

Official Grant Award Notification

Grantee Information

Organization Name: The City of Saint Paul

Identified Official with Authority Name and Title: Muneer Karcher-Ramos- Director of Office of Financial

Empowerment

Address: 15 W. Kellogg Blvd., 700 City Hall City/State/ZIP+4: Saint Paul, MN 55102-1615

Phone and Email: (651) 266-6220; muneer.karcher-ramos@ci.stpaul.mn.us

Grantee Project Staff

Program Contact Name: Muneer Karcher-Ramos

Phone and Email: (651) 266-6220; muneer.karcher-ramos@ci.stpaul.mn.us

Business Manager or Accountant Name: Brad Meyer

Phone and Email: (651) 266-6377; brad.meyer@ci.stpaul.mn.us

Grant Project Title: Expanded Meal Access for Minnesota Children and Adults Grant

Single Source Yes□ No⊠

Funding/Encumbrance Information

GMS NUMBER (if applicable):

SWIFT Contract Number: 183625 SWIFT Vendor Number: 0000192898 Purchase Order Number: 3000023562

Funding Source/Legislative Authority: Coronavirus Aid, Relief, and Economic Secuirty (CARES) Act-

Coronavirus Relief Fund (CRF)

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State Fiscal Year: SFY2020

Fund: 3010

FinDeptID: E373D090 AppropID: E37C007 Account: 441352 PC Bus Unit: E3701 Project ID: E37P00720

Activity ID: F
Source: REIMB

Amount: \$395,146.00 (should equal total award)

Federal Award Year: 2020 Federal CFDA Number: 21.019

Federal CFDA Name: Coronavirus Relief Fund (CRF)

Subrecipient Indirect Cost Rate N/A

Research and Development? \square Yes or \boxtimes No

Grantee DUNS Number: 006222343

Award Period

Start Date: 07/01/2020 End Date: 12/30/2020

This is a half of a year grant.

Continuation grant awards ____ are / __X_ are not an option.

Original/Initial Award: \$395,146.00

MDE Authorized Representative

Name: Lisa Burton

Division: Nutrition, Health and Youth Development

Phone and Email: (651) 582-8488;

lisa.burton@state.mn.us

Grant Specialist

Name: Dana Garry

Division: Agency Finance- Grant Services

Phone and Email: (651) 582-8895;

dana.garry@state.mn.us

Terms of Acceptance

This award is made with respect to the terms and conditions of the application materials for the identified grant project under which the grantee has an approved application and has agreed to the assurances, which are incorporated by reference herein. These materials are referred to as the "Application" throughout this Official Grant Award Notification (OGAN). By accepting this award the grantee agrees to comply with all provisions of the award including all assurances and certifications made in the Application and all applicable state or federal statutes, regulations and guidelines. The grantee agrees to administer the program in accordance with the approved Application, budget, timelines, and other supplemental information submitted in support of the approved Application. All terms not defined below are as set forth in the Application.

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1. PURPOSE OF FUNDING/GRANT

➤ The purpose of the funds is to provide prepared meals to Minnesota children and adults who are experiencing food insecurity as a result of COVID-19.

2. PROGRAM REPORTING

Interim Progress Reports (IPR), summarizing grant activities and outcomes, including any data collected/requested related to the grant program, are due to MDE, as follows:

- Total number of meals served between July 1 and December 30, 2020.
- Number of additional meals served using grant funds between July 1 and December 30, 2020.
- Estimated unduplicated number of children and adults served between July 1 and December 30, 2020.

IPR must be received by January 30, 2021 for activities occurring for the grant period of July 1 through December 30, 2020.

3. FINANCIAL REPORTING

Financial Reporting Forms (FRF) summarizing grant expenditures to date, shall be submitted in the form and manner prescribed by MDE, as follows:

- a) FRFs must be received by October 31, 2020 reporting expenditures incurred for all expenses from the beginning of the grant period to demonstrate that grantee is able to spend the full grant amount by December 30, 2020. All other FRFs must be received by January 30, 2021.
- b) Reimbursement of approved expenditures will be made based on expenditures reported on the FRF. Reimbursement for expenditures deemed allowable, allocable and reasonable will be made within 30 days of receipt of a request. Payments are subject to review of supporting documentation, if requested. The state reserves the right to withhold payment for any reimbursement request deemed to be in question of being allowable, allocable and reasonable, or for which adequate supporting documentation does not exist.
- c) Reimbursement requests may be submitted no more frequently than once per month and no less frequently than quarterly unless otherwise stated in this OGAN.
- d) Grantees must track the grant budget and record expenditures and reimbursement payments separately from their other organization budgets.

