



**Community Action Partnership of Madera County, Inc.
Board of Directors Meeting**

Agenda

**Thursday, June 9, 2022
CAPMC Conference Room 1 / 1a
1225 Gill Avenue
Madera, CA 93637
5:30 pm**

Webex Meeting Information

Meeting number: 146 208 1692 | Password: CAPMC1225

Meeting Link: <https://maderacap.webex.com/maderacap/j.php?MTID=m876f6692b88957dc5300bb4a4d139117>

Join by phone: 1-844-992-4726 United States Toll Free

Access code: 146 208 1692

Supporting documents relating to the items on this agenda that are not listed as “Closed Session” are available for inspection during the normal business hours at Community Action Partnership of Madera County, 1225 Gill Avenue, Madera, CA 93637. Supporting documents relating to the items on the agenda that are not listed as “Closed Session” may be submitted after the posting of the agenda and are available at Community Action Partnership of Madera County, Inc. during normal business hours.

Please visit www.maderacap.org for updates.

CALL TO ORDER BOARD OF DIRECTORS

ROLL CALL – Cristal Sanchez

A. PUBLIC COMMENT

The first ten minutes of the meeting are reserved for members of the public to address the Board of Directors on items of interest to the public that are within the subject matter jurisdiction of the agency. Speakers shall be limited to three minutes. Attention is called to the fact that the Board is prohibited by law from taking any action on matters discussed that are not on the agenda, and no adverse conclusion should be drawn if the Board does not respond to the public comments at this time.

B. ADOPTION OF THE AGENDA

B-1 ADDITIONS TO THE AGENDA: Items identified after posting the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-third vote, or unanimous vote if quorum is less than full board, required for consideration. (Government code 54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

B-2 ADOPTION OF AGENDA: Adoption of agenda as presented or with approved additions.

C. TRAINING/ADVOCACY ISSUES

None

D. CONSENT ITEMS

All items listed under Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting – May 12, 2022.

D-2 Review and consider accepting the Bank of America Credit Card Statements:
• May 2022

D-3 Review and consider accepting the American Express Credit Card Statement and All Other Credit Card Statements:
• April 2022

D-4 Review and consider approving the following **Madera/Mariposa Regional Head Start** Reports:
• Monthly Enrollment Report – April 2022
• In-Kind Report – April 2022
• CACFP Program Report – April 2022

D-5 Review and consider approving the following **Madera Early Head Start** Reports:
• Monthly Enrollment Report – April 2022
• In-Kind Report – April 2022

D-6 Review and consider approving the following **Madera Migrant/Seasonal Head Start** Reports:
• Monthly Enrollment Report – April 2022
• In-Kind Report – April 2022
• CACFP Program Report – April 2022
• Program Information Report (PIR) – April 2022

D-7 Review and consider approving the following **Fresno Migrant Head Start** reports:
• Monthly Enrollment Report – April 2022
• In-Kind Report – April 2022
• CACFP Program Report – April 2022

- D-8 Review and consider ratifying the submission of the California Department of Social Services (CDSS), Child Care and Development Division (CCDD) Program Self-Evaluation (PSE) Survey.
- D-9 Review the Madera County Child Advocacy Center (CAC) Program Report for May 2022 (Informational Only).
- D-10 Review the Child Care Alternative Payment and Resource & Referral Program Report for May 2022 (Informational Only).
- D-11 Review the Community Services Report for May 2022 (Informational Only). *To be distributed at the Board of Directors meeting.*
- D-12 Review the Homeless Engagement for Living Program (H.E.L.P) Center Report for May 2022 (Informational Only). *To be distributed at the Board of Directors meeting.*

E. DISCUSSION ITEMS

- E-1 Accept resuming the Board of Directors meetings to exclusively in-person without a virtual option effective July 7, 2022 except to the extent a majority of the Board of Directors has approved a teleconferencing exemption for a particular meeting in accordance with the provisions of Government Code Section 54953(e)(1)-(e)(3).
- E-2 Consider authorizing the Executive Director to sign and submit the October 1, 2022 through September 30, 2023 grant application for Victim Witness Assistance (VW) Program, including any extensions and/or amendments during the funding period.
- E-3 Review and consider approving the submission of the Madera Early Head Start Non-Federal Share Waiver for 2021-2022.
- E-4 Review and consider approving the 2022-2023 Regional and Early Head Start COLA and Quality Improvement Grant Applications.
- E-5 Review and consider approving the 2022-2023 Madera Migrant Seasonal Head Start COLA and Quality Improvement Grant Applications.
- E-6 Review and consider approving the 2022-2023 Fresno Migrant Seasonal Head Start COLA and Quality Improvement Grant Applications.
- E-7 Review and consider approving the 2021-2022 Amendment #2 Budget for CMIG One-Time COVID Round 2 funding to Stanislaus County Office of Education.
- E-8 Review and consider approving the 2021-2022 Amendment #3 One-Time increase in CMIG funds from Stanislaus County Office of Education.
- E-9 Review and consider approving the agency-wide budget. *Item to be distributed at the Board of Directors meeting.*
- E-10 Review and ratify the filings of the tax and information returns of Community Action Partnership of Madera County, Inc. prepared by Brown Armstrong CPA's.

F. ADMINISTRATIVE/COMMITTEE REPORTS TO BOARD OF DIRECTORS

- F-1 Finance Committee Report – None
- F-2 Personnel Committee Report – None
- F-3 Executive Director Monthly Report – (May 2022)
- F-4 Financial Statements (May 2022) *To be distributed at the Board of Directors meeting.*
- F-5 Head Start Policy Council/Committee Reports
- F-6 Work Related Injury Report – (May 2022) *To be distributed at the Board of Directors meeting.*
- F-7 CAPMC Board of Directors Attendance Report – (May 2022)
- F-8 Staffing Changes Report for May 2022 *To be distributed at the Board of Directors meeting.*

G. CLOSED SESSION

None

H. CORRESPONDENCE

- H-1 Error Calculation Report pertaining to the Program Quality Improvement (PQI), Contract Monitoring Review (CMR), and Baseline Review for the Child Care Alternative Payment and Resource & Referral Program.

I. ADJOURN

I, Cristal Sanchez, Strategic Plan Coordinator & Assistant to the Executive Director, declare under penalty of perjury that I posted the above agenda for the regular meeting of the CAPMC Board of Directors for June 9, 2022, in the Lobby of CAPMC as well as on the agency website by 5:00 p.m. on June 3, 2022.



Cristal Sanchez
Strategic Plan Coordinator &
Assistant to the Executive Director

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Regular Board of Directors Meeting

May 12, 2022

1225 Gill Ave Madera, CA 93637

Meeting Link: https:

<https://maderacap.webex.com/maderacap/j.php?MTID=m876f6692b88957dc5300bb4a4d139117>

ACTION SUMMARY MINUTES

The Board of Directors Meeting was called to order at 5:33 p.m. by Chair Sheriff Tyson Pogue.

Members Present In-Person

Sheriff Tyson Pogue, Chair
Eric LiCalsi, Vice-Chair
Donald Holley
Martha Garcia
Supervisor Leticia Gonzalez
Steve Montes
Debi Bray

Members Present Virtually

Deborah Martinez
David Hernandez,
Secretary/Treasurer
Diana Palmer
Alma Hernandez, HS PC
Representative

Members Absent

Aurora Flores
Molly Hernandez
Richard Gutierrez
Vicki Bandy

Personnel Present In-Person

Cristal Sanchez
Daniel Seeto
Irene Yang
Mattie Mendez
Nancy Contreras-Bautista

Personnel Present Virtually

None

Public – Other Present

None

A. PUBLIC COMMENT

Board Member Donald Holley, announced the passing of a community member and noted service details.

B. ADOPTION OF THE AGENDA

ADDITIONS TO THE AGENDA: Items identified after posting of the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-thirds vote, or unanimous vote if quorum is less than full board, required for consideration. (Government Code 54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

ADOPTION OF THE AGENDA: Adoption of the revised agenda.

Motion: APPROVE WITH NECESSARY AMENDMENTS

Moved By: Steve Montes, Seconded By: Debi Bray

Vote: Carried Unanimously

C. TRAINING/ADVOCACY ISSUES

None

D. BOARD OF DIRECTOR'S CONSENT CALENDAR

All items listed under Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

- D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting – April 14, 2022.
- D-2 Review and consider approving the Minutes of the Madera/Mariposa Regional & Early Head Start Policy Council Committee Meeting – April 7, 2022.
- D-3 Review and consider approving the Minutes of the Fresno Migrant/Seasonal Head Start Executive Policy Council Committee Meeting – April 21, 2022.
- D-4 Review and consider accepting the Bank of America Credit Card Statements:
 - April 2022
- D-5 Review and consider accepting the American Express Credit Card Statement and All Other Credit Card Statements:
 - March 2022
- D-6 Review and consider approving the following **Madera/Mariposa Regional Head Start** Reports:
 - Monthly Enrollment Report – March 2022
 - In-Kind Report – March 2022
 - CACFP Program Report – March 2022
- D-7 Review and consider approving the following **Madera Early Head Start** Reports:
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 - In-Kind Report – March 2022
- D-8 Review and consider approving the following **Madera Migrant/Seasonal Head Start** Reports:
 - Monthly Enrollment Report – March 2022
 - In-Kind Report – March 2022
 - CACFP Program Report – March 2022

- D-9 Review and consider approving the following **Fresno Migrant Head Start** reports:
- Monthly Enrollment Report – March 2022
 - In-Kind Report – March 2022
- D-10 Review the Madera County Child Advocacy Center (CAC) Program Report for April 2022 (Informational Only).
- D-11 Review the Child Care Alternative Payment and Resource & Referral Program Report for April 2022 (Informational Only).
- D-12 Review the Community Services Report for April 2022 (Informational Only).
- D-13 Review the Homeless for Engagement for Living Program (H.E.L.P) Center Report for April 2022 (Informational Only).

Motion: APPROVE AS PRESENTED

Moved By: Supervisor Leticia Gonzalez, Seconded By: Steve Montes

Vote: Carried Unanimously

E. DISCUSSION / ACTION ITEMS

E-1 Discuss resuming the Board of Directors meetings to exclusively in-person.

Mattie Mendez, Executive Director, presented regarding the resuming the Board of Directors meetings to exclusively in-person. The Board of Directors discussed returning to in-person meetings without a virtual option and requested staff to bring back an action item with guidance and direction from the agency's legal counsel to ensure compliance with the Brown Act.

E-2 Review and consider approving the renewal of the Workers' Compensation coverage and the broker's consulting fee.

Irene Yang, Human Resources Director, presented regarding the renewal of the Workers' Compensation coverage and the broker's consulting fee. Irene Yang noted an increase in payroll and experience modification resulted in an 21% premium increase. It was requested that staff change any "pending" quotes to "declined" on the agenda item as the request for quotes period has now closed.

Motion: APPROVE WITH NECESARRY CHANGES TO AGENDA ITEM.

