- Data Entry Permitted

U.S. DEPARTMENT OF HEALTH and HUMAN SERVICES Administration on Children, Youth and Families Children's Bureau - Calculated Through Embedded Formula

Control No. 0970-051 Expires: 06/30/202

					TERLY FINAN (Including Cas	eload Data)		
State/Tri	hai		Curren	nt (Claiming) Quar	Reporting Perio	ods (Estimating) Quarte	r Mark	Report Type Initial Report
State/171	be:		Ended		Endir	g:	Box:	Rev'd Report
			Current Qu	uarter FMAP Rate	= Next	Quarter FMAP Rate	=	
SECTIO	ON A: FOSTER CARE PROGRAM							
1	50% FFP rate for all cost categories, except where noted		Current Qu (A) Total	arter Claims (B) Fed Share	Prior Quarter A (C) Total	djustment Claims (D) Fed Share	Next Quart (E) Total	er Estimates (F) Fed Share
	Traditional Foster Care (TFC) - Children	Ages 0-18	(A) Total	(b) Fed Share	(C) Total	(b) Fed Share	(L) Total	(F) Fed Share
1a	Agency TFC Maintenance (Maint.) Payments							
1b	Foster Family Home (FMAP Rate)  Agency TFC Maint. Payments - Specified Sett	ina		\$ -				\$ -
	Child Care Institution (FMAP Rate)			s -				\$ -
1c	Agency TFC Maint. Payments - Non-Specified Child Care Institution (FMAP Rate)			s -				s -
1d	Agency TFC Maint. Payments - Substance Ab Treatment Facility (FMAP Rate)	use		s -			s	s -
1e	Agency TFC Maint. Payments -		s -	s -	s -	s -	s .	s -
	Subtotal (FMAP Rate)  Extended Foster Care (EFC) - Children	Agod 10±	\$ -	\$ -	\$ -	S -	\$ -	\$ -
1f	Agency EFC Maintenance (Maint.) Payments	- -						
1g	Foster Family Home (FMAP Rate) Agency EFC Maint. Payments - Specified Sett	ina		s -				\$ -
1h	Child Care Institution (FMAP Rate)			s -				s -
	Agency EFC Maint. Payments - Non-Specified Child Care Institution (FMAP Rate)	Setting		s -				s -
1i	Agency EFC Maint. Payments - Supervised Independent Living Setting (FMAP Rate)			s -			s	s -
1j	Agency EFC Maint. Payments -`		s -	s -	s -	s -	s -	s -
1k	Subtotal (FMAP Rate) Agency Maint. Payments -`						-	
2a	TFC & EFC Total (FMAP Rate) Tribal-State Agreement (Agmt.) TFC & EFC N	laint.	\$ -	\$ -	s -	s -	s -	\$ -
STATES	Payments - Foster Family Home (Applicable I	MAP Rate)						\$
2b STATES	Tribal-State Agmt. TFC & EFC Maint. Paymer Other Qualifying Placements (Applicable FMA							s
2c	Tribal-State Agmt. TFC & EFC Maint. Paymen	its -						
STATES 3	Total (Applicable FMAP Rate) Federal Share of Child Support		\$ -	s -	\$ -	s -	\$ -	\$ -
STATES	Collections (From Form OCSE-34A)							\$
4	Net Foster Care Maintenance Payments			s .		s -		s -
5	In-Placement Administrative Costs -							
6	Case Planning and Management In-Placement Administrative Costs -			\$ -		s -		
7	Eligibility Determinations			s -		s -		
_ ′	In-Placement Administrative Costs - Provider and Agency Management			s -		s -		
8	In-Placement Administrative Costs - Independ							
9	Legal Representation - Child or Other Specifie Total In-Placement Foster Care	d Individuals		\$ -		\$ -		
	Administrative Costs		\$ -	s -	s -	s -	s -	\$ -
10a	Title IV-E Foster Care Candidate Administrative Costs - Case Planning and Management	re		s -		s -		s -
10b	Title IV-E Foster Care Candidate Admin. Cost		6	s -		s -		s