4. FINANCIAL RECONCILIATION/MONITORING AND SUPPORTING DOCUMENTATION

a) A financial reconciliation or desk review of reported expenditures to supporting documentation will occur at least once during the award period on grants that exceed \$50,000. MDE will request supporting documentation for review and reconciliation of at least two (2)

budget line item expenditures based on a financial reporting form (FRF) submitted by the grantee.

- b) In the event **a monitoring visit**(s) is required by MDE, the grantee shall cooperate with MDE and shall comply with MDE's request for documentation and other information, before, during and/or after the visit(s).
- c) Financial documentation to support expenditures incurred under this award must be maintained by the grantee and provided to MDE upon request.

5. FINAL PROGRAM AND FINANCIAL REPORTING

Final Program and Financial Reporting Forms are due by January 30, 2021. Final reporting may include, but is not limited to, the following items:

- a) A final program report summarizing activities completed, as requested by MDE, along with supporting data requested by the program staff or federal or state funding.
- b) Final Financial Reporting Form (FRF) with a budget narrative describing expenditures.
- c) Expenditure detail report, such as general ledger, from accounting system.

6. BUDGET AND/OR WORK PLAN REVISIONS

The grantee must receive prior written approval from MDE for any budgetary changes of approved line item amounts greater than 10 percent of the total grant award available for expenditure during the grant period. Total budget line item deviations exceeding 10 percent of the total award must be approved in writing by MDE prior to incurring the expenditure. In their request for approval the grantee must include supporting information to justify why the change is necessary. MDE is not legally obligated to approve expenditures incurred on budget line item changes that exceed 10 percent of the total award for which prior approval has not been granted. Grantee may not incur expenditures within a budget line item that is not included in the approved budget without the written approval of MDE.

7. CANCELLATION

- a) **Cancellation With or Without Cause.** An award contract may be cancelled by the state at any time, with or without cause, upon thirty (30) days' written notice to the Grantee. Upon termination, the Grantee will be entitled to payment, determined on a pro rata basis, for services satisfactorily performed and for approvable expenditures.
- b) Cancellation Due to Discontinued or Insufficient Funding. It is expressly understood and agreed that in the event the funding to the state from Federal sources or appropriations by the Minnesota Legislature are not obtained and/or continued at an aggregate level sufficient to allow for the grantee's program to continue operating, the grant shall immediately be

terminated upon written notice by the state to the grantee. The state is not obligated to pay for any services that are provided after notice and effective date of termination. However, the grantee will be entitled to payment, determined on a pro-rata basis, for services satisfactorily performed and approvable expenditures incurred prior to termination to the extent that funds are available. The state will not be assessed any penalty if the grant is terminated because of a decision of the Minnesota Legislature, or other funding source, not to appropriate funds. The state must provide the grantee notice within a reasonable time of the state receiving notice.

c) Cancellation Due to Failure to Comply. The state may cancel an award contract immediately if the state finds that there has been a failure to comply with the provisions of an award, that reasonable progress has not been made or that the purposes for which the funds were awarded/granted have not been or will not be fulfilled. The state may take action to protect the interests of the state of Minnesota, including the refusal to disburse additional funds and requiring the return of all or part of the funds already disbursed.

8. AMENDMENTS

Any amendments to this award shall be in writing and shall be executed by the same parties who executed the original award, or their successors. An amendment must be requested 45 days prior to the end date of the award period and is valid and effective upon written approval from the MDE authorized representative or their delegate. *No amendments will be considered on expired grant awards*.

MDE Signatures

properly administer grant funds have been measured.	
Lisa Burton / Lisa Burton	9-17-20
Authorized Representative Name and Signature	Date
I, the division director, by signing below verify that agency policies and procedures awarding of this grant and do hereby approve this award and attest to the Authoriz of said documentation and documents related to this award.	
Monica L. Herrera	9/18/2020
Division Director Name and Signature	Date
I hereby certify that funds have been encumbered as required by Minnesota Statute 16C.05. (Signature is for current fiscal year only.)	es, section 16A.15 and
Joel Bergevin / Joel Bergevin	9/22/2020
Encumbrance Agent Name and Signature	Date
As representative of the Minnesota Department of Education, I hereby certify that release of funds are therefore approved, legal, binding and valid.	this award notification and
Andre Prahl /	
Authorized Representative Name and Signature	Date

I, the Authorized Representative, acknowledge by signing below that I have reviewed all documentation and documents related to this award to ensure that adequate oversight and appropriate internal controls to