Moved By: Donald Holley, Seconded By: Supervisor Leticia Gonzalez

Vote: Carried Unanimously

E-3 Review and consider ratifying the submission of the application for the City of Madera CDBG grant.

Mattie Mendez, Executive Director, presented regarding the submission the submission of the application for the City of Madera CDBG grant. Mattie noted that funds are to be utilized towards homelessness efforts, such as representation on the FMCoC, the Homeless Point in Time (PIT) Count, and to seek additional sources of funding to serve the individuals experiencing homelessness.

Motion: APPROVE AS PRESENTED

Moved By: Debi Bray, Seconded By: Steve Montes

Vote: Carried Unanimously

E-4 Consider approving the submission of the 2022 Low Income Household Water Assistance Program (LIHWAP) contract.

Mattie Mendez, Executive Director, presented regarding the submission of the 2022 Low Income Household Water Assistance Program (LIHWAP) contract. The LIHWAP program assists low-income clients with paying their water and/or wastewater system utility bills. The benefit amount maximum is \$2,000 per household and can be applied to either the water or the wastewater bill. The benefit amount is based on the customer's past due amount, current charges, fees and taxes and other charges associated with the water or wastewater services identified on the customer's bill. This funding is not contingent upon COVID related impact.

Motion: APPROVE AS PRESENTED

Moved By: Supervisor Leticia Gonzalez, Seconded By: Donald Holley

Vote: Carried Unanimously

E-5 Review and consider approving the Agency to award its annual entity-wide single audit for June 30, 2022 for calendar year 2021 to Brown Armstrong CPA's.

Daniel Seeto, Chief Financial Officer, presented regarding the annual entity-wide single audit for June 30, 2022 for calendar year 2021 to be awarded to Brown Armstrong CPA's. This will be the fifth year that the Agency has used Brown Armstrong CPA's. The RFP provided for the initial year and an option of four additional one-year extensions.

Motion: APPROVE AS PRESENTED

Moved By: Donald Holley, Seconded By: Steve Montes

Vote: Carried Unanimously

F. ADMINISTRATIVE/COMMITTEE REPORTS TO BOARD OF DIRECTORS

- F-1 Finance Committee Report – None
- F-2 Personnel Committee Report – None
- F-3 Executive Director Monthly Report – (April 2022)
- F-4 Financial Statements (April 2022)
- F-5 Head Start Policy Council/Committee Reports
- F-6 Work Related Injury Report – (April 2022)
- F-7 CAPMC Board of Directors Attendance Report – (April 2022)
- F-8 Staffing Changes Report for April 5 – May 3, 2022

G. CLOSED SESSION

None

H. CORRESPONDENCE

- H-1 Correspondence dated March 14, 2022 from the Office of Head Start regarding FY 2022 Head Start Funding Increase.
- H-2 Correspondence dated March 21, 2022 from the Office of Head Start regarding Head Start Categorical Eligibility for Families Eligible for the Supplemental Nutrition Assistance Program.

I. ADJOURN

Chair Sheriff Tyson Pogue adjourned the Board of Directors meeting at 6:07 p.m.

Motion: APPROVE AS PRESENTED

Moved By: Donald Holley, Seconded By: David Hernandez

Vote: Carried Unanimously

**Bank of America Business Card
Credit Card Charges**

MAY 2022 Statement

Mattie Mendez / Administration

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
04/05/2022	FILLABLE PDFS	No	Subscription Cancelled and Refund Issued	- \$399.00	200.0-6130-2.0-000-90	No
04/05/2022	AMTRAK	No	Train Ticket for HELP Center Participant	\$26.25	217.0-7240-2.0-000-00	Yes
04/07/2022	AMAZON	No	Office Supplies – Binders	\$34.76	200.0-6110-2.0-000-90	Yes
04/08/2022	AMAZON	No	Office Supplies – Plastic Multipocketed Folders	\$56.24	200.0-6110-2.0-000-90	Yes
04/09/2022	AMAZON	No	Child Abuse Prevention Month Awareness Activity Supplies	\$92.35	200.0-6110-2.0-000-90	Yes
04/09/2022	MAIL CHIMP	No	Newsletter Software (IT)	\$59.00	200.0-6130-2.0-000-90	Yes
04/14/2022	DOOR DASH – TOGOS	No	Housing the Homeless Committee Meeting	\$148.43	200.0-6121-2.0-000-90	Yes
04/14/2022	THE MADERA MAIL DROP	No	Certified Mail Postage for National Children’s Alliance Membership Dues Payment	\$12.00	218.0-6170-2.0-000-00	Yes
04/15/2022	DOOR DASH – OISHII	No	Board of Directors Meeting	\$210.15	200.0-6121-2.0-000-90	Yes
04/20/2022	B2B AMAZON PRIME	No	Annual Amazon Business Prime Membership Renewal	\$139.64	200.0-6850-2.0-000-90	Yes
04/21/2022	AMAZON	No	VITA Volunteer Recognition	\$40.00	212.0-6130-2.0-000-90	Yes
04/20/2022	THE PINES RESPORT	No	Lodging Reservation Advance – Madera County Management Workshop for Mattie Mendez	\$266.00	200.0-6712-2.0-000-90	Yes
04/20/2022	HOME DEPOT	No	Umbrella for Gill Office Courtyard	\$165.41	200.0-6130-2.0-000-90	Yes
04/22/2022	AMTRAK	No	Train Ticket for HELP Center Participant	\$26.25	217.0-7240-2.0-000-00	Yes
04/26/2022	ARGONAUT HOTEL	No	Lodging for Mattie Mendez CalCAPA Board of Directors Retreat	\$148.20	200.0-6714-2.0-000-90	Yes
04/27/2022	AGONAUT HOTEL	No	Lodging for Mattie Mendez CalCAPA Board of Directors Retreat	\$352.41	200.0-6714-2.0-000-90	Yes
05/03/2022	AMAZON	No	Office Supplies – Scissor Pack	\$22.72	200.0-6130-2.0-000-90	Yes
05/03/2022	LATINO MENTAL HEALTH	No	Latino Mental Health Summit Registration for Mattie Mendez	\$50.00	200.0-6742-2.0-000-90	Yes

05/03/2022	LATINO MENTAL HEALTH	No	Latino Mental Health Summit Registration for Cristal Sanchez	\$50.00	200.0-6742-2.0-000-90	Yes
05/03/2022	LATINO MENTAL HEALTH	No	Latino Mental Health Summit Registration for Nancy Contreras-Bautista	\$50.00	218.0-6742-2.0-000-00	Yes
			Total	\$ 1,949.81		

Bank of America Business Card
Credit Card Charges

May 2022 Statement

Xai Vang / Information Technology

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
5/2//2022	Screenfluence	N/A	Digital Signage Software Renewal	\$ 378.00	200.0-6112-2.0-000-90	Yes
			Total	\$ 378.00		

Platinum Plus Business Card
Credit Card Charges

May Statement

Jennifer Coronado / Victim Services Center

Date of Transaction	PO NUM	Name of Vendor	Description	Amount	Account Charged	Receipt
04/05/22		Madera Window Company	Repair Patio Door	\$251.60	533.0-6432-5.0-000-00	Yes
04/22/22		Hobby Lobby	Bubbles for National Crime Victims' Rights Week	\$64.90	501.0-6130-5.0-000-00	Yes
04/25/22		Dollar Tree	Child Abuse Awareness Month activity	\$6.77	501.0-6130-5.0-000-00	Yes
04/25/22		Dollar Tree	Child Abuse Awareness Month activity	\$1.35	501.0-6130-5.0-000-00	Yes
				Total	\$324.62	

MBNA America Business Card
 Credit Card Charges
May / mayo 2022 Statement
Maritza Gomez / Regional & Migrant Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
04/08/2022	NA	Appliance Parts	Refrigerator seal for Mariposa	\$149.77	390.0-6181-3.1-351-00	Yes
04/12/2022	NA	Teachstone	CLASS Pre-school recertification	\$61.25	310.0-6742-3.1-000-00 49% (\$61.25)	Yes
04/19/2022	NA	Zoom	Video Conferencing system	\$7.35	311.0-6130-3.1-000-00 49% (\$7.35)	Yes
04/20/2022	NA	Teachstone	CLASS Pre-school recertification	\$61.25	310.0-6742-3.1-000-00 49% (\$61.25)	Yes
04/28/2022	NA	Key CPR	Red Cross First Aid Instructor	\$159.25	310.0-6742-3.1-000-00 49% (\$159.25)	Yes
05/03/2022	NA	American Red Cross	CPR certificates for Madera staff	\$34.30	311.0-6742-3.1-000-00 49% (\$34.30)	Yes
05/03/2022	NA	Venngage.com	Monthly subscription for flyer software	\$12.36	311.0-6130-3.1-000-00 43% (\$10.85) 312.0-6130-3.1-000-00 6% (\$1.51)	No
TOTAL				\$485.53		

Comments: I certify that the items and charges above are true and correct, and that the charges inquired have been for business purposes only. Receipts are attached (if available).

MBNA America Business Card
 Credit Card Charges
May / mayo 2022 Statement
Maritza Gomez / Migrant Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
04/12/2022	NA	Teachstone	CLASS Pre-school recertification	\$63.75	320.0-6742-3.2-000-00 51% (\$63.75)	Yes
04/19/2022	NA	Zoom	Video Conferencing system	\$7.64	321.0-6130-3.2-000-00 51% (\$7.64)	Yes
04/20/2022	NA	Teachstone	CLASS Pre-school recertification	\$63.75	320.0-6742-3.2-000-00 51% (\$63.75)	Yes
04/28/2022	NA	Key CPR	Red Cross First Aid Instructor	\$165.75	320.0-6742-3.2-000-00 51% (\$165.75)	Yes
05/03/2022	NA	American Red Cross	CPR certificates for Madera staff	\$35.70	321.0-6742-3.2-000-00 51% (\$35.70)	Yes
05/03/2022	NA	Venngage.com	Monthly subscription for flyer software	\$12.87	321.0-6130-3.2-000-00 51% (\$12.87)	No
TOTAL				\$349.46		

Comments: I certify that the items and charges above are true and correct, and that the charges inquired have been for business purposes only. Receipts are attached (if available).

MBNA America Business Card
Credit Card Charges
May / mayo 2022 Statement
Maritza Gomez / Fresno Migrant Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
04/22/2022	NA	American Red Cross	CPR certificates for Fresno staff	\$210.00	331.0-6742-3.3-031-00	Yes
04/22/2022	NA	American Red Cross	CPR certificates for Fresno staff	\$245.00	331.0-6742-3.3-031-00	Yes
04/22/2022	NA	American Red Cross	CPR certificates for Fresno staff	\$175.00	331.0-6742-3.3-031-00	Yes
04/22/2022	NA	American Red Cross	CPR certificates for Fresno staff	\$140.00	331.0-6742-3.3-031-00	Yes
04/22/2022	NA	American Red Cross	CPR certificates for Fresno staff	\$70.00	331.0-6742-3.3-031-00	Yes
04/23/2022	NA	Olive Garden	Lunch for Center Director Meeting	\$322.74	331.0-6121-3.3-031-00	Yes
04/24/2022	NA	Zoom	Video Conferencing system	\$14.99	831.0-6130-3.3-031-00	Yes
TOTAL				\$1,177.73		

Comments: I certify that the items and charges above are true and correct, and that the charges inquired have been for business purposes only. Receipts are attached (if available).

