

**Part 1 Face Sheet**  
**MEMORANDUM OF AGREEMENT**  
**STATE OF CONNECTICUT**  
**Department of Social Services**  
**CONTRACT ADMINISTRATION**

MOA - Financial

1. Indicate Memorandum Type. Non-financial agreements do not require fiscal review.
2. Originating agency internal approvals must be shown prior to contracting state agency acceptance.
3. The Department of Social Services and the Contractor as listed below hereby enter into an agreement subject to the terms and conditions stated herein and subject to the applicable provisions of the Connecticut General Statutes.
4. Acceptance of this contract implies conformance with terms and conditions as stated in this agreement.

	(1) ORIGINAL <input type="checkbox"/> (2) AMENDMENT <input checked="" type="checkbox"/> #1	(3) DSS Identification No. 15DSS2402AY 064UCN-OSD-01 A1	(4) Contracting Agency Identification UOCM-1
CONTRACTING STATE AGENCY	(5) Contracting State Agency Name UNIVERSITY OF CONNECTICUT- SCHOOL OF SOCIAL WORK		(6) Contracting State Agency State Number  (7) Contracting State Agency FEIN 060772160
	(8) Contracting State Agency Address 438 Whitney Road Extension Storrs, CT 06269-4017		(9) Contracting State Agency Liaison & Phone No. Laura Kozma (860) 486-3622
ORIGINATING STATE AGENCY	(10) Originating State Agency Department of Social Services		(11) Originating State Agency Number DSS60000 (12) Originating State Agency FEIN 061274678
	(13) Originating State Agency Address 55 Farmington Avenue, Hartford, CT 06105		(14) Originating State Agency Liaison & Phone No. Darleen Klase 860-424-5587
CONTRACT PERIOD	(15) Contract Period (From - To) 07/01/2015 - 06/30/2018		(16) Funding Period (From -To) 07/01/2016 - 6/30/2017
CANCELLATION CLAUSE	This agreement shall remain in full force and effect for the entire term of the contract period stated above unless cancelled.		(17) Required No. Of Days Written Notice. Thirty (30)
COMPLETE DESCRIPTION OF SERVICE	(18) Contracting state agency agrees to comply with the terms of the original agreement and this amendment as it continues on pages 2-3.		
COST AND SCHEDULE OF TRANSFER CERTIFICATES	(19) The maximum dollar value of this contract shall be increased by \$5,924,500.00 from \$7,413,566.00 to \$13,338,066.00. Upon execution and approval of this contract by the Commissioner, the Contractor shall provide services and submit transfer invoices for approval. Upon approval, the Department shall process the transfer invoices in accordance with the original payment terms.		

(20) Line No.	(21) Budget Reference	(22) Fund	(23) Department	(24)		(25) Account	(26) Project/Grant	(27) Chart 1	(28) Chart 2	(29) Amount
				Program	SID					
	2016	11000	DSS00140	14000	10020	51133	DSS_NONPROJECT	168025	NO_CODE	\$5,924,500

(30) ACCEPTANCE AND APPROVALS

(31) STATUTORY AUTHORITY - §4-8, 17b- 3

(32) Department of Social Services PROGRAM DIRECTOR <i>Darleen Klase</i>	Darlene Klase, Director, Office of Skill Development	DATE 8/12/16
(33) Department of Social Services FISCAL OFFICIAL <i>Michael Gilbert</i>	Michael Gilbert, Director Financial Services Division	DATE 8/30/16
(34) Department of Social Services CONTRACT ADMINISTRATOR <i>Ann Simeone</i>	Ann Simeone, Manager Contract Administration	DATE 8-30-16
(65) CONTRACTING STATE AGENCY AUTHORIZED OFFICIAL <i>Laura Kozma</i>	Laura Kozma Office of Research and Sponsored Programs	DATE 8/19/16
(36) ORIGINATING AGENCY AUTHORIZED OFFICIAL <i>Roderick L. Bremby</i>	Roderick L. Bremby, Commissioner Department of Social Services	DATE 8/31/16

The following sections of the original MOA shall be revised as follows

**Part 3, Section D. 1. - SERVICE AREA IV- SPECIAL PROJECTS:**

Task 1: a. shall be deleted in its' entirety and replaced with the following:

- a. Assign staff to projects to support LEAN, Fatherhood and others as requested. Projects and new initiatives serve to:

**Part 3, Section E. 1. - STAFFING shall be deleted in its' entirety and replaced with the following:**

1. Organizational and Skill Development Unit: Throughout the term of this contract the Contractor shall employ a core staff, stationed within the Department. At a minimum the OSD unit will consist of (titles used are UCONN classifications) one Director, support staff (e.g. 1 administrative assistant, 2 clerk typists), direct service staff to the agency (OSD Consultant and Project Managers, 1 Executive Media Producer, & 1 Media Producer III) and 5 Grants & Contracts Specialist I.

**Part 4, Section A - BUDGET shall be appended as follows:**

1. The approved budget for the period July 1, 2016 through June 30, 2017 is set forth in Exhibit B, which is attached hereto and made a part hereof. Contractor shall utilize funds as set forth in the approved budget, on page 3 of this amendment.

**Part 4, Section B, f. Payment Provisions shall be deleted in its' entirety and replaced with the following:**

- f. In the event fringe benefit levels established by the state or in the event union wage agreements exceed the amount budgeted for such costs, in any fiscal year, the contract budget and payment amount shall be adjusted to provide the additional funds required to meet these obligations. In the event the annual contracted employee salary 5% increase are not issued during the contract period, the contract budget and payment amount shall be adjusted higher or lower depending upon collective bargaining agreements to provide.

All other terms and conditions of the original agreement, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

1. Exhibit B, page 2 in the original MOA shall be revised as follows:

BUDGET	
	07/01/16 - 06/30/17
SALARIES - OSD	\$597,314.00
SALARIES - ImpaCT	\$2,122,999.78
SALARIES - Other Personnel	\$142,654.05
LONGEVITY	\$44,478.80
<b>TOTAL SALARIES &amp; LONGEVITY</b>	<b>\$2,907,446.63</b>
<b>FRINGE BENEFITS</b>	
Classified Employee Rate	66.9%
Dean Faculty Fringe Rate	55.8%
Retiree Fringe Rate	21.0%
Fringe Rates Totaled	\$1,841,136.65
Total Salary & Fringes	\$4,748,583.28
<b>CONTRACTURALS - OSD</b>	
	\$20,000
<b>CONTRACTURALS - ImpaCT</b>	
	\$15,000
<b>COMMODITIES - OSD</b>	
	\$10,000
<b>COMMODITIES - ImpaCT</b>	
	\$60,000
<b>TRAVEL-IN-STATE - OSD</b>	
	\$50,000
<b>TRAVEL-IN-STATE - ImpaCT</b>	
	\$21,000
<b>EQUIPMENT - OSD</b>	
	\$15,000
<b>Expenditure TOTALS:</b>	<b>\$191,000</b>
<b>TOTAL DIRECT COSTS</b>	<b>\$4,939,583.28</b>
<b>INDIRECT COST BASE</b>	<b>\$4,924,583.28</b>
Indirect Cost @ 20%	\$984,916.66
<b>GRANT TOTAL</b>	<b>\$5,924,499.94</b>