10c	Legal Representation - Child or Other Specifie Sex Trafficking Prevention	a individuals		1		1		-
11a	Administrative Costs Non-CCWIS			s -		s -		\$ -
	Project Operational Costs			s -	\$	s -	s	s -
11b	Non-CCWIS Project Developmental Costs			s -	s	s -	s	s -
12a	CCWIS Project Operational Costs Using CCWIS Cost Allocation	Number	s -	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
Dropdown	[Project Number (e.g., NA, 01, 02, etc.]:	Number	\$	s -	\$	s -	WYALUL.	\$ -
Dropdown	[Project Number (e.g., NA, 01, 02, etc.]: [Project Number (e.g., NA, 01, 02, etc.]:		\$	\$ - #VALUE!	S	#VALUE!	s s	#VALUE!
12b	CCWIS Project Operational Costs Using	- Normalism	s -	#3/ALLIE!	#VALUE!	#V/ALUE1	#VALUE!	#VALUE!
Dropdown	Non-CCWIS Cost Allocation [Project Number (e.g., NA, 01, 02, etc.]:	Number	\$	#VALUE!	\$	#VALUE!	\$	#VALUE!
Dropdown	[Project Number (e.g., NA, 01, 02, etc.]: [Project Number (e.g., NA, 01, 02, etc.]:		\$	#VALUE! #VALUE!	S S	#VALUE!	S	#VALUE!
13a	CCWIS Project Developmental Costs							
Dropdown	CCWIS Cost Allocation – APD Required [Project Number (e.g., NA, 01, 02, etc.]:	Number	\$ - \$	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
Dropdown	[Project Number (e.g., NA, 01, 02, etc.]:		\$	#VALUE!	s	#VALUE!	\$	#VALUE!
Dropdown 13b	[Project Number (e.g., NA, 01, 02, etc.]: CCWIS Project Developmental Costs Using		\$	#VALUE!	\$	#VALUE!	S	#VALUE!
Dropdown	Non-CCWIS Cost Allocation – APD Required	Number	\$ -	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
Dropdown	[Project Number (e.g., NA, 01, 02, etc.]: [Project Number (e.g., NA, 01, 02, etc.]: [Project Number (e.g., NA, 01, 02, etc.]:		\$	#VALUE!	S	#VALUE!	\$	#VALUE!
Dropdown 14a	CCWIS Project Developmental Costs Using		P		9		•	
14b	CCWIS Cost Allocation – No APD Required CCWIS Project Developmental Costs Using		\$	s -	s	s -	\$	s -
	Non-CCWIS Cost Allocation – No APD Requir	ed	\$	s -	s	s -	\$	s -
15	Training Costs - Staff, Provider and Professional Partner (75% FFP Rate)		\$	s -	s	s -	s	s -
16	Former Demonstration Project Costs							
17	Foster Care Program -				\$	s		
	Total Costs		\$ -	s -	s -	\$	\$ -	\$ -
18	Non-Federal (State or Tribal) Share							
19	of Total Costs Tribal Share of Costs from			s -		s -		\$ -
	Third Party In-Kind Sources			s		s		s
SECTIO	ON B: ADOPTION ASSISTANCE PR	OGRAM						
SECTION	50% FFP rate for all cost categories,	OGRAW	Current Qu	arter Claims	Prior Quarte	r Adjustments	Next Quart	er Estimates
L	except where noted		(A) Total	(B) Fed Share	(C) Total	(D) Fed Share	(E) Total	(F) Fed Share
20	Agency Adoption Assistance Payments (FMAP Rate)		s	s -		s		s .
21	Tribal-State Agreement Adoption Assistance		4		9	•	*	
STATES	Payments (Applicable FMAP Rate)		\$	s	s	s	\$	\$
22	Administrative Costs - Agency		s	s -	s	s -	s	s -
23	Administrative Costs -							
24	Non-Recurring Training Costs - Staff and Provider and		\$	\$ -	S	\$ -	\$	\$ -
	Professional Partner (75% FFP Rate)		\$	s -	s	s -	s	s -
25	Adoption Assistance Program - Total Costs		s -	s -	#VALUE!	#VALUE!	#VALUE!	#VALUE!
26						- FALUE!	ALUL!	" VALUE!
26	Non-Federal (State or Tribal) Share of of Total Costs			s -		s -		s -
27	Tribal Share of Costs from							