American Express
Credit Card Charges
April 2022 Statement
 Fiscal

Name of Vendor	Description	Amount	Receipt
ATT	Telephone	33438.47	Yes
Comcast	Net service	1062.73	Yes
Community Playthings	Supplies for centers	16591.99	Yes
Discount School Supply	Supplies for centers	1023.77	Yes
DS Water	Water/rental		
Ecolab	Dishwasher rental/repairs	208.64	Yes
Fedex	Postage	340.87	Yes
HD Pro / Supply Works	Supplies for office/centers	6866.06	Yes
Lakeshore	Supplies for centers	7789.66	Yes
Matson Alarm/Mountain	Alarm service	569.50	Yes
Smart Care	Kitchen equipment repairs		
Verizon	Wireless devices	8432.65	Yes
Office Depot	Supplies for office/center	10681.69	Yes
	TOTAL	87006.03	04/29/22 LA

03/22
JDC

**Card Member
Service**

**Credit Card Charges
COSTCO**

April 04, 2022 Statement

Card Holder	Description	Amount	Card Amount
Jennifer Coronado	Items for clients	154.55	154.55
			0.00
		Total	154.55

Credit Card Charges

APRIL 2022

Fiscal

Name of Vendor	Description	Amount	
Capital One/Walmart	Supplies for centers	1829.00	
Home Depot	Supplies for centers	13804.43	
Wex Bank (Chevron)	Fuel	0.00	
Wex Bank (Valero)	Fuel	4515.29	
APR STMT DATES			
LA			

05/22
J D C



MADERA HEAD START MONTHLY ENROLLMENT REPORT

Madera/Mariposa Regional Head Start

Months of Operation:
August 2021 – May 2022

Reporting Month
April 2022

Total Funded Enrollment <div style="font-size: 24pt; font-weight: bold;">246</div>	Current Enrollment: <div style="font-size: 24pt; font-weight: bold;">171</div> <p>-----</p> Cumulative Enrollment <div style="font-size: 24pt; font-weight: bold;">242</div>	Centers with Vacancies: Chowchilla: 0 Cottonwood:1 North Fork: 9 Eastside: 4 Oakhurst: 3 Fairmead: 0 Ruth Gonzales: 0 Mariposa: 3 Valley West: 10 Mis Tesoros: 3 Verdell: 5
No. of Children on Waiting List Income Eligible: 28 No. of Children on Waiting List Over Income : 36	No. of Children with Disabilities: <div style="font-size: 24pt; font-weight: bold;">41</div> <small>Must be at least 10% of enrollment (↑26)</small>	No. of Over Income Families: <div style="font-size: 24pt; font-weight: bold;">22 (100-130%)</div> <div style="font-size: 24pt; font-weight: bold;">18 (O/I)</div> <small>Must be less than 10% of enrollment (↓ 26)</small>
Average Monthly Attendance: 84.07%		

Madera Early Head Start

Months of Operation:
June 2021– May 2022

Reporting Month
April 2022

Total Funded Enrollment <div style="font-size: 24pt; font-weight: bold;">42</div>	Current Enrollment: <div style="font-size: 24pt; font-weight: bold;">42</div> <p>-----</p> Cumulative Enrollment <div style="font-size: 24pt; font-weight: bold;">83</div>	Vacancies: <div style="font-size: 24pt; font-weight: bold;">0</div>
No. of Children on Waiting List Income Eligible: 10 No. of Children on Waiting List Over Income : 2	No. of Children with Disabilities: <div style="font-size: 24pt; font-weight: bold;">8</div> <small>Must be at least 10% of enrollment (↑5)</small>	No. of Over Income Families: <div style="font-size: 24pt; font-weight: bold;">11 (100-130%)</div> <div style="font-size: 24pt; font-weight: bold;">4 (O/I)</div> <small>Must be less than 10% of enrollment (↓ 4)</small>
Average Home Visits Due to COVID- Family Facilitators conducted 2 home visits and 2 phone calls per week with families.		

IN-KIND MONTHLY SUMMARY REPORT

Month

April

Year

2021-22

CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
Volunteer Services/Servicios Voluntarios	37,300.00	390,847.17	82,589.67	473,436.84	(436,136.84)
A. Professional Services/Servicios Profesionales	-	6,778.50	3,400.00	10,178.50	(10,178.50)
B. Center Volunteers/Voluntarios en el Centro	27,922.00	384,068.67	78,777.78	462,846.45	(434,924.45)
C. Other/Policy Council/Otro/Comité de Póliza	9,378.00	0.00	411.89	411.89	8,966.11
Donated Food/Comida Donada	-	0.00		-	0.00
Donated Supplies/Materiales Donado	2,561.00	1,152.00		1,152.00	1,409.00
Donated Equipment	-	0.00		-	0.00
Donated Bus Storage	-	0.00		-	0.00
Donated Space/Sitio Donado	237,466.00	198,265.50	19,826.55	218,092.05	19,373.95
Transportation/ Transportación	-	0.00		-	0.00
TOTAL IN-KIND	277,327.00	590,264.67	102,416.22	692,680.89	(415,353.89)
State Fund 319	\$761,724	89,866.00		89,866.00	671,858.00
Grand Total	1,039,051.00	680,130.67	102,416.22	782,546.89	256,504.11

B. YTD In-Kind \$ 782,546.89

C. Percent Y-T-D In-Kind 75.31%

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
REGIONAL HEAD START including BLENDED CSPP STATE PROGRAM
INCOME CALCULATIONS
April-2022**

FREE MEALS	183		110
REDUCED	0		0
BASE	0		0
TOTAL	183		110

PERCENTAGES:

FREE	100.0000%		100.0000%
REDUCED	0.0000%		0.0000%
BASE	0.0000%		0.0000%
TOTAL	100.0000%		100.0000%

MEAL	#		%		RATE		
BREAKFAST:	1,777	X	100.0000%	X	\$1.9700	=	\$3,500.69
	1,777	X	0.0000%	X	\$1.6700	=	\$0.00
	1,777	X	0.0000%	X	\$0.3300	=	\$0.00
LUNCH:	1,971	X	100.0000%	X	\$3.6600	=	\$7,213.86
	0	X	100.0000%	X	\$3.6600	=	\$0.00
	0	X	0.0000%	X	\$3.2600	=	\$0.00
	0	X	0.0000%	X	\$0.3500	=	\$0.00
SUPPLEMENTS:	121	X	100.0000%	X	\$1.0000	=	\$121.00
	0	X	100.0000%	X	\$1.0000	=	\$0.00
	0	X	0.0000%	X	\$0.5000	=	\$0.00
	0	X	0.0000%	X	\$0.0900	=	\$0.00

	3,869			\$10,835.55
		TOTAL FEDERAL REIMBURSEMENT		
CASH IN LIEU:		LUNCHES X \$0.2600		\$512.46
TOTAL REIMBURSEMENT				\$11,348.01

	Breakfast	Lunch	Snack	Total
RHS	423	1,971	121	2,515
CSPP	1,354	-	-	1,354
	1,777	1,971	121	3,869

TOTAL FEDERAL REIMBURSEMENT:	<u>\$8,168.17</u>	<u>\$2,667.38</u>	<u>\$10,835.55</u>
CASH IN LIEU:	<u>\$512.46</u>	<u>\$0.00</u>	<u>\$512.46</u>
	\$8,680.63	\$2,667.38	\$11,348.01



MADERA HEAD START MONTHLY ENROLLMENT REPORT

Madera/Mariposa Regional Head Start

Months of Operation:
August 2021 – May 2022

Reporting Month
April 2022

Total Funded Enrollment <div style="font-size: 24pt; font-weight: bold;">246</div>	Current Enrollment: <div style="font-size: 24pt; font-weight: bold;">171</div> <p>-----</p> Cumulative Enrollment <div style="font-size: 24pt; font-weight: bold;">242</div>	Centers with Vacancies: Chowchilla: 0 Cottonwood:1 North Fork: 9 Eastside: 4 Oakhurst: 3 Fairmead: 0 Ruth Gonzales: 0 Mariposa: 3 Valley West: 10 Mis Tesoros: 3 Verdell: 5
No. of Children on Waiting List Income Eligible: 28 No. of Children on Waiting List Over Income : 36	No. of Children with Disabilities: <div style="font-size: 24pt; font-weight: bold;">41</div> <small>Must be at least 10% of enrollment (↑26)</small>	No. of Over Income Families: <div style="font-size: 24pt; font-weight: bold;">22 (100-130%)</div> <div style="font-size: 24pt; font-weight: bold;">18 (O/I)</div> <small>Must be less than 10% of enrollment (↓ 26)</small>
Average Monthly Attendance: 84.07%		

Madera Early Head Start

Months of Operation:
June 2021– May 2022

Reporting Month
April 2022

Total Funded Enrollment <div style="font-size: 24pt; font-weight: bold;">42</div>	Current Enrollment: <div style="font-size: 24pt; font-weight: bold;">42</div> <p>-----</p> Cumulative Enrollment <div style="font-size: 24pt; font-weight: bold;">83</div>	Vacancies: <div style="font-size: 24pt; font-weight: bold;">0</div>
No. of Children on Waiting List Income Eligible: 10 No. of Children on Waiting List Over Income : 2	No. of Children with Disabilities: <div style="font-size: 24pt; font-weight: bold;">8</div> <small>Must be at least 10% of enrollment (↑5)</small>	No. of Over Income Families: <div style="font-size: 24pt; font-weight: bold;">11 (100-130%)</div> <div style="font-size: 24pt; font-weight: bold;">4 (O/I)</div> <small>Must be less than 10% of enrollment (↓ 4)</small>
Average Home Visits Due to COVID- Family Facilitators conducted 2 home visits and 2 phone calls per week with families.		

