 09/30/20xx							
Children's Bureau										
FORM CB-496: TITLE IV-E PROGRAMS QUARTERLY FINANCIAL REPORT										
0	PART 1: EXPENDITURES and ESTIMATES									
State/	Tribe:		nt (Claiming) er Ended:	•	'Estimating) er Ending:	Mark Box:	Initial Report Rev'd Report			
							· -			
	TION C: GUARDIANSHIP A		ROGRAM	Brier Quarte	er Adjustments	Novt Quart	er Estimates			
50	except where noted	(A) Total	(B) Fed Share	(C) Total	(D) Fed Share	(E) Total	(F) Fed Share			
31	Guardianship Assistance Payments (FMAP rate)	\$	\$	\$	\$	s	\$			
32 STATES	Tribe/State Agreement Guard Assist Payments (Applicable FMAP Rate)	¢	e	¢	e	¢	¢			
33	Administrative Costs -	\$	\$	\$	\$	э	ş A			
34	Agency Administrative Costs -	\$	\$	\$	\$	\$	\$			
35	Non-Recurring Training Costs - Staff and Provider	\$	\$	\$	\$	\$	\$			
36	(75% FFP Rate) Train. Costs - Relative Guardian anc	\$	\$	\$	\$	\$	\$			
37	Pro Partner (Transitional FFP Rate) Post Demonstration Guardianship	\$	\$	\$	\$	\$	\$			
STATES	Assistance and Services Costs	\$	\$	\$	\$	\$	\$			
38	Total Costs	\$	\$	\$	\$	\$	\$			
39	Non-Federal Share of of Total Costs		s		s		s			
40	Tribal Share of Costs from		>		•		\$			
	Third Party In-Kind Sources		 \$		\$		\$			
SEC	TION D: AVERAGE MONTH	ILY NUMBER (OF CHILDREN	ASSISTED Actual Count	Estimated Count	1				
				Current Quarter	Next Quarter					
	Number of Obildren	FOSTER CARE	PROGRAM	1	1					
41	Number of Children: In-Placement - Title IV-E Maintenance	e Assistance Payment								
42	Number of Children: In-Placement - Title IV-E Funded Adn	ninistrative Costs								
43	Number of Children: In-Placement - Any Payments or Adm	inistrative Costs								
44	Number of Children: Pre-Placement - Title IV-E Maintenan		nts							
77						1				
	ADC Number of Children:	OPTION ASSIST	ANCE PROGRA	M	1	4				
45	Title IV-E Assistance Payments					4				
46	Number of Children: Any Assistance Payments					-				
47	Number of Children: Title IV-E Non-Recurring Administrati	ve Cost Payments								
	GUAR		STANCE PROGR	RAM		1				
	Number of Children:				1	4				
48	Title IV-E Assistance Payments Number of Children:					-				
49	Any Assistance Payments Number of Children:					-				
50	Title IV-E Non-Recurring Administrati Number of Children:	ve Cost Payments				-				
51 Title IV-E Post Demonstration Assistance or Services										
This certifies that the information on all parts of this form is accurate and true to the best of my knowledge and belief. This also certifies that the "Next Quarter" estimates of the Non-Federal shares of expenditures for each title IV-E program on Part 1 of these forms are, or will be available as required by law.										
Signature, Approving Official										
T	Nome Title Area					Data				
l yped	Name, Title, Agency					Date:				

Form CB-496 [Part 1 - Page 2 of 2] (10/01/2010) Replaces Form ACF-IV-E-1, now obsolete.

U.S. DEPARTMENT OF HEALTH and HUMAN SERVICES Administration on Children, Youth and Families Children's Bureau