Form CB-496 [Part 1 - Page 1 of 2] (xx/xx/20xx) Replaces 06/30/2024 version.

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

]-	Calculated	Through	Embedded	Formula
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Control No. 0970-0510 Expires: 06/30/2027

# FORM CB-496: TITLE IV-E PROGRAMS QUARTERLY FINANCIAL REPORT PART 1: EXPENDITURES and ESTIMATES (Including Caseload Data)

Reporting Periods				
State/Tribe:		Current (Claiming) Quarter	Next (Estimating) Quarter	Mark Initial Report
		Ended:	Ending:	Box: Rev'd Report
	Cu	rrent Quarter FMAP Rate =	Next Quarter FMAP Rate =	-

SECTIO	N C: GUARDIANSHIP ASSISTANCE PROGRAM							
	50% FFP rate for all cost categories,	Current Qu	arter Claims	Prior Quarter	Adjustments	Next Quarter Estimates		
	except where noted	(A) Total	(B) Fed Share	(C) Total	(D) Fed Share	(E) Total	(F) Fed Share	
28	Agency Guardianship Assistance							
	Payments (FMAP Rate)		\$ -		\$	\$	\$ -	
29	Tribal-State Agreement Guardianship Assistance							
STATES	Payments (Applicable FMAP Rate)		\$	\$	\$	\$	\$	
30	Administrative Costs -							
	Agency		\$ -	\$	\$ -	\$	\$ -	
31	Administrative Costs -							
	Non-Recurring		\$ -	\$	\$ -	\$	\$ -	
32	Training Costs - Staff, Provider and							
	Professional Partner (75% FFP Rate)		\$ -	\$	\$ -	\$	\$ -	
33	Post-Demonstration Guardianship							
STATES	Assistance and Services Costs		\$	\$	\$	\$	\$	
34	Guardianship Assistance Program -							
	Total Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
35	Non-Federal (State or Tribal) Share of			1				
35	of Total Costs						s -	
			-		· -		- ·	
36	Tribal Share of Costs from				e		e	
IRIBES	Third Party In-Kind Sources		1 3		1 3		3	

	50% FFP rate for all cost categories,	Current Qu	ıarter Claims	Prior Quarter	Adjustments	Next Quarte	r Estimates	
	except where noted	(A) Total (B) Fed Share		(C) Total	(D) Fed Share	(E) Total	(F) Fed Share	
37	Agency Prevention Services Provision - Well-Supported							
	Practices- (50% FFP Rate; FFY 2027 & Later: FMAP Rate)	\$	\$ -	\$	\$ -	\$	\$	
38a	Agency Prevention Services Provision - Supported							
	Practices (50% FFP Rate; FFY 2027 & Later: FMAP Rate)	\$	\$ -	\$	\$ -	\$	\$	
38b	Agency Prevention Services Provision - Promising							
	Practices (50% FFP Rate; FFY 2027 & Later: FMAP Rate)	\$	\$ -	\$	\$ -	\$	\$	
39	Tribal-Title IV-E Agency Agmt. Prevention Services Provision - Qualifying		_	_		_	_	
	Practices (50% FFP Rate; FFY 2027 & Later: Applicable FMAP Rate	\$	\$ -	\$	\$ -	\$	\$	
40	Prevention Services Administrative Costs -	_	_	_	_	_	l_	
	Prevention Planning and Agency Management	\$	\$ -	\$	\$ -	\$	\$	
41	Prevention Services Training Costs -	_	_	_		_	_	
	Prevention Service Providers (50% FFP Rate)	\$	\$ -	\$	\$ -	\$	\$	
42	Prevention Services Program -							
	Total Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$	
43	Prevention Services Program - Non-Federal							
	(State or Tribal) Share of Total Costs		s -		\$ -		\$	
44	Kinship Navigator Program -							
	Provision of Services	\$	s -	s	s -	\$	s	
45	Kinship Navigator Program -							
	Administrative Costs	\$	\$ -	\$	\$ -	\$	\$	
46	Kinship Navigator Program -							
	Total Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$	
47	Kinship Navigator Program - Non-Federal							
	(State or Tribal) Share of Total Costs		- (\$		- (\$		\$	

Form CB-496 [Part 1 - Page 2 of 3] (xx/xx/20xx) Replaces 06/30/2024 version.

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

Date:

