



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES  
330 C Street SW, Mailstop 3127  
Washington, D.C. 20201

June 1, 2018

Deputy Commissioner  
Kentucky Department for Public Health  
Kentucky Cabinet for Health and Family Services  
275 East Main Street, HS-1-WF  
FRANKFORT, KENTUCKY 40621

Re: Notice of Grant Award  
Personal Responsibility Education Program  
FY 2018

Dear Grantee:

The following award is the full amount allocated for the program year indicated for the Personal Responsibility Education Program in accordance with Section 412(a)(2) of the Social Security Act. This award provides funds for the purpose of operating a program to make work activities available to members of the Tribe.

Award Amount:	\$705,051
Program Year:	10-01-2017 - 09-30-2020

Catalog of Federal Domestic Assistance (CFDA) Program Number	Entity Identification Number (EIN)	Grant Document Number (GDN)	Appropriation Number	Common Accounting Number (CAN)
93.092	1610600439B5	1801KYPREP	75-X-1512	2018,G99SU18,ACF

By accepting this award, the Tribe agrees to use these funds only in accordance with the provisions of all applicable Federal laws, regulations, policies and other terms and conditions governing this program and governing the use of Federal funds and the submission of periodic financial reports. A copy of the Terms and Conditions for FY 2018 is enclosed with this award. Any expenditure found to have been made in violation of these requirements is subject to disallowance and recoupment by this agency and the imposition of additional interest charges under 45 CFR 30.13 and 30.14.

Specifically, the Tribe agrees to comply with the provisions of Federal regulations (45 CFR 92.20(b)(7)) that limit the amount and timing of your requests to draw Federal funds to the minimum amount necessary to meet actual and immediate program needs and requirements. Funds included in this award remain available until expended, although withdrawals may not exceed the total amount authorized in this and previous awards. Failure to adhere to funds withdrawal and reporting requirements may result in the unobligated portion of your letter-of-credit to be revoked.

Grant funds are made available through the HHS Payment Management System (PMS). Questions concerning payments should be directed to: Division of Payment Management, PO Box 6021, Rockville, Maryland 20852 (Internet web site: <http://www.dpm.psc.gov>), or to the PMS Help Desk at (877) 614-5533. Questions concerning the program should be directed to LeBretia White, Office of Family and Youth Services Bureau at (202) 205-9605 or at [lebretria.white@acf.hhs.gov](mailto:lebretria.white@acf.hhs.gov); questions concerning financial reporting should be directed to Manolo Salgueiro, Office of Grants Management at (202) 690-5811 or at [manolo.salgueiro@acf.hhs.gov](mailto:manolo.salgueiro@acf.hhs.gov).

Sincerely,

Mausami Kothari  
Grants Officer  
Division of Mandatory Grants