IN-KIND MONTHLY SUMMARY REPORT

Month

April

Year

2022

CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
Volunteer Services/Servicios Voluntarios	154,655.00	80,691.55	4,147.52	84,839.07	69,815.93
A. Professional Services/Servicios Profesionales	-	0.00		-	0.00
B. Center Volunteers/Voluntarios en el Centro	154,655.00	80,266.55	4,093.39	84,359.94	70,295.06
C. Other/Policy Council/Otro/Comité de Póliza	-	0.00	54.13	54.13	(54.13)
Donated Food/Comida Donada	-	0.00		-	0.00
Donated Supplies/Materiales Donado	-	0.00		-	0.00
Donated Equipment	-	0.00		-	0.00
Donated Bus Storage	-	0.00		-	0.00
Donated Space/Sitio Donado	-	0.00		-	0.00
Transportation/ Transportación	-	0.00		-	0.00
TOTAL IN-KIND	155,456.00	80,691.55	4,147.52	84,839.07	70,616.93
		0.00			0.00
		0.00			
Grand Total	155,456.00	80,691.55	4,147.52	84,839.07	70,616.93

B. YTD In-Kind \$ 84,839.07

C. Percent Y-T-D In-Kind 54.57%



MADERA HEAD START MONTHLY ENROLLMENT REPORT

Madera Migrant/Seasonal Head Start

Months of Operation:

March 2022 – February 2023

Reporting Month

April 2022

Total Funded Enrollment 579	Current Enrollment: 186 <hr style="border-top: 1px dashed black;"/> Cumulative Enrollment: 192	Centers with Vacancies: Eastin Arcola 3 Mis Angelitos 2 Sierra Vista 1 Pomona 9 Los Niño's 2
No. of Children on Waiting List 88	No. of Children with Disabilities: 19 Must be at least 10% of enrollment (↑58)	No. of Over Income Families: 15(100-130%) 8 (O/I) Must be less than 10% of enrollment (↓ 58)
Average Monthly Attendance: % 88.56		

Community Action Partnership of Madera County, Inc.
 1225 Gill Avenue
 Madera, CA 93637
 (559) 673-9173

IN-KIND MONTHLY SUMMARY REPORT 2022-2023 / REPORTE SUMARIO MENSUAL DE IN KIND 2023-2023

MIGRANT AND SEASONAL HEAD START 2022-2023 MIGRANTE/TEMPORAL HEAD START 2022-2023

Month-Year APRIL 2022/ Mes-Año ABRIL 2022

CATEGORY	BUDGET Presupuesto	PREVIOUS/Previo TOTAL	CURRENT/Corriente TOTAL	Y-T-D/Asta ahora TOTAL	REMAINING IN-KIND NEEDED Resto de In Kind para recaudar
NON-FEDERAL CASH/EFFECTIVO NO FEDERAL					
Volunteer Services/Servicios Voluntarios	320,252.00	0.00	2,242.48	2,242.48	318,009.52
A. Professional Services/Servicios Profesionales	0.00	0.00	0.00	0.00	0.00
B. Center Volunteers/Voluntarios en el Centro	320,252.00	0.00	2,242.48	2,242.48	318,009.52
Other/Policy Council/Otro/Comité de Póliza	0.00	0.00	0.00	0.00	0.00
State Collaboration/Colaboracion de Estado	933,227.00	0.00	0.00	0.00	933,227.00
Donated Supplies/Materiales Donanos	1,020.00	0.00	0.00	0.00	1,020.00
Donated Food/Comida Donada	0.00	0.00	0.00	0.00	0.00
Donated Space/Sitio Donado	120,682.00	10,056.83	10,427.66	20,484.49	100,197.51
Transportation/Transportacion	0.00	0.00	0.00	0.00	0.00
TOTAL IN-KIND/TOTAL DE IN KIND	1,375,181.00	10,056.83	12,670.14	22,726.97	1,352,454.03

A. Y-T-D In-Kind / In-Kind asta ahora	22,726.97
B. Contracted In-Kind/ In-kind Contratado	1,375,181.00
C. Percent Y-T-D In-Kind/ Porcentaje de in-kind ásta ahora	
CONTRACT AMOUNT/CANTIDAD CONTRATADA	1.65%

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
MADERA MIGRANT HEAD START including BLENDED MIGRANT PRESCHOOL STATE PROGRAM
INCOME CALCULATIONS
April-2022

FREE MEALS	192	0	
REDUCED	0	0	
BASE	0	0	
TOTAL	192	0	

PERCENTAGES:

FREE	100.0000%	100.0000%	
REDUCED	0.0000%	0.0000%	
BASE	0.0000%	0.0000%	
TOTAL	100.0000%	100.0000%	

MEAL	#		%		RATE	
BREAKFAST:	1,481	X	100.0000%	X	\$1.9700	= \$2,917.57
		X	0.0000%	X	\$1.6700	= \$0.00
		X	0.0000%	X	\$0.3300	= \$0.00
LUNCH:	1,436 0	X	100.0000%	X	\$3.6600	= \$5,255.76
		X	100.0000%	X	\$3.6600	= \$0.00
		X	0.0000%	X	\$3.2600	= \$0.00
		X	0.0000%	X	\$0.3500	= \$0.00
SUPPLEMENTS:	1,100 0	X	100.0000%	X	\$1.0000	= \$1,100.00
		X	100.0000%	X	\$1.0000	= \$0.00
		X	0.0000%	X	\$0.5000	= \$0.00
		X	0.0000%	X	\$0.0900	= \$0.00

4,017
TOTAL FEDERAL REIMBURSEMENT \$9,273.33

CASH IN LIEU: LUNCHES X \$0.2600 \$373.36

TOTAL REIMBURSEMENT \$9,646.69

	Breakfast	Lunch	Snack	Total
CMIG-MADERA MIGRANT PRESCHOOL	-	-	-	-
MMHS-MADERA MIGRANT HEAD START	1,481	1,436	1,100	4,017
	1,481	1,436	1,100	4,017

	<u>MMHS</u>	<u>CMIG</u>	<u>Total</u>
TOTAL FEDERAL REIMBURSEMENT:	\$9,273.33	\$0.00	\$9,273.33
CASH IN LIEU:	<u>\$373.36</u>	<u>\$0.00</u>	<u>\$373.36</u>
	\$9,646.69	\$0.00	\$9,646.69

MONTHLY PROGRAM INFORMATION SUMMARY REPORT FOR POLICY COUNCIL & GOVERNING BODY

Community Action Partnership of Madera County (CAPMC)

[Migrant Head Start]

April 2022

192 cumulative children
 156 cumulative families
 31 teaching staff

PRIMARY TYPE OF ELIGIBILITY

(#)	(%)
Homeless Children	0%
Foster Children	0%
2 Receives Public Assistance	1%
167 Income Below Federal Poverty	87%
Near Low Income (waiver required)	
23 Over Income (maximum 10%)	12%

CHILDREN WITH DISABILITIES

(#)	(%)
19 Disabilities	3%
<i>(% of funded; minimum 10%)</i>	

DEVELOPMENTAL SCREENING OF NEW ENROLLEES

(#)	(%)
40 New Enrollees (cumulative)	21%
Received Screening <45 Days	0%
<i>(Of new enrollees)</i>	

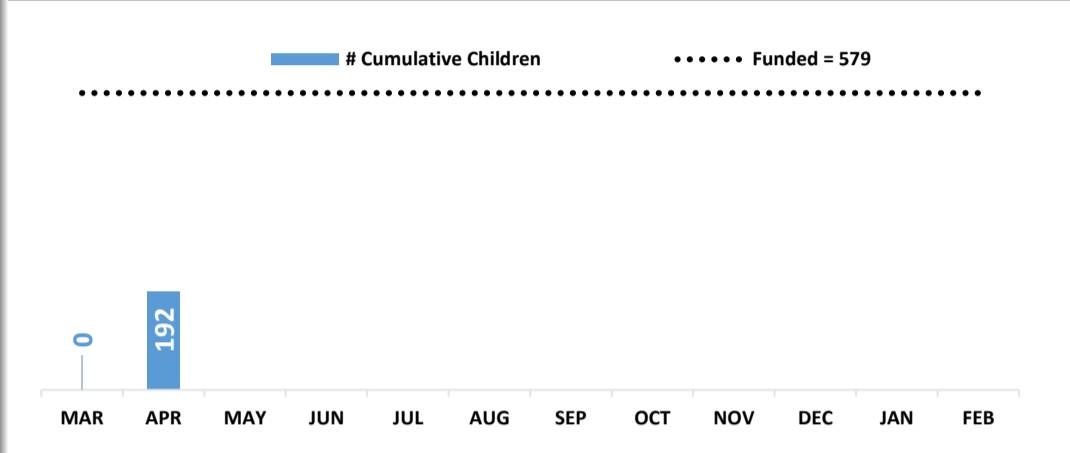
CHILDREN'S HEALTH

(#)	(%)
192 Has Health Insurance	100%
172 EPSDT Up-to-Date	90%
7 Chronic Health Condition	4%
4 Received Medical Treatment	57%
<i>(Of children with diagnosed chronic health conditions)</i>	
184 Immunizations Up-to-Date	96%
<i>(Also includes those eligible for exemption & those with all immunizations possible at this time, but not for their age)</i>	
192 Access to Dental Care	100%
94 Completed Dental Exam	49%
8 Received Dental Treatment	89%
<i>(Of children who needed dental treatment other)</i>	
46 Healthy BMI	56%
<i>(Children under 3 years are excluded)</i>	

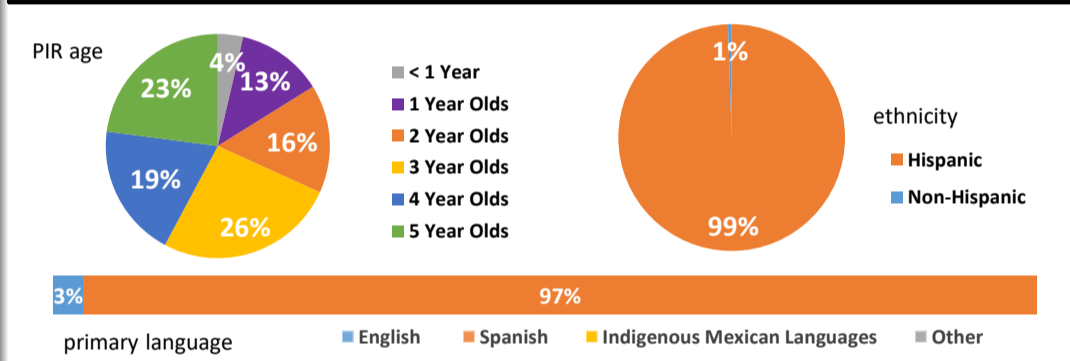
STAFF EDUCATION

# Staff	% Meet Minimum Education Requirements
11 Preschool Teacher: BA+	27%
Preschool Teacher: AA+	91%
<i>(AA degree is minimum education requirement for a Preschool Teacher. However, at least 50% should have a BA degree or above).</i>	
5 Preschool Assistant: CDA+	100%
15 Infant/Toddler Teacher: CDA+	100%
<i>(Includes those who are currently enrolled in a CDA/equivalent program)</i>	
<i>All staff should meet minimum education requirements for their position.</i>	

