

#### Department of Health and Human Services

Administration for Children and Families

# Temporary Assistance for Needy Families (TANF) ACF - 196R Financial Report Part 1: Expenditure Data

Cavasa .	rait i. Expeli	uitui e Data			
State	Grant Year	Fiscal Year	Report Quarter Ending	Next Quarter Ending	Report is Submitted as:
					[ ] New [ ] Revised
					[ ] Final
					(Zero Grant Funds Remaining)
					,
	Federal Funds	State F	unds	Federal Funds	Federal Funds
				Contingency Funds	
	State Family Assistance			Award Reconciliation	Emergency Contingency
	Grant				Funds
				Federal Share at FMAP Rate of: %	(Authorized by ARRA)
				≉	
	(A)	(B)	(C)	(D)	(E)
1. Awarded	V S	751	10/	\$ 0%	(=)
2. Transferred to CCDF Discretionary	•				
3. Transferred to SSBG	\$				
4. Adjusted Award					
5. Carryover			MOE EXPENDITURES		EXPENDITURES WITH
Expenditures Categories	FEDERAL EXPENDITURES	STATE MOE EXPENDITURES	SEPARATE STATE	EXPENDITURES WITH	EMERGENCY
		IN TANF	PROGRAMS	CONTINGENCY FUNDS	CONTINGENCY FUNDS
6 Basic Assistance					
6.a. Basic Assistance (excluding Relative Foster Care Maintenance Payments and					
Adoption and Guardianship Subsidies)	\$	\$	<b>.</b>	8	\$
6.b. Relative Foster Care Maintenance Payments and Adoption and Guardianship Subsidies	•			_	
7. Assistance Authorized Solely Under Prior Law		•	•	•	•
7.a. Foster Care Payments	•			\$	\$
7.b. Juvenile Justice Payments	•			\$	\$
7.c. EmergencyAssistance Authorized Solely Under Prior Law	\$			\$	\$
8. Non-Assistance Authorized Solely Under Prior Law					
8.a. Child Welfare or Foster Care Services 8.b. Juvenile Justice Services	•			\$	\$
8.c. Emergency Services Authorized Solely Under Prior Law				•	•
9. Work, Education, and Training Activities				•	
9.a. Subsidized Employment	•	\$	\$	\$	\$
9.b. Education and Training	•	\$	•	\$	\$
9.c. Additional Work Activities	\$	\$	<u> </u>	\$	\$
10. Work Supports					
11. Early Care and Education 11.a. Child Care (Assistance and Non-Assistance)	•	•		_	
11.b. Pre-Kindergarten/Head Start		•	<u>,                                     </u>	\$	•
12. Financial Education and Asset Development	·	\$	•	\$	\$
13. Refundable Earned Income Tax Credits	<b>\$</b>	\$	•	\$	\$
14. Non-EITC Refundable State Tax Credits	•	\$	\$	\$	\$
15. Non-Recurrent Short Term Benefits	\$	\$		\$	\$
16. Supportive Services		\$		\$	\$
17. Services for Children and Youth 18. Prevention of Out-of-Wedlock Pregnancies		\$	•	<u>s</u>	\$
19. Fatherhood and Two-Parent Family Formation and Maintenance Programs		•	•	\$ \$	•
20. Child Welfare Services		•	•	•	
20.a. Family Support/ Family Preservation /Reunification Services	:	\$	<b>;</b>	\$	\$
20.b. Adoption Services	•	\$	•	\$	\$
20.c. Additional Child Welfare Services	•	\$		\$	\$
21. Home Visiting Programs 22. Program Management	<b>\$</b>	\$	<u> </u>	\$	\$
22.a. Administrative Costs		•	•	•	•
22.b. Assessment/Service Provision		•		\$	•
22.c. Systems		\$	· •	\$	\$
23.Other	<b>\$</b>	\$	\$	\$	\$
24.Total Expenditures					
25 Transitional Services for Employed	•	\$	•	\$	\$
26 Job Access	\$	\$	· •		ı-
27. Federal Unliquidated Obligations				•	•
				\$	\$
29. State Replacement Funds	_	\$		•	
Quarterly Estimate	Estimate TANF Federal Funds				
30. Estimate of TANF Funds Requested for the Following Quarter	\$	IDM IO ACCI IDATE AND TO IF TO THE	T OE NO UNIONI EDOP AND DELIFE		
THIS IS TO CERTIFY THAT THE INFORM SIGNATURE: AUTHORIZED STATE OFFICIAL	NATION REPORTED ON ALL PARTS OF THIS FO		TOF MY KNOWLEDGE AND BELIEF. TYPED NAME, TITLE, AGENO	™ NAME	
DATE SUBMITTED:			I I FED NAME, III LE, AGENC	/ I IVANIC	
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## Department of Health and Human Services

### **Administration for Children and Families**

# Temporary Assistance for Needy Families (TANF) ACF - 196R Financial Report Part 2: Narrative Section

- uad	State	Fiscal Year					
	T		Made delegation de Est	and Endand End discussed			
Expenditure Categories	Descriptions of Expenditures		Methodology Used to Estimate Federal Funding and State MOE Expenditures				
6 Basic Assistance							
6.a. Basic Assistance (excluding Relative Foster Care Maintenance Payments and Adoption and Guardianship Subsidies)							
6.b. Relative Foster Care Maintenance Payments and Adoption and Guardianship Subsidies							
7. Assistance Authorized Solely Under Prior Law							
7.a. Foster Care Payments							
7.b. Juvenile Justice Payments							
7.c. EmergencyAssistance Authorized Solely Under Prior Law							
8. Non-Assistance Authorized Solely Under Prior Law							
8.a. Child Welfare or Foster Care Services							
8.b. Juvenile Justice Services							
8.c. Emergency Services Authorized Solely Under Prior Law							
9. Work, Education, and Training Activities							
9.a. Subsidized Employment							
9.b. Education and Training							
9.c. Additional Work Activities							
10. Work Supports							
11. Early Care and Education							
11.a. Child Care (Assistance and Non-Assistance)							
11.b. Pre-Kindergarten/Head Start							
12. Financial Education and Asset Development							
13. Refundable Earned Income Tax Credits							
14. Non-EITC Refundable State Tax Credits							
15. Non-Recurrent Short Term Benefits							
16. Supportive Services							
17. Services for Children and Youth							
18. Prevention of Out-of-Wedlock Pregnancies							
19. Fatherhood and Two-Parent Family Formation and Maintenance Programs							
20. Child Welfare Services							
20.a. Family Support/ Family Preservation /Reunification Services							
20.b. Adoption Services							
20.c. Additional Child Welfare Services							
21. Home Visiting Programs							
22. Program Management							
22.a. Administrative Costs							
22.b. Assessment/Service Provision							
22.c. Systems							
23.Other							
THIS IS TO CERTIFY THAT THE INFORMATION REPORTED ON ALL PARTS OF THIS FORM IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.							
SIGNATURE: AUTHORIZED STATE OFFICIAL			TYPED NAME, TITLE, AGENCY	NAME			
DATE SUBMITTED:							
PAGE 2 OF 2 of APPROVED OMB No: 0970-0446, Expiration Date XX/XX/XXXX							