Control No. 0970-0510 Expires: 06/30/2027

		PART 1: EXPENDITU	JRES and ESTIMAT	ES (Inc	ludin	g Caseload Da				
				Reporting					Report Typ	
State/Tri	be:		urrent (Claiming) Quarter			Next (Estimating) Quarter		Mark	Initial Repo	
		E	nded:		Ending	g:		Box:	Rev'd Repo	ort
SECTIO	ON E:	AVERAGE MONTHLY NUMBER OF	CHILDREN ASSISTE	)						
				Actual (	Count	Estimated Count				
				Current (		Next Quarter				
		FOSTER CAR	RE PROGRAM			•				
		Traditional Foster Care (TFC) - Childre								
48a	Numbe	er of Children In-Placement:								
		y Title IV-E TFC Maintenance (Maint.) Payments	- Foster Family Home							
48b	Numbe	er of Children In-Placement:	•							
		y Title IV-E TFC Maint. Payments - Specified Set	ting Child Care Institution							
48c		er of Children In-Placement:	-l C-++: Obil-l C I+:t-+:							
48d		y Title IV-E TFC Maint. Payments - Non-Specified er of Children In-Placement:	a Setting Child Care Instituti							
400		y Title IV-E All Maint. Payments - Substance Abu	se Treatment Facility							
	rigono	Extended Foster Care (EFC) - Children Ag	es 18 and Older							
48e		er of Children In-Placement:								
		y Title IV-E EFC Maintenance Payments - Foster	Family Home							
48f		er of Children In-Placement:	uin o Obild Cons Institution							
48g		y Title IV-E EFC Maint. Payments - Specified Set er of Children In-Placement:	ung Child Care institution							
409		y Title IV-E EFC Maint. Payments - Non-Specified	d Setting Child Care Instituti							
48h	Numbe	er of Children In-Placement:	·							
	Agency	y Title IV-E Maint. Payments - Supervised Indepe	endent Living Settings							
40:	Niconolo	Tribal/State Agreement Foster Care - Chi	ildren All Ages							
48i STATES		er of Children In-Placement: State Agreement Title IV-E Maintenance Paymen	ets Foster Family Home							
48j	Numbe	er of Children In-Placement:	its - Fusier Family Hume							
STATES		State Agreement Title IV-E Maint. Payments - Of	ther Qualifying Placements							
49a	Numbe	er of Children In-Placement:								
		-E Funded Case Planning and Management Adn	ninistrative Costs							
49b	1	er of Children In-Placement:								
		-E Funded-Independent Legal Representation Ac	dministrative Costs							
50	1	Number of Children In-Placement:	C-#:							
F10		ayments or Administrative Costs In All Placement	Settings							
51a		er of Children Title IV-E Foster Care Candidate:	ninistrativa Casta							
F1b		/-E Funded Case Planning and Management Adn	ninistrative Costs							
51b		er of Children Title IV-E Foster Care Candidate:	dministrativa Casta							
52		/-E Funded Independent Legal Representation Active of Children In-Placement, Care or Supervision								
52		/-E Funded Sex Trafficking Prevention Administra								
	THE TV		TANCE PROGRAM							
53a	Numbe	er of Children:	TARGET ROCKAM							
000		y Title IV-E Adoption Assistance Payments								
53b		er of Children:								
STATES	Tribal-	-State Agreement Title IV-E Adoption Assistance	Payments							
54		lumber of Children:								
		doption Assistance Payments								
55		er of Children:								
	Title IV	/-E Non-Recurring Administrative Cost Expenses	SISTANCE PROGRAM							
56a	Numbe	er of Children:	DISTANCE PROGRAM							
504		y Title IV-E Guardianship Assistance Payments								
56b		er of Children:								
STATES		State Agreement Title IV-E Guardianship Assista	nce Payments							
57	Total N	lumber of Children:								
		sistance Payments								
58		er of Children:								
		-E Non-Recurring Administrative Cost Expenses								
59		er of Children:	0							
STATES	Title IV	/-E Post Demonstration Guardianship Assistance PREVENTION SERVICES AND K		OCDAM	C					
60a	Numbe	er of Children:	INSTILL INAVIGATOR PE	CORAIN						
554		y Title IV-E Prevention Services -Any Services Pr	rovided							
60b		er of Children:								
	1	Title IV-E Agency Agmt. Title IV-E Prevention Se	ervices -Any Services Provid	ed						
61		er of Families:								
	Kinship	Navigator Program - Any Services Provided								
		This certifies that the information on al	Il narte of this form is accurat	e and true t	o the boo	st of my knowledge and	d helief			
		This certifies that the information on all This also certifies that the "Next Quarter	•							
I			these forms are, or will be ava				. program			
Signatu	re. App	roving Official								

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

- Data Entry Permitted
<ul> <li>Calculated Through Embedded Formula</li> </ul>

Control No. 0970-0510 Expires: 06/30/2027

# FORM CB-496: TITLE IV-E PROGRAMS QUARTERLY FINANCIAL REPORT PART 2: PRIOR OUARTER EXPENDITURE ADJUSTMENTS

	(Attach this report to Part 1. Use as many attachments as necessary.)										
Applic	able Prograi	m: Foster	Care Preventior		Adoption Ass	sistance Kinship	-		ip Assistance		
State/		•			nt (Claiming)	-		Mark	Initial Report		
Tribe:					rter Ended:			Box:	Revised Report		
TIIDC.				Quai	iter Ended.			DOX.	revised report		
	(A) Total (B) Federal Share Adjustment of Adjustment			ding /*	(D) Applica Fiscal Quarte		(E)		stment Identification and Explanation		
SECTION	ON A: INC	REASING ADJUST	MENTS								
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$	-	\$ -			<=== TOTAL	INCREAS	ING AD	JUSTMENTS			
SECTION	ON B: DE	CREASING ADJUS	TMENTS								
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$		\$									
\$	-	\$ -			<=== TOTAL	DECREA	SING AD	JUSTMENTS			

<=== NET ADJUSTMENTS (Section A Totals minus Section B Totals)

<sup>\*</sup> Funding Category Codes - See form CB-496, Part 2 instructions for a complete list of applicable codes.