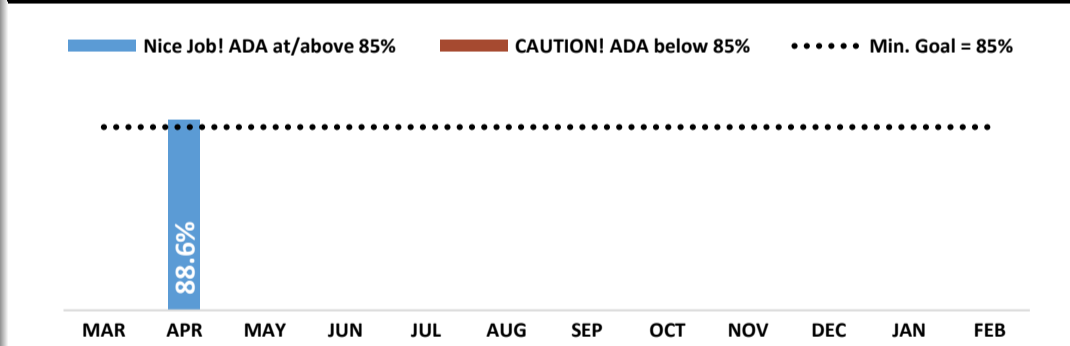
CUMULATIVE ENROLLMENT OF CHILDREN



DEMOGRAPHICS OF ENROLLED CHILDREN

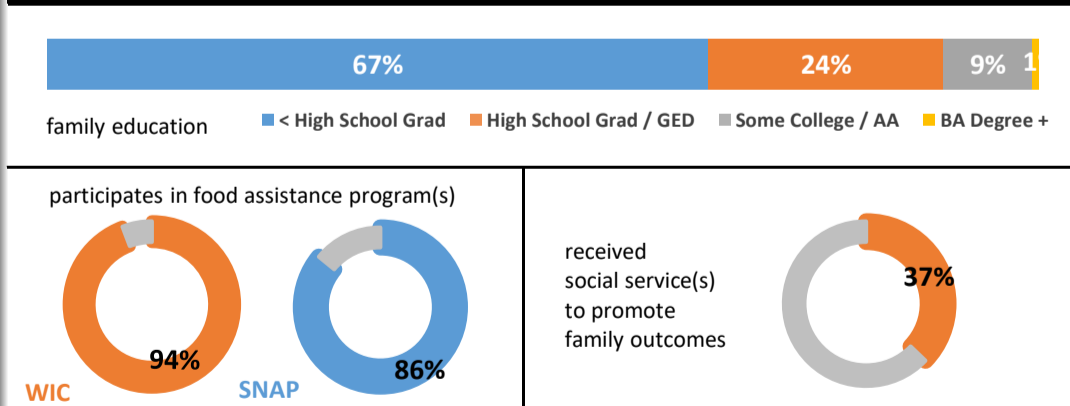


AVERAGE DAILY ATTENDANCE (ADA)



% of children who were **CHRONICALLY ABSENT** (missed over 10% of class days): **34%**

FAMILY INFORMATION



symbol key:

★ = Nice job!
Meets or exceeds Head Start regulations or expectations

▶ = Caution!
Results lower than expected

✘ = Take Action!
Does not meet Head Start regulations

Sources: (1) Program Information Report, (2) COPA #201 (Attendance), (3) COPA #241S (Chronic Attendance).
All data is cumulative as of report month, unless otherwise indicated.

Resumen Mensual del Informe de Datos Actualizados del Programa (PIR, sigla en ingles) para el Consejo de Políticas y Mesa Directiva

Community Action Partnership of Madera County (CAPMC)

[Migrant Head Start]

abril 2022

192
Niños Acumulados

156
Familias Acumuladas

31
Maestras

Tipo de Elegibilidad

(#)		(%)
	Niños Sin Hogar	0%
	Niños en Adopción Temporal	0%
2	Recibe Asistencia Pública	1%
167	Ingresos por Debajo de la Pobreza Federal	87%
	Ingresos Cerca de Bajos (requiere una exención)	
23	Ingresos Sobre las Pautas (maximo 10%)	12%

Niños con Discapacidades

(#)		(%)
19	Discapacidades	3%

(% de la matrícula contratada; mínimo 10%)

Evaluación del Desarrollo para los Nuevos Niños(as) Inscritos

(#)		(%)
40	Nuevos Niños(as) Inscritos (acumulados)	21%
	Recibió Evaluación <45 días de los Nuevos Niños(as) Inscritos	0%

Salud de los Niños

(#)		(%)
192	Tiene Seguro Médico	100%
172	al Día Con el Cuidado de Salud Preventivo	90%
7	Condición de Salud Crónica	4%
4	Recibieron Tratamiento Médico	57%

de niños con enfermedades crónicas diagnosticadas

184	al Día con las Vecunas	96%
-----	------------------------	-----

También incluye a aquellos elegibles para la exención y aquellos con todas las vacunas posibles en este momento, pero no para su edad

192	Acceso a Servicios Dentales	100%
94	Completaron Exámenes Dentales Profesional	49%
8	Recibió Tratamiento Dental	89%

(de niños en edad preescolar que necesitaban tratamiento dental distinto al cuidado preventivo)

46	BMI Saludable	56%
----	---------------	-----

(los niños menores de 3 años están excluidos)

Educación del Personal

# Personal	% llenan los requisitos mínimo de educación
11	Maestras de la Clase Preescolar: BA+ 27%
	Maestras de la Clase Preescolar: AA+ 91%

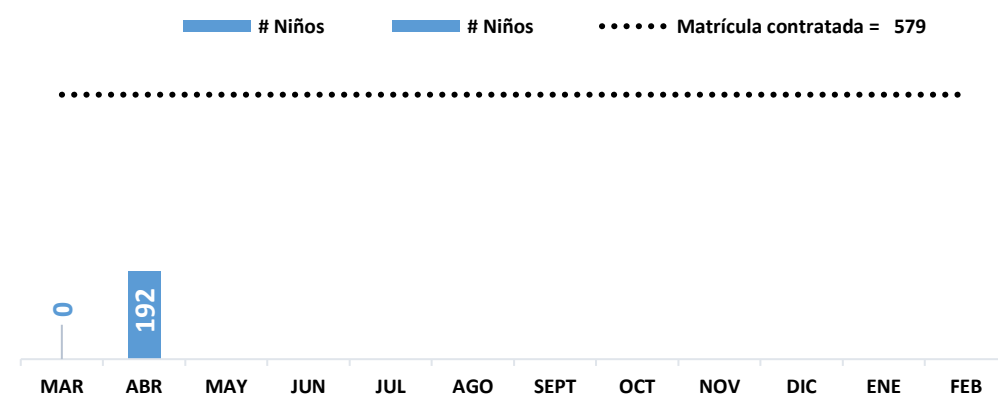
(Un título AA es el requisito mínimo de educación para los maestros de preescolar, pero al menos el 50% debe tener una licenciatura.)

5	Asistentes de Maestra de la Clase Preescolar: CDA+ 100%
15	Maestras de la Clase de Infantes / Niños Pequeños: CDA+ 100%

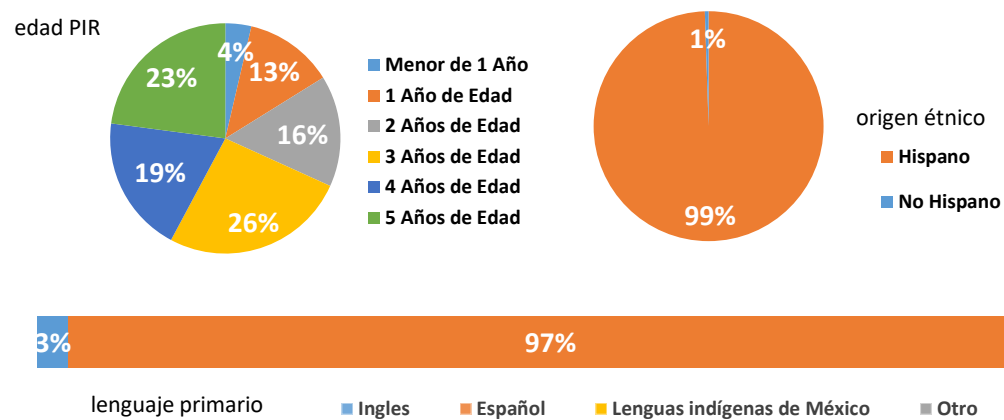
(Incluyen a aquellos que están actualmente inscritos en un programa CDA / equivalente o superior. CDA=Asociado/Diplomado en Desarrollo Infantil (CDA, sigla en ingles)

(Todo el personal debe cumplir con los requisitos mínimos de educación para su puesto).

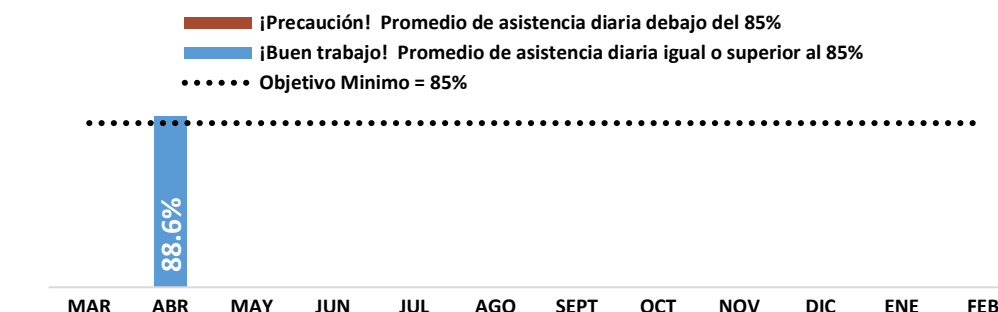
Matrícula Cumulativa de Niños



Demografía de los Niños Matriculados

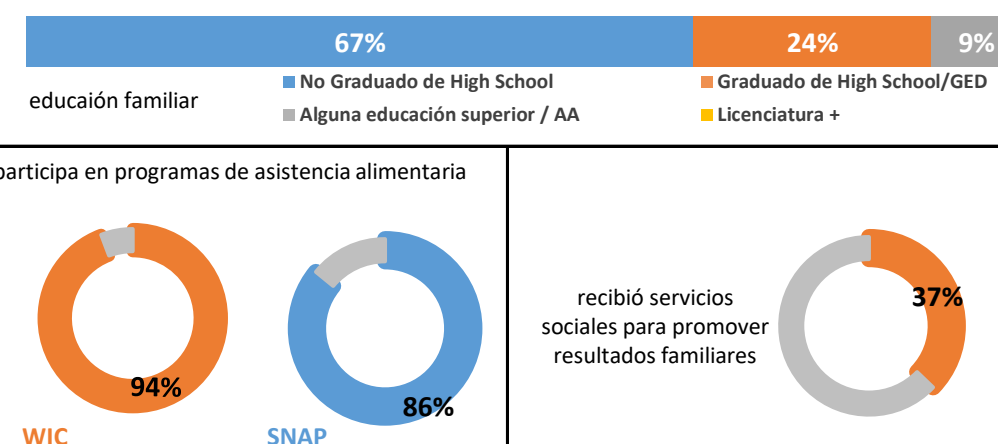


Promedio de Asistencia Diaria



% de niños crónicamente ausentes (ausente más del 10% de los días de clase): 34%

Información Familiar



simbolo clave:

★ = ¡Buen trabajo!