DRAFT MAY 2010

	Ell's Buleau <u>F</u> (PA	RT 2: PR	E IV-E PRO	TER E	XPENDIT	URE AD	JUST	MENTS		RT		
		(Attach		ort to Part 1.		-		÷ ÷					
Applicable Program: Foster Care						doption Assistance			Guardianship Assistance				
State/Tribe:					Current (Claiming) Quarter Ended:			MarkInitial ReportBox:Revised Report					
(A) Total (B) Federal S Adjustment of Adjustmen SECTION A: INCREASING ADJU		stment	(C) Funding Category *		(D) Applicable to Fiscal Quarter Ended		(E)	E) Federal Audit Number (if applicable) Other Comments					
SECI	ION A: INCR		DJOSTMI					1					
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$											
\$		\$			V	== TOTAL II	NCREASING	ADJU	STMENTS				
SECT	ION B: DEC	REASING A	DJUSTM	IENTS									
\$		\$											
\$		\$											
\$		\$											
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\$		\$				TOTAL	EODEADING		IOTHENTO				
\$		\$			~=	<=== TOTAL DECREASING ADJUSTMENTS							
\$		\$		<=== NET ADJ	IUSTME	NTS (Section	on A Totals r	ninus	Section B T	otals)			
<u>* Func</u> FPY	ling Categories Foster Care Ma		•	ine numbers fro 1)	om Par	t 1): APY	Adoption As	sist Pa	ayments (Lir	ne 21)			
FPA			0	eement (Line 2)		APA	•		ayments w/ A	•	ent (Line 22)	
FAC Foster Care Admin - Case Planning & Mg		. ,		AAD	Adoption Admin - Agency (Line 23)								
FAE Foster Care Admin - Eligibility Determinations (•			ption Admin - Non-Recurring (Line 24)						
FAMFoster Care Admin - Provider Mgmt (Line 7)FAAFoster Care Admin - Agency Prog Mgmt (Line 8)				ATS ATP	Adoption Training Costs - Staff & Provider (Line 25) Adoption Training Costs - Professional Partners (Line 26)								
FCP Candidate Admin - Pre-Placement (Line 10)			-		ADE	Adoption Training Costs - Professional Partners (Line Adoption Demo Project Costs (Line 27)							
FSO SACWIS Admin - Operational Costs (Line 1			•		, ,			ssist Payments (Line 31)					
FS1 SACWIS Development Costs - Project 1 (L			Line 12)					nship Assist Payments w/ Agreement (Line 32)					
FS2 SACWIS Development Costs - Project 2 (Line 13)	ine 13) G			Guardianship Admin - Agency (Line 33)							
FTS Foster Care Training Costs - Staff & Prov			Line 15) GAN Guar			Guardianship Admin - Non-Recurring (Line 34)							
FTP Foster Care Training Costs - Professional		•											
FDE Foster Care Demo Project Costs (Line 17			sts (Line 17))		GTP GPD	Guardianship Training Costs - Professional Partners (L Guardianship Post-Demo Project Costs (Line 37)						

Form CB-496 [Part 2] (10/01/2010) Replaces Form ACF-IV-E-1, now obsolete.

Admi	DEPARTMENT OF HEALTH inistration on Children, Yo Iren's Bureau		VICES	DRA	FT MAY 2010			OMB APPROVED Control No. 0970-0205 Expires 09/30/20xx			
0		RM CB-496: TIT	LE IV-E PRO	GRAMS QUA			ORT				
	PART 3: DEMONSTRATION PROJECTS										
			(Attach	this report to F							
App	olicable Program:	Fo	oster Care	Adoption	Assistance						
State:				rrent (Claiming) arter Ended:			Mark Box:	Initial Report Revised Report			
		Current Qu (A) Total	arter Claims (B) Fed Share		r Adjustments (D) Fed Share	Total Expenditures (E) Fed Share	-	(G) Fed Share			
SEC	TION A: PROJECT COS	TS									
1	Experimental Group Operations	\$	\$	\$	\$	\$	\$	\$			
2	Control Group Operations	\$	\$	\$	\$	\$	\$	\$			
3	Developmental & Evaluations	s	\$	\$	\$	\$	\$	\$			
4	Total Costs Claimed	s	\$	\$	\$	\$	s	s			
5	State Share of Costs Claimed							5			
	TION B: COST NEUTRA	LITY				1					
6	Cumulative Experimental Group CNL	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$		\$			
7	Cumulative Experimental Group Oper Costs	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$		\$			
8	Cumulative Control Group Operational Costs	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$		\$			
9	Experimental Group Oper Costs > CNL	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$		\$			
10	Total Costs	\$	\$	\$	\$	<u>s</u>	\$	s			
11	Remaining Available	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$					
SEC	TION C: SAVINGS										
12	Cumulative Savings										
13	Realized Prior Cumulative Savings	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$					
14	Balance Total Savings	\$	\$	\$	\$	\$					
15	Available Available Savings	Sum of Curre	nt and Prior Qtr Fed	Shares in Col. D>	\$	\$					
_	Expended In Qtr	\$	\$	\$	\$	\$					
16	Cumulative Savings Expended	\$	\$	\$	\$	\$					
SEC	SECTION D: CLAIMS/ESTIMATES										
17								L			
17	Total	\$	\$	\$	\$	\$	\$	\$			

Form CB-496 [Part 3] (10/01/2010) Replaces Form ACF-IV-E-1, now obsolete.