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

<ul> <li>Calculated</li> </ul>	Through	Embedded	Formula

Contr	ol No	. 0970-0510	
Exp	ires:	06/30/2027	

**INACTIVE and Reserved for Future Use - Entire Part 3** 

### FORM CB-496: TITLE IV-E PROGRAMS QUARTERLY FINANCIAL REPORT PART 3 (SECTIONS A-D): DEMONSTRATION PROJECTS

Complete gitter subsection for subsection II depending on the cost neutrality method specified in the project terms & conditions for reported project.    Lexperimental Design Projects	PART 3 (SECTIONS E-F): FOSTER CARE POST-DEMONSTRATION COSTS & FUNDING CERTAINTY GRANT CALCULATIONS														
Applicable   Program:	(Attach this report to Part 1.)														
Applicable   Cost Neutrality Limit (CNL) Method:   Experimental Design   Toster Care Post-Chemonstration Cost Reporting:   Yes   Not   Not   Administration   Cow   Cost   Cost	Project A														
Foster Care Post-Demonstration Cost Reporting:   Yes		n:	F	Foster Care Adoption Assistance Guardianship Assistance											
Administration	Applicable	Applicable Cost Neutrality Limit (CNL) Method:					xperimenta	Desig	n		Capped	Alle	ocation Desi	gn	
Current Quarter FMAP Rate =	Foster Care	Post-Demonstration Cos	st Repo	rting:			Yes		No	1					
Current Quarter FMAP Rate =	Applicable Funding	Category(ies):		Mainten	ance	Assista	nce Pavmer	nts		Ad	lministration		ccwis o	per. Costs	Training
Current Quarter FMAP Rate		<u> </u>										,		•	
Current   Curr	State/Tribe:			Qua	rter End	led:					Quarter Ending:				
Column   C		Current Quarter FMAP	Rate =									Ne	ext Quarter FM	AP Rate =	
SECTION A: TITLE IV-E ALLOWABLE AND WAIVER BASED DEMONSTRATION PROJECT COSTS			0	Current Qua	arter Cla	ims	Prior Quarte	r Adjustm	ents	To	otal Expenditures	Tot	al Expenditures	Next Q	uarter Estimates
Complete gitter subsection for subsection II depending on the cost neutrality method specified in the project terms & conditions for reported project.    Lexperimental Design Projects			(A) ·	Total	(B) F	ed Share	(C) Total	(D) Fed	Share		(E) Total	(	F) Fed Share	(G) Total	(H) Fed Share
Complete either subsection I or subsection I depending on the cost neutrality method specified in the project terms & conditions for reported project.    L Experimental Design Projects	SECTION A: TITLE IV-	E ALLOWABLE AND WAIV	ER BAS	ED DEM	ONSTR	RATION P	ROJECT COS	TS							
L. Experimental Design Projects									s for re	porte	ed project.				
The International Assistance   S			2000110		l ope		- project terms o	30	56	1					
Payments Operations (FMAP Pate)   S															
10   Tile N/-E Administration (All Applicable Categories)					\$	-				\$	-	\$	-		\$ -
Control   Cont		,								_		_			_
Differ Nativer Based Expenditures	Operations (50% FFP Ra	ate)			\$	-		\$	-	\$	-	\$	-		-
Solicity Paraller Project Intervention and Other Washer Based Expenditures	2a FMAP Rate - Project Inte	ervention and			¢							•			¢
Other Waiver Based Expenditures					Ф					Ф	-	Ф	<u>-</u>		<b>a</b> -
S	·				s	_		\$	_	\$	_	\$	_		s - l
Costs (60% FFP Rate)		enditures			Ť			<u> </u>		, ·		*			, T
Project Evaluation   Costs (50% FFP Rate)   S - S - S - S - S - S   S - S - S - S					\$	-		\$	-	\$	-	\$	-		\$ -
IL Capped Allocation Projects	`							_				_			
State   Title   IV-E Maintenance Assistance   State   State	Costs (50% FFP Rate)				<b>5</b>	-		\$	-	\$	-	ð	-		\$ -
Payments Operations (FMAP Rate)	II. Capped A	Allocation Projects													
Payments Operations (FMAP Rate)					s	_				\$	_	\$	_		s - l
Candidate) Operations (50% FFP Rate)					<u> </u>					<b>—</b>		_			•
Standard S		` "			\$	-		\$	-	\$	-	\$	-		\$ -
Operations (50% FFP Rate)					_							_			
Operations (50% FFP Rate)	· · · · · ·	,			э	-		Э		Э	-	Ф	-		<b>a</b> -
Coperations (50% FFP Rate)   Coperations (75% FFP Rate)   Coperations (7	'				s	_		\$		\$	_	\$	_		s -
Training Operations (75% FFP Rate)		•			ļ			<u> </u>		1		-			
6a FMAP Rate - Project Intervention and Other Waiver Based Expenditures  6b 50% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  7 Project Developmental Costs (50% FFP Rate)  8 Project Evaluation Costs (50% FFP Rate)  8 Project Evaluation Costs (50% FFP Rate)  8 III. All Program Projects					\$	-		\$	-	\$	-	\$	-		\$ -
Other Waiver Based Expenditures  6b 50% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  7 Project Developmental Costs (50% FFP Rate)  8 Project Evaluation Costs (50% FFP Rate)  8 Project Evaluation Society (50% FFP Rate)  8 Project Evaluation Society (50% FFP Rate)  9 Society (50% FFP Rate)  10 Society (50% FFP Rate)  11 All Program Projects												_			
6b 50% FFP Rate - Project Intervention and Other Waiver Based Expenditures  6c 75% FFP Rate - Project Intervention and Other Waiver Based Expenditures  7 Project Developmental Costs (50% FFP Rate)  8 Project Evaluation Costs (50% FFP Rate)  8 III. All Program Projects  8 -	The state of the s				\$	-				\$	-	\$	-		-
Cotter Waiver Based Expenditures					_							_			
Other Waiver Based Expenditures	Other Waiver Based Exp	enditures			\$	-		\$	-	\$	-	\$	-		-
Other Waver Based Expenditures	6c 75% FFP Rate - Project	Intervention and			4	_		¢	_	¢		¢			4
Costs (50% FFP Rate)         \$ -	·				<b>μ</b>			Ψ		Ψ	-	Ψ	-		Ψ -
Costs (50% FFP Rate)				s	_		s		\$	_	\$	_		s -	
Costs (50% FFP Rate)					ļ -			ļ -		Ť		_			7
III. All Program Projects	l '				\$	-		\$	-	\$	-	\$	-		\$ -
	, ,	ogram Projects													
r 9 Total Demonstration Protect 1. 1. 1. 1. 1. 1. 1. 1.	9 Total Demonstration Proj														
S   S   S   S   S   S   S   S   S   S			\$	-	\$		- 5	\$		\$		\$		\$	-  \$ -