Cumple o excede las regulaciones o expectativas de Head Start

▶ = ¡Precaución!

Resultados más bajos de lo esperado

✘ = ¡Tomar acción!

No cumple con las regulaciones de Head Start



ENROLLMENT REPORT

Fresno Migrant/Seasonal Head Start

Months of Operation:

September 2021 – August 2022

Reporting Month

April 2022

Total Funded Enrollment 469	Current Enrollment: 23 ----- Cumulative Enrollment: 180	Centers with Vacancies: All centers with the exemption of Casa Castellanos are closed
No. of Children on Waiting List 146	No. of Children with Disabilities: 34a Must be at least 10% of enrollment (↑52)	No. of Over Income Families: 35 (100-13% O/I) 7 (O/I) Must be less than 10% of enrollment (↓ 46)
Average Monthly Attendance: 86.16%		

*HS is required to maintain an AMA of 85%

IN-KIND MONTHLY SUMMARY REPORT

Month

APRIL

Year

2022

CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
VOLUNTEER SERVICES	560,230.00	215,748.43	1,233.33	216,981.76	(343,248.24)
A. Professional Services	0.00	0.00		0.00	0.00
B. Center Volunteers	560,230.00	214,353.89	1,233.33	215,587.22	(344,642.78)
C. Policy Concl/Committee	0.00	1,394.54		1,394.54	1,394.54
OTHER - FOOD DONATION	0.00	0.00		0.00	0.00
DONATED SUPPLIES	1,530.00	0.00		0.00	(1,530.00)
DONATED EQUIPMENT	0.00	0.00		0.00	0.00
DONATED - BUS STORAGE	0.00	0.00		0.00	0.00
DONATED SPACE	83,944.00	104,354.25	14,907.75	119,262.00	35,318.00
TRANSPORTATION	0.00	0.00		0.00	0.00
TOTAL IN-KIND	645,704.00	320,102.68	16,141.08	336,243.76	(309,460.24)
C. Salarie & FB (First 5)	0.00	0.00		0.00	0.00
Grand Total	645,704.00	320,102.68	16,141.08	336,243.76	(309,460.24)

A. Y-T-D In-Kind	336,243.76
B. Contracted In-Kind	645,704.00
C. Percent Y-T-D In-Kind	52.07%

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
 FRESNO MIGRANT HEAD START FOOD PROGRAM
 INCOME CALCULATIONS
 April-2022**

FREE MEALS		26
REDUCED		-
BASE		-
TOTAL		26

PERCENTAGES:

FREE		100.0000%
REDUCED		0.0000%
BASE		0.0000%
TOTAL		100.0000%

	#		%		RATE			
MEAL BREAKFAST:	229	X	100.0000%	X	\$1.9700	=	\$451.13	
LUNCH:	217	X	100.0000%	X	\$3.6600	=	\$794.22	
SUPPLEMENTS:	200	X	100.0000%	X	\$1.0000	=	\$200.00	
	646						\$1,445.35	
	TOTAL FEDERAL REIMBURSEMENT							\$1,445.35
CASH IN LIEU:							\$56.42	
							\$56.42	
TOTAL REIMBURSEMENT							\$1,501.77	



Report to the Board of Directors

Agenda Item Number: D-8

Board of Directors Meeting for: June 9, 2022

Author: Leticia Murillo

DATE: May 31, 2022

TO: Board of Directors

FROM: Leticia Murillo – APP/R&R Program Manager

SUBJECT: California Department of Education – Early Learning & Care Division
Program Self – Evaluation for Child Care Alternative Payment and Resource
& Referral Program (APP/R&R)

I. RECOMMENDATION:

Review and consider ratifying the submission of the California Department of Social Services (CDSS), Child Care and Development Division (CCDD) Program Self-Evaluation (PSE) Survey.

II. SUMMARY:

The PSE Report is comprised of the following: Survey – Program Self-Evaluation Process:

- A. Child Care Alternative Payment and Resource & Referral Program. The APP/R&R Program was required to complete the PSE – Survey. The Program Manager completed the process using the monitoring instrument.

III. DISCUSSION:

1. The PSE Survey was completed utilizing CDSS Program Self-Evaluation Instrument Item Report for all applicable domains and items.
2. The PSE will be submitted electronically to the Child Care & Development Division Website by the due date of June 1, 2022 at 5:00pm.

IV. FINANCING:

Funds are allocated in the budget.

Desired Results Parent Survey

Overview Chart

Name of Agency: Community Action Prtnership of Madera County, Inc. Site/Program: APP/R&R Date: 5/17/2022

Question 1 - How satisfied are you with the overall quality of this program?			
	% Very Satisfied	% Satisfied	% Not Satisfied
	100%	0%	0%
Question 2 - Do you feel that:			
	% Yes	% No	
Section A – Your child is safe in this program?	100%	0%	
Section B – Your child is happy in this program?			
Question 3 - Have you received information from the program about the following:			
Section A – How children develop at different ages?	94%	6%	
Section B – How your child is growing and developing?	93%	7%	
Section C – How your child is doing in the program?	88%	13%	
Section D – Schedule of daily activities?	100%	0%	
Section E – What you can do to help your child learn and develop?	100%	0%	
Section F - Parenting skills?	87%	13%	
Section G – How to find other services in the community?	87%	13%	
Section H – Where to report health or safety concerns and complaints?	94%	6%	
Section I - Experience and training of program staff?	94%	6%	
Section J - Discipline problems?	94%	6%	
Section K – How you can get involved with your child's program?	94%	6%	
Question 4 - Would you like more information about any topics related to your child's care and development?			
<p>"When child sent home from school and daycare center doesn't have grade school teachers there until school is almost out. (During pandemic they are sent name if they sneeze)" "Con mis proveedores que tengo estoy satisfecha a igual que mis hijos ellos se sienten seguros cuando los dejamos con ellos. Carmen Beltrán/Guadalupe Beltrán, yo los recomendaría muy buenas personas amables, corteses y respetuosos, sobre todo pacientes con nuestros hijos. Gracias a todo el personal que participa en los programas de ayuda un caluroso saludo a Maru y en especial a la señorita America. gracias por llevar mi caso de la aplicación. (With my providers I have I am satisfied just as my children feel safe when we leave them with them. Carmen Beltrán/Guadalupe Beltrán, I would recommend, very good kind, courteous and respectful people, especially patients with our children. Thanks to all the staff who participate in the aid programs a warm greeting to Maru and especially to Miss America. Thank you for bringing my case from the application)" "Cerca de la direccion</p>			

Question 5 - Has your child's enrollment in this program made it easier for you to:			
	% Yes	% No	% N/A
Section A – Accept a job?	50%	7%	43%
Section B – Keep a job?	87%	0%	13%
Section C – Accept a better job?	50%	8%	42%
Section D – Attend educational or training programs?	58%	8%	33%
Question 6 - How satisfied are you with these characteristics of your child's program?			
	% Very Satisfied	% Satisfied	% Not Satisfied
Section A – Hours of operation	76%	24%	0%
Section B – Location of program	71%	29%	0%
Section C – Number of adults working with children	65%	35%	0%
Section D – Background and experience of staff	75%	25%	0%
Section E – Languages spoken by staff	82%	18%	0%
Section F – How program staff communicate with you	82%	18%	0%
Section G – Meeting the individual needs of your child	81%	19%	0%
Section H – Interaction between staff and children	81%	19%	0%
Section I – Interaction with other parents	81%	19%	0%
Section J – Parent involvement	76%	24%	0%
Section K – Equipment and materials	59%	35%	6%
Section L – Cultural activities	59%	41%	0%
Section M – Daily activities	65%	35%	0%
Section N – Environment	65%	35%	0%
Section O – Nutrition	65%	35%	0%
Section P – Health and safety policies and procedures	71%	29%	0%
Section Q – How the program promotes your child's learning and development	65%	35%	0%

Question 7 - Is there anything else you would like to say about how this program meets your family's needs?

"I am more than grateful as a single mother to be able to continued working while my child is being cared for." "I really appreciate that I have the opportunity to do homework and study after work while my son is in child care." "I'm very grateful for this program!" "It's a blessing." "Primero que nada, gracias a la señorita America por su amabilidad de cómo nos a tiende muy amable. Y respecto al programa nos ha ayudado mucho porque más en esta situación de la pandemia nos hemos ahorrado el pagado de los niños el cual nos ayuda a comprar panales o toallitas es de mucho ayuda el programa más en estos tiempos que todo está caro. (First of all, thank you to Miss America for her kindness of how she assist us, very kind. And regarding the program it has helped us a lot because of this situation of the pandemic. We have been able to purchase diapers and wipes. The program is very helpful when everything is expensive.)" "Primero, muchas gracias, ya que el programa me ha ayudado a continuar con mi trabajo y así poder sacar a mis hijos adelante, ya que soy mama soltera y no tengo apoyo alguno, por parte del papa de mis hijos. (First, thank you very much, since the program has helped me to continue with my work and thus be able to get my children ahead, since I am a single mother and I do not have any support, from the father of my children)" "No ninguno (none)" "Saber que mi nino esta en un buen lugar para trabajar y poer pagar mis pagos de renta y otros. gracias (I knowing my child is in a good place while i am working and I am able to pay my rent and other things. Thanks)"

Question 8 - Do you have any suggestions about how this program could be improved?

