Funding Approval/Agreement

Emergency Solutions Grants Program
Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act, 42 U.S.C. 11371 et seq.
CFDA Number 14.231

U.S. Department of Housing and Urban Development
Office of Community Planning and Development

1. Recipient Name and Address State Of Tennessee 500 James Robertson Parkway 3Rd Floor Nashville, TN 37243-1204	2. Unique Federal Award Identification Number: E-20-DC-47-0001 3. Tax Identification Number: 626001445 4. Unique Entity Identifier (DUNS): 879015923

5. Fiscal Year (yyyy): 2020

6. Previous Obligation (Enter "0" for initial Fiscal Year allocation)	$ 0
7. Amount of Funds Obligated or Deobligated by This Action (+ or -)	$3,232,927
8. Total Amount of Federal Funds Obligated	$3,232,927

9. Total Required Match: $

10. Start Date of Recipient's Program Year (mm/dd/yyyy)	11. Date HUD Received Recipient's Consolidated Plan Submission (mm/dd/yyyy)	12. Period of Performance Start Date (the date listed in Box 18) (mm/dd/yyyy)
7/1/2020	5/15/2020	6/22/2020

13. Type of Agreement (check applicable box) ☒ Initial Agreement (Purpose #1 – Initial Fiscal Year allocation) ☐ Amendment (Purpose #2 – Deobligation of funds) ☐ Amendment (Purpose #3 – Obligation of additional funds)	14. Special Conditions and Requirements ☐ Not applicable ☒ Attached 15. Period of Performance End Date (24 months after the date listed in Box 18) (mm/dd/yyyy) 6/22/2022

General Terms and Conditions: This Agreement between the U.S. Department of Housing and Urban Development (HUD) and the Recipient is made pursuant to the authority of Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11371 et seq.) and is subject to the applicable annual appropriations act. The Recipient's Consolidated Plan submissions (including the Recipient's approved annual Action Plan and any amendments completed in accordance with 24 CFR Part 91), the Emergency Solutions Grants Program regulations at 24 CFR Part 576 (as now in effect and as may be amended from time to time), and this Agreement, including any special conditions attached to this Agreement, constitute part of this Agreement. Subject to the terms and conditions of this Agreement, HUD will make the funds for the specified Fiscal Year available to the Recipient upon execution of this Agreement by the Recipient and HUD. The funds may be used for costs incurred before the Period of Performance, provided the costs are otherwise allowable and were incurred on or after the dates listed in box 10 and box 11 or 90 calendar days before the date in box 12 (whichever is later), or as provided in a prior written approval by HUD. The Recipient agrees to assume all of the responsibilities with respect to environmental review, decision making, and action required under the HUD regulations at 24 CFR Part 58. Nothing in this Agreement shall be construed as creating or justifying any claim against the federal government or the Recipient by any third party. Without the Recipient's execution of an amendment or other consent, HUD may amend this Agreement either to provide additional funds to the Recipient for the specified Fiscal Year or to deobligate funds under this Agreement in accordance with applicable law.

16. For the U.S. Department of HUD (Name, Title, and Contact Information of Authorized Official) Erik D. Hoglund CPD Director	17. Signature X Erik D. Hoglund	18. Federal Award Date (mm/dd/yyyy) 6/22/2020
19. For the Recipient (Name and Title of Authorized Official) Bill Lee, Governor	20. Signature X Bill Lee	21. Date (mm/dd/yyyy) 7/14/2020

Funding Information (HUD Accounting Use Only):

PAS Code: HAES	Region: 04	Program Code: SOE
Appropriation: 00192	Office: (Knoxville)	Allotment: 868
Appro Symbol: F		

Special Conditions and Requirements for FY 2020 ESG Program

Indirect Cost Rate

The Recipient shall attach a schedule of its indirect cost rate(s) in the format set forth below to the executed Agreement that is returned to HUD. The Recipient shall provide HUD with a revised schedule when any change is made to the rate(s) described in the schedule. The schedule and any revisions HUD receives from the Recipient shall be incorporated herein and made a part of this Agreement, provided that the rate(s) described comply with 2 CFR part 200, subpart E.

Instructions: The Recipient must identify each agency or department of the Recipient that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414(f)), and the type of direct cost base to which the rate will be applied (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rates for subrecipients.

Recipient Department/Agency	Indirect cost rate	Direct Cost Base
___THDA_____	_30.32_%	_$2,568,827__
_____	_____%	_____
_____	_____%	_____

Special Conditions and Requirements for FY 2020 ESG Program

Serving Youth Who Lack 3rd Party Documentation or Live in Unsafe Situations

Notwithstanding any contrary requirements under the McKinney-Vento Homeless Assistance Act or 24 CFR part 576, youth aged 24 and under who seek assistance (including shelter, services or rental assistance) shall not be required to provide third-party documentation that they meet the homeless definition in 24 CFR 578.3 as a condition for receiving assistance; and unaccompanied youth aged 24 and under (or families headed by youth aged 24 and under) who have an unsafe primary nighttime residence and no safe alternative to that residence shall be considered homeless for purposes of assistance provided by any private nonprofit organization whose primary mission is to provide services to youth aged 24 and under and families headed by youth aged 24 and under.

Recipient Integrity and Performance Matters

(applicable if the amount in Box 8 of the Agreement is greater than $500,000)

The Recipient shall comply with the requirements in Appendix XII to 2 CFR part 200—Award Term and Condition for Recipient Integrity and Performance Matters.

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16. For the U.S. Department of HUD (Name, Title, and Contact Information of Authorized Official)	17. Signature	18. Federal Award Date (mm/dd/yyyy)
Erik D. Hoglund CPD Director	X Erik D. Hoglund	6/22/2020
19. For the Recipient (Name and Title of Authorized Official)	20. Signature	21. Date (mm/dd/yyyy)
Bill Lee, Governor	X Bill Lee	7/14/2020

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