SEC	SECTION B: COST NEUTRALITY (Complete either subsection I or subsection II based on the cost neutrality method specified in the project terms & cond. for the project.)								
	I. Experimental Design Projects								
11a	Maint. Pymts. (FMAP Rate) - Cumulative Exp.								
	Group Title IV-E Cost Neutrality Limit (CNL)			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			
11b	Admin. Costs (50% FFP Rate) - Cumulative Exp.								
	Group Title IV-E Cost Neutrality Limit (CNL)			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			
12a	FMAP Rate - Currently Rptd. & Cumulatively								\$ -
	Funded Exper. Group & Other Oper. Costs			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			<b>a</b> -
12b	50% FFP Rate - Currently Rptd. & Cumulatively								s -
	Funded Exper. Group & Other Oper. Costs			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			Ψ
13a	FMAP Rate -Cumulative Experimental Group &						s -		s - l
401	Other Oper Costs In Excess of CNL			Sum of Current	Qtr and Prior Qti	Fed Share in Col. F>	<u> </u>		·
130	50% FFP Rate - Cumulative Experimental			Come of Commons	Other aread Design Other	Fod Chara in Col F	- \$		-
1/12	Group & Other Oper Costs In Excess of CNL  FMAP Rate - Fundable Portion of			Sum of Current	Qır and Prior Qır	Fed Share in Col. F>			
140	Total Quarterly Project Operational Costs	#DIV/0!	\$ -	\$ -	\$ -	#DIV/0!	\$ -	#DIV/0!	\$ -
14b	50% FFP Rate - Fundable Portion of								
1	Total Quarterly Project Operational Costs	\$ -	\$ -	\$ -	\$ -	\$ -	- \$	- \$	-
15a	FMAP Rate - Non-Fundable Portion of								
	Total Quarterly Project Operational Costs	#DIV/0!	\$ -	\$ -	\$ -	#DIV/0!	-	#DIV/0!	-
15b	50% FFP Rate - Non-Fundable Portion of	1.			_				
	Total Quarterly Project Operational Costs	-	\$ -	\$ -	\$ -	-	-	- \$	-
16a	FMAP Rate - Cumulative Holding Account								
	(Unfunded Operational Costs In Excess of CNL)			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			
16b	50% FFP Rate - Cumulative Holding Account								
	(Unfunded Operational Costs In Excess of CNL)			Sum of Current	Qtr and Prior Qtr	Fed Share in Col. F>			
	II. Capped Allocation Projects								
17a	Maintenance Payments (FMAP Rate) -								
	Cumulative Title IV-E Capped Allocation (CA)	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>				
17b	Admin. & CCWIS Costs (50% FFP Rate) -								
	Cumulative Title IV-E Capped Allocation (CA)	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>				
17c	Training Costs (75% FFP Rate) -								
	Cumulative Title IV-E Capped Allocation (CA)	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>				
18a	FMAP Rate -Currently Rptd. & Cumulatively							<b> </b> \$ -	
	Funded Demonstration Operational Costs	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>			*	
18b	50% FFP Rate - Currently Rptd. & Cumulatively							s -	
	Funded Demonstration Operational Costs	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>			Ψ	
18c	75% FFP Rate -Currently Rptd. & Cumulatively							s -	
	Funded Demonstration Operational Costs	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>			Ψ	
19a	FMAP Rate - Cumulative Demonstration					s -		s -	
	Operational Costs In Excess of CA	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>	*		*	
19b	50% FFP Rate - Cumulative Demonstration					s -		s -	
	Operational Costs In Excess of CA	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>			Ψ	
19c	75% FFP Rate - Cumulative Demonstration					۔ ۔		s -	
	Operational Costs In Excess of CA	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>	· ·		Ψ -	
20a	FMAP Rate - Fundable Portion of	\$ -	s -	s -	s -	s -	\$ -	s -	s -
	Total Quarterly Project Operational Costs	Ψ -	Ψ -	Ψ -	Ψ -	· -	· ·	Ψ -	Ψ -
20b	50% FFP Rate - Fundable Portion of	· -	s -	<u> </u>	s -	۔	۔ ۔	e _	s -
	Total Quarterly Project Operational Costs	<u> </u>	· ·	Ψ -	Ψ -	<u> </u>		Ψ -	Ψ -
20c	75% FFP Rate - Fundable Portion of	\$ -	\$ -	s -	\$ -	\$ -	\$ -	s -	s - l
	Total Quarterly Project Operational Costs	_	-	<u> </u>	-	-	-	-	
21a	FMAP Rate - Non-Fundable Portion of	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Total Quarterly Project Operational Costs	_	_	_	_	_	_	_	-
21b	50% FFP Rate - Non-Fundable Portion of	\$ -	\$ -	s -	\$ -	\$ -	\$ -	s -	\$ -
	Total Quarterly Project Operational Costs	ļ <del>-</del>	_	-	_	Ť	Ţ	_	Ŧ
21c	75% FFP Rate - Non-Fundable Portion of	\$ -	\$ -	s -	\$ -	\$ -	\$ -	s -	\$ -
	Total Quarterly Project Operational Costs		_	Ŧ	_	Ť	Ť	_	Ť
22a	FMAP Rate - Cumulative Holding Account								
	(Unfunded Operational Costs In Excess of CA)	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>				
22b	50% FFP Rate - Cumulative Holding Account								
	(Unfunded Operational Costs In Excess of CA)	Sı	m of Curr. Qtr and	Prior Qtr Total Co	mp. in Col. E>				

SECTION C: PROJECT SAVINGS/UNUSED ALL	SECTION C: PROJECT SAVINGS/UNUSED ALLOCATIONS								
Complete either subsection I or subsection II depending or	the cost neutrality me	ethod specified in t	he project terms	& conditions for re	ported project.				
I. Experimental Design Projects					Savings: Estimated	Savings: Actual		Savings: Estimated	
					(E) Total	(F) Fed Share		(H) Agency Share	
23a FMAP Rate - Title IV-E Savings					#DIV/0!	\$ -		#DIV/0!	
Remaining Available For Expenditure					#DIV/0:	Ψ -		#DIV/0:	
23b 50% FFP Rate - Title IV-E Savings					<b> </b> \$ -	<b>s</b> -		s -	
Remaining Available For Expenditure					-	-		-	
II. Capped Allocation Projects					Unused Alloc.: Actual	Unused Alloc.: Est.		Unused Alloc.: Est.	
					(E) Total	(F) Fed Share		(H) Agency Share	
24a FMAP Rate - Cumulative Title IV-E Capped						_		_	
Allocation Remaining Available For Expenditure					- \$	-		-	
24b 50% FFP Rate - Cumulative Title IV-E Capped									
Allocation Remaining Available For Expenditure					- \$	-			
24c 75% FFP Rate - Cumulative Title IV-E Capped								_	
Allocation Remaining Available For Expenditure					-	-		- \$	
SECTION D: FUNDABLE CLAIMS/ESTIMATES	·	•	•	·		•	•		
25a Experimental Design	#DIV/0!	s -	\$ -	s -	#DIV/0!	\$ -	#DIV/0!	s -	
Projects Subtotal	#DIV/0!	-	ъ -		#DIV/U!		#DIVIU:	- ·	
25b Capped Allocation Design	s -	\$ -	\$ -	s -	\$ -	s -	\$ -	s -	
Projects Subtotal	Ψ -	Ψ -	Ψ	Ψ -	Ψ -	Ψ -	-	· ·	
25c All Program	#DIV/0!	s -	<b>s</b> -	s -	#DIV/0!	<b>s</b> -	#DIV/0!	s -	
Projects Total	#B1170.	ļ ·	ļ ·	<u> </u>	#B14101	*	<i>""</i> <b>511770</b> .	*	
				į.				(H) Agency Share	
25d IV-E Agency Share of All Program Projects								#DIV/0!	
Total Estimates								ייייטיש #	

- Data Entry Permitted	
	Control No. 0970
- Calculated Through Embedded Formula	Expires: 06/3

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

## FORM CB-496: TITLE IV-E PROGRAMS QUARTERLY FINANCIAL REPORT PART 4: ANNUAL ADOPTION SAVINGS CALCULATION AND ACCOUNTING REPORT

	PART 4: ANNUAL ADOPTION SAVINGS CALCULATION AND ACCOUNTING REPORT									
	(Attach this report to Part 1 for the current quarter ended September 30th of each year.)									
State/T	ribe:		Reporting Period: Current	Current FFY FMAP R	nitial Report					
				Federal Fiscal Year (FFY):		Prior FFY FMAP Rate	e =	Box	Revised Rpt.	
Calcula	ation Methodolo	gy Used:	CI	nildren's Bureau (CB) Method		CB Method With Actual	nate Approved Method			
				SECTION A: ADOPT	ION	SAVINGS CALCULA	TION	•		
Line #		R	eportino	J Line Title		(A) Current FFY	(C) Total			
1	Prior Reported F	FYs - Total	Cumula	tive Calculated						
	Adoption Saving	-							\$	
2	Average Monthly	/ Number of	Children	n: Current FFY & Prior FFY						
	Title IV-E Adopti	on Assistan	ce Paym	ents "Applicable Child Only Stat	us"					
3	Adoption Assista	ance Payme	nts (Tota	al Computable)						
	On Behalf of Lin	e 2 Applicab	le Child	ren					\$	
4	Calculated Adop	tion Assista	nce Pay	ment Savings						
	On Behalf of Lin	e 2 Applicab	le Child	ren (FMAP Rate X Line 3)		\$ -	\$		\$	
5	Adoption Assista	ance Admini	stration	(Total Computable)						
	On Behalf of Lin								\$	
				ninistration Savings						
				ren (50% FFP Rate X Line 5)		\$ -	\$	-	\$	
				Adoption Savings (All Categories	)					
	On Behalf of Lin	- ''				\$ -	\$	-	\$	
8	Cumulative - To			•						
	(All Categories)	Available Fo	r Expen	diture (lines 1 + 7)		\$ -	\$		\$	
				SECTION B: ADOPT	ION	SAVINGS EXPENDIT	URES			
9	Prior Reported F	FYs - Total	Cumula	tive Expenditures of Calculated						
	Adoption Saving	-							\$	
				doption Savings On:						
				Services (from line 8 amount)					\$	
11		-		doption Savings On:						
				ter Care (from line 8 amount)					\$	
12		-		doption Savings On:						
				le Services (from line 8 amount)					\$	
	Reporting Perior	-								
	Adoption Saving			•		\$ -	\$		\$	
14	Cumulative Tota	•		llculated						
	Adoption Savings (lines 9 + 13)					\$ -	\$		\$	
					PENE	DED ADOPTION SAV	NGS			
			•	Balance of Calculated						
	Adoption Saving						\$		\$	
	Reporting Period - Unexpended Balance of Calculated									
	Adoption Savings (line 7 - line 13)					\$ -	\$		\$	
17	Cumulative - Unexpended Balance of Calculated Adoption Savings (line 15 + line 16)						l.			
	Adoption Saving	s (line 15 +	line 16)			\$ -	\$	-	\$	
This cer	tifies that the info	rmation on P	art 4 of t	his form is accurate and true to the	e best	of my knowledge and helief				
							unnlant are:	fodoral arman f-	doral funda usasi ta assess	
	o certifies that the vice under titles I\		s iuentif	ed in Section B consist of non-fed	erai Tü	nus wnich supplement, not s	uppiant, any	ieuerai or non-fe	uerai iunus used to prov	
<u> </u>										
Signatu Official	ire, Approving									
Jinolal										
	Name Title									

proposition, ride,		
A comovi	Deter	
Agency	Date:	

Form CB-496 [Part 4] (xx/xx/202x) Replaces 06/30/2024 version.