"I like my case worker, Miss America Castellanos. Every year, I make mistakes on my application and she calls and goes over what I need to fix. Plus she is very nice and is always on top of business. Thanks America and CAP!" "Not at this time. Just pandemic has made it difficult for everyone." "No!" "Pues que esperemos que el personal que lo representa sigan hacienda más en beneficio de las personas trabajadoras sobre todo por las trabajadoras agrícolas es de mucha ayuda el programa. (Well, we hope the staff that represents us will continue to do more to benefit the working people, especially the agricultural workers, the program is very helpful.)" "Pues que les puedo decir que los programas sigan adelante beneficiándonos y si se pudiera formar otros programas de ayuda pos que mejor. Porque se nos vienen tiempos duros de economía. No solo a mi beneficia sino a toda una comunidad de padres agrícolas he emigrantes que vienen por un futuro mejor a trabajar. (Well, I can tell you the programs continue to benefit us and if other aid programs could be formed later then better. Because hard times of economy are coming. Not only does it benefit me but a whole community of farming parents and immigrants who come for a better future to work)" "Ninguna, a mí me han tratado muy bien, Buena atención (None, I have been treated very well, Good attention)" "No todo esta muy bien (No everything is good)" "Que todos los padres que trabajan en la agricultura califiquen. Gracias y todo esta bien (That all parents working in agricultural qualify for the program. Thanks and everything is fine)"

**Desired Results Parent Survey
Group Data Summary**

Parent	Question 1			Question 2			Question 3													
	VS	S	NS	VS	S	NS	A-Y	A-N	B-Y	B-N	C-Y	C-N	D-Y	D-N	E-Y	E-N	F-Y	F-N	G-Y	G-N
1	1			1			1		1		1		1		1		1		1	
2	1			1			1		1		1		1		1		1	1	1	
3	1			1			1		1		1		1		1		1		1	
4	1			1			1		1		1		1		1		1		1	
5	1			1			1		1		1	1	1		1		1		1	
6	1			1			1		1		1		1		1		1		1	
7	1			1			1		1		1		1		1		1		1	
8	1			1			1		1		1		1		1		1		1	
9	1			1			1		1		1		1		1		1		1	
10	1			1			1	1	1		1	1	1		1		1		1	
11	1			1			1		1		1		1		1		1		1	
12	1			1			1		1		1		1		1		1		1	
13	1			1			1		1		1		1		1		1		1	
14	1			1			1		1		1		1		1		1		1	
15	1			1			1		1		1		1		1		1		1	
16																				
17	1			1			1		1		1		1		1		1		1	
18																				
19																				
20																				
21																				
22																				
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27																				
28																				
29																				
30																				

Question 1:

How satisfied are you with the overall quality of the Alternative Payment Program? B - A brochure in Community & Family Services Child Care Resource & Referral and Alternative Payment Program Yes or No
VS -Very Satisfied
S -Satisfied
NS -Not Satisfied

Question 2:

How satisfied are you with the overall quality of Resource & Referral?:
VS -Very Satisfied
S -Satisfied
NS -Not Satisfied

C - A brochure in Child Care & Development Selections for Educational Experiences in Madera County Yes or No
D - Child Care Alternative Payment Program Parent & Provider Handbook of Written Policies Yes or No
E - CAPMC/Alternative Payment Program Subsidized Child Care Eligibility List Application Yes or No
F - A Brochure for California Background Check for In-Home Child Care – Trust Line Yes or No
G - How to find other services in the community (e.g., employment and training opportunities, parenting classes, health care) Y

Question 3:

Have you received information from the program about the following?

A -A brochure in Choosing Quality Care For Your Child Yes or No

SUBTOTALS																					
Question 1			Question 2				Question 3														
16			16		0		16		15		16		16		15		15				
# VS	# S	# NS	#A-YES	# A-NO	# B-YES	# B-NO	#A-YES	# A-NO	# B-YES	# B-NO	# C-YES	# C-NO	#D-YES	# D-NO	# E-YES	# E-NO	# F-YES	# F-NO	# G-YES	# G-NO	
16	0	0	16	0	0	0	15	1	14	1	14	2	16	0	16	0	13	2	13	2	
VS	S	NS	A YES	A NO	B YES	B NO	A YES	A NO	B YES	B NO	C YES	C NO	D YES	D NO	E YES	E NO	F YES	F NO	G YES	G NO	
100%	0%	0%	100%	0%			94%	6%	93%	7%	88%	13%	100%	0%	100%	0%	87%	13%	87%	13%	
Total %			Total %		Total %		Total %		Total %		Total %		Total %		Total %		Total %		Total %		
100%			100%		0%		100%		100%		100%		100%		100%		100%		100%		

**Desired Results Parent Survey
 Group Data Summary**

Question 3 cont.							Question 4
H-Y	H-N	I-Y	I-N	J-Y	J-N	K-N	
1		1		1		1	"When child sent home from school and daycare center doesn't have grade school teachers there until school is almost out. (During pandemic they are sent home if they sneeze)" "Con mis proveedores que tengo estoy satisfecha a igual que mis hijos ellos se sienten seguros cuando los dejamos con ellos. Carmen Beltrán/Guadalupe Beltrán, yo los recomendaría muy buenas personas amables, corteses y respetuosos, sobre todo pacientes con nuestros hijos. Gracias a todo el personal que participa en los programas de ayuda un caluroso saludo a Maru y en especial a la señorita America. gracias por llevar mi caso de la aplicación. (With my providers I have I am satisfied just as my children feel safe when we leave them with them. Carmen Beltrán/Guadalupe Beltrán, I would recommend, very good kind, courteous and respectful people, especially patients with our children. Thanks to all the staff who participate in the aid programs a warm greeting to Maru and especially to Miss America. Thank you for bringing my case from the application)" "Cerca de la direccion donde vivo (close to address where I live)"
1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	
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1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	
1		1		1		1	

Question 3 cont.:
 Would you like more information about...?
 H - Parental Choice Child Care Options in Madera County Yes or No
 I - Where to report health or safety concerns and complaints Yes or No
 J - Uniform Complaint Procedures Yes or No
 K - Developing a relationship with your provider Yes or No

es or No **Question 4:**
 Would you like more information about finding a child care provider that will meet your needs? Yes (please specify topics) or No

SUBTOTALS								
Question 3 cont.							Question 4	
16		16		16		16		Trends for question no. 4:
#H-YES	# H-NO	# I-YES	# I-NO	# J-YES	# J-NO	# K-YES	# K-NO	
15	1	15	1	15	1	15	1	
H YES	H NO	I YES	I NO	J YES	J NO	K YES	K NO	
94%	6%	94%	6%	94%	6%	94%	6%	
Total % 100%		Total % 100%		Total % 100%		Total % 100%		

Desired Results Parent Survey
Group Data Summary

Question 5										Question 6						Question 6 cont.																																			
A-Y	A-N	A-NA	B-Y	B-N	B-NA	C-Y	C-N	C-NA	D-Y	D-N	D-NA	A-VS	A-S	A-NS	B-VS	B-S	B-NS	C-VS	C-S	C-NS	D-VS	D-S	D-NS	E-VS	E-S	E-NS	F-VS	F-S	F-NS	G-VS	G-S	G-NS	H-VS	H-S	H-NS	I-VS	I-S	I-NS	J-VS	J-S	J-NS	K-VS	K-S	K-NS	L-VS	L-S					
										1		1			1			1			1						1			1			1			1			1			1			1			1			1
												1			1			1			1			1			1			1			1			1			1			1			1			1			1
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																					1			1			1			1			1			1			1			1			1			1			1

Question 5:
Has your child's enrollment in this program made it easier for you to:
A - Accept a job? Yes No N/A
B - Keep a job? Yes No N/A
C - Accept a better job? Yes No N/A
D - Attend educational or training programs? Yes No N/A

Question 6:
6. How satisfied are you with these characteristics of the Alternative Payment Program and Resource & Referral?
VS -Very Satisfied S -Satisfied NS -Not Satisfied
A - Hours of operation
B - Location of program
C - When visiting your office, someone was there in person to greet me

Question 6 cont.
How satisfied are you with these characteristics of your child's program?
VS -Very Satisfied S -Satisfied NS -Not Satisfied
D - When visiting your office, the staff was knowledgeable and able to answer my questions
E - Languages spoken by staff
F - How program staff communicate with you
G - While visiting your office, I was treated with respect
H - When visiting your office, I was treated in a friendly manner
I - When visiting your office, the staff I dealt with was truly sincere about meeting my need(s)
J - When calling your office during the last 30 days, I was able to reach someone without leaving a message

Question 6 cont.
How satisfied are you with the VS -Very Satisfied
K - Resource & Referral equ
L -Monthly parent & child activ
M - Online access to agency
N - Program Referral Comple
O - Uniform Complaint Proce
P -Health and safety policies
Q - How the program promot

SUBTOTALS Question 5												SUBTOTALS Question 6												SUBTOTALS Question 6 cont.																									
14			15			12			12			17			17			16			17			16			16			17			17																
# A-YES	# A-NO	# A-N/A	# B-YES	# B-NO	# B-N/A	# C-YES	# C-NO	# C-N/A	# D-YES	# D-NO	# D-N/A	# A-VS	# A-S	# A-NS	# B-VS	# B-S	# B-NS	# C-VS	# C-S	# C-NS	# D-VS	# D-S	# D-NS	# E-VS	# E-S	# E-NS	# F-VS	# F-S	# F-NS	# G-VS	# G-S	# G-NS	# H-VS	# H-S	# H-NS	# I-VS	# I-S	# I-NS	# J-VS	# J-S	# J-NS	# K-VS	# K-S	# K-NS	# L-VS	# L-S			
7	1	6	13	0	2	6	1	5	7	1	4	13	4	0	12	5	0	11	6	0	12	4	0	14	3	0	14	3	0	13	3	0	13	3	0	13	3	0	13	3	0	13	6	1	10	6	1	10	7
A YES	A NO	A N/A	B YES	B NO	B N/A	C YES	C NO	C N/A	D YES	D NO	D N/A	A VS	A S	A NS	B VS	B S	B NS	C VS	C S	C NS	D VS	D S	D NS	E VS	E S	E NS	F VS	F S	F NS	G VS	G S	G NS	H VS	H S	H NS	I VS	I S	I NS	J VS	J S	J NS	K VS	K S	K NS	L VS	L S			
50%	7%	43%	87%	0%	13%	50%	8%	42%	58%	8%	33%	76%	24%	0%	71%	29%	0%	65%	35%	0%	75%	25%	0%	82%	18%	0%	82%	18%	0%	81%	19%	0%	81%	19%	0%	81%	19%	0%	76%	24%	0%	59%	35%	6%	59%	41%			
Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%				

**Desired Results Parent Survey
Group Data Summary**

Question 6 cont.														Question 7					Question 8			
L-NS	M-VS	M-S	M-NS	N-VS	N-S	N-NS	O-VS	O-S	O-NS	P-VS	P-S	P-NS	Q-VS	Q-S	Q-NS							
1				1			1			1			1			"I am more than grateful as a single mother to be able to continued working while my child is being cared for." "I really appreciate that I have the opportunity to do homework and study after work while my son is in child care." "I'm very grateful for this program!" "It's a blessing." "Primero que nada, gracias a la señorita America por su amabilidad de cómo nos a tiende muy amable. Y respecto al programa nos ha ayudado mucho porque más en esta situación de la pandemia nos hemos ahorrado el pagado de los niños el cual nos ayuda a comprar panales o toallitas es de mucho ayuda el programa más en estos tiempos que todo está caro. (First of all, thank you to Miss America for her kindness of how she assist us, very kind. And regarding the program it has helped us a lot because of this situation of the pandemic. We have been able to purchase diapers and wipes. The program is very helpful when everything is expensive.)" "Primero, muchas gracias, ya que el programa me ha ayudado a continuar con mi trabajo y así poder sacar a mis hijos adelante, ya que soy mama soltera y no tengo apoyo alguno, por parte del papa de mis hijos. (First, thank you very much, since the program has helped me to continue with my work and thus be able to get my children ahead, since I am a single mother and I do not have any support, from the father of my children)" "No ninguno (none)" "Saber que mi niño esta en un buen lugar para trabajar y poer pagar mis pagos de renta y otros. gracias (I knowing my child is in a good place while i am working and I am able to pay my rent and other things. Thanks)"	"I like my case worker, Miss America Castellanos. Every year, I make mistakes on my application and she calls and goes over what I need to fix. Plus she is very nice and is always on top of business. Thanks America and CAP!" "Not at this time. Just pandemic has made it difficult for everyone." "No!" "Pues que esperemos que el personal que lo representa sigan hacienda más en beneficio de las personas trabajadoras sobre todo por las trabajadoras agricolas es de mucha ayuda el programa. (Well, we hope the staff that represents us will continue to do more to benefit the working people, especially the agricultural workers, the program is very helpful.)" "Pues que les puedo decir que los programas sigan adelante beneficiándonos y si se pudiera formar otros programas de ayuda pos que mejor. Porque se nos vienen tiempos duros de economía. No solo a mi beneficia sino a toda una comunidad de padres agricolas he emigrantes que vienen por un futuro mejor a trabajar. (Well, I can tell you the programs continue to benefit us and if other aid programs could be formed later then better. Because hard times of economy are coming. Not only does it benefit me but a whole community of farming parents and immigrants who come for a better future to work)" "Ninguna, a mí me han tratado muy bien, Buena atención (None, I have been treated very well, Good attention)" "No todo esta muy bien (No everything is good)" "Que todos los padres que trabajan en la agricultura califiquen. Gracias y todo esta bien (That all parents working in agricultural qualify for the program. Thanks and everything is fine)"					
1				1			1			1			1									
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use characteristics of your child's program?
S -Satisfied **NS** -Not Satisfied

- ipment and materials
- ivities, Let's Move Handout
- events
- rint Form
- dures
- and procedures
- es your child's learning and development

Question 7:
 Is there anything else you would like to say about how this meets your family's needs?

Question 8:
 Do you have any suggestions about how the Alternative Payment Program can improved?

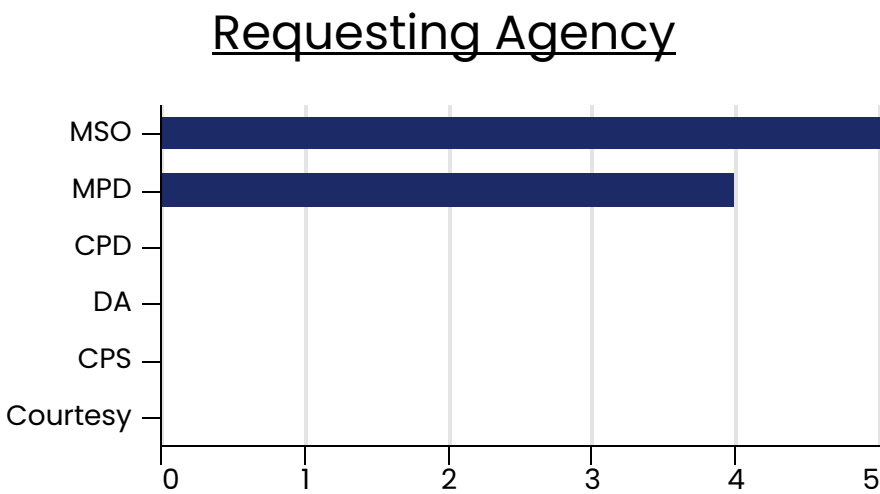
Question 9:
 Do you have any suggestions about how the Resource and Referral can improve?

SUBTOTALS																	Question 7					Question 8/9											
Question 6 cont.																	Trends for question no. 7:									Trends for question no. 8/9:							
			17				17				17				17																		
# L-NS	# M-VS	# M-S	# M-NS	# N-VS	# N-S	# N-NS	# O-VS	# O-S	# O-NS	# P-VS	# P-S	# P-NS	# Q-VS	# Q-S	# Q-NS																		
L NS	M VS	M S	M NS	N VS	N S	N NS	O VS	O S	O NS	P VS	P S	P NS	Q VS	Q S	Q NS																		
0	11	6	0	11	6	0	11	6	0	12	5	0	11	6	0																		
0%	65%	35%	0%	65%	35%	0%	65%	35%	0%	71%	29%	0%	65%	35%	0%																		
	Total % 100%			Total % 100%			Total % 100%			Total % 100%			Total % 100%																				



Madera County Child Advocacy Center (CAC)

May 2022



Counseling Services

Referrals Made: 3
Onsite Counseling Sessions: 0

Child Forensic Interviews Year to Date

Year	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
2022	10	17	26	33	42							
2021	7	13	26	36	55	68	82	89	95	108	122	140



**ALTERNATIVE PAYMENT AND RESOURCE & REFERRAL PROGRAM
MONTHLY REPORTING – [May 2022](#)**

NUMBER OF CHILDREN ENROLLED IN EACH PROGRAM FOR THE ALTERNATIVE PAYMENT PROGRAM

General Contract - CAPP	415
CalWORKs Stage 2 – C2AP	154
CalWORKs Stage 3 – C3AP	157
Bridge Program - BP	8
Total Children Enrolled	734

**NUMBER OF IN-HOME LICENSE CHILD CARE PROVIDERS AND LICENSE-EXEMPT CHILD CARE PROVIDERS
FOR ALTERNATIVE PAYMENT PROGRAM**

IN - HOME LICENSE CHILD CARE PROVIDERS – SMALL	44
IN – HOME LICENSE CHILD CARE PROVIDERS – LARGE	36
LICENSE-EXEMPT CHILD CARE PROVIDERS	38
Total Providers Enrolled	118

RESOURCE & REFERRAL LICENSED PROVIDERS

ACTIVE - LICENSED CHILD CARE PROVIDERS	123
CLOSED - LICENSED CHILD CARE PROVIDERS	N/A

CHILD CARE INITIATIVE PROGRAM PROVIDER WORKSHOPS/TRAININGS

CHILD CARE INITIATIVE PROJECT (CCIP) Workshops:

- **None in May 2022**

Family, Friend and Neighbor Activity:

- Due to COVID-19, no activities have been hosted.

Bridge Program Coaching Session:

- Navigating Together –
- Navigating Together – Coaching Session (Spanish) – 23 attendees

***No more workshops until August 2022.**



Community Services Monthly Report to the Board of Directors

May 2022

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

Program	Monthly Households Served	11-1-2020 to 6-30-2022 Fiscal YTD Totals
2021 Non-Emergency	0	1630
2021 Emergency	0	1404
2021 Wood/Propane/Oil	0	115

Program	Monthly Households Served	8-1-2021 to 3-31-2023 Fiscal YTD Totals
ARPA 2021- Non-Emergency	15	385
ARPA 2021 – Emergency	19	377
ARPA 2021 - WPO	5	61

HOMELESS PROGRAMS

Program	Residents	Vacancy
Shunammite Place	37	1
Madera Mental Health Service Act	10	2

EMERGENCY HOUSING VOUCHERS

Program	Amount	Issued
Emergency Housing Vouchers	33	7

May 2022 Homeless Prevention Assistance

Homeless Housing Assistance	0
CSBG CARES	0
Madera County Mortgage Rental Utility Assistance Program District 1 and District 3	19
Total	50

Kaiser Permanente Housing for Health Grant Opportunity Application is Pending Spending Period July 1, 2022 through June 30, 2023

	Application Submitted	YTD Expenses	Budget Balance	
Funding	\$95,000		Pending	
Objective	Goal	YTD Achieved	Balance	% Achieved

Emergency Rental Assistance Program

- Social media views Facebook = N/A for May 2022
- Instagram = N/A for May 2022
- Twitter = N/A for May 2022

HOME DELIVERED MEALS TO SENIORS IN MADERA COUNTY

Program	Seniors on Program	Vacancy
Home Delivered Meals	80	0

NUMBER OF MEALS DELIVERED IN May 2022

Chowchilla / Fairmead	602 meals delivered in May	10 seniors receiving home delivered meals
Madera outside city limits	812 meals delivered in May	12 seniors receiving home delivered meals
Coarsegold	756 meals delivered in May	13 seniors receiving home delivered meals
Oakhurst / North Fork/Bass Lake	2,520 meals delivered in May	41 seniors receiving home delivered meals
Ahwahnee	224 meals delivered in May	4 seniors receiving home delivered meals
Total meals delivered in May 2022	4,914	80 total seniors receiving home delivered meals

This contract has been extended through June 30, 2022 to accommodate 80 seniors.



HOMELESS ENGAGEMENT FOR LIVING PROGRAM (HELP CENTER) SERVICES REPORT May 2022

Outreach and Case Management was conducted both in the City and in the County of Madera.
Below are the number of unsheltered contacts that were made for the period of 5/1/2022 - 5/31/2022.

Location	Madera City & Surrounding Area	Oakhurst	Nipinnawasee	Coarsegold	Northfork	Chowchilla	Total Contact
Previous Month YTD	935	39	0	37	1	117	1129
May 2022	74	6	0	1	0	3	84
YTD Total 7/1/21-6/30/22	1009	45	0	38	1	120	1213

OUTCOMES - SERVICES OFFERED			
TREATMENT SERVICES	CURRENT MONTH	PREVIOUS MONTH YTD	YEAR-TO-DATE
ENTERED DRUG PROGRAM	0	10	10
REFERRED TO MADERA BHS FOR ASSESSMENT	7	216	223
OBTAINED BHS DUE TO REFERRAL	0	68	68
SUICIDE PREVENTION	0	2	2
HOUSING SERVICES	CURRENT MONTH	PREVIOUS MONTH YTD	YEAR-TO-DATE
WENT INTO SHELTER	4	102	106
WENT INTO TRANSITIONAL / BRIDGE HOUSING	0	1	1
REUNITED WITH FAMILY VIA BUS OR AIRPLANE	0	3	3
ASSISTED WITH COLLECTING PAPERWORK TO HELP GET HOUSED	77	699	776
REFERRED TO PERMANENT SUPPORTIVE HOUSING	3	29	32
MOVED INTO PERMANENT SUPPORTIVE HOUSING	4	18	22
MOVED INTO PERMANENT HOUSING	1	36	37
REFERRED FOR EMERGENCY HOUSING VOUCHER (EHV)	10	17	27
APPROVED AND COMPLETED BRIEFING FOR EHV	0	9	9
EMPLOYMENT SERVICES	CURRENT MONTH	PREVIOUS MONTH YTD	YEAR-TO-DATE
REFERRED AND CONNECTED WITH WORKFORCE	0	60	60
ASSISTED WITH JOB INTERVIEW PROCESS	2	12	14
EMPLOYED AS A RESULT OF ASSISTANCE	1	3	4
ASSISTED IN OBTAINING BYCYCLE FOR TRANSPORTATION FOR WORK	0	7	7
OTHER NON-EMPLOYMENT INCOME	CURRENT MONTH	PREVIOUS MONTH YTD	YEAR-TO-DATE
ASSISTED WITH APPROVAL / REINSTATEMENT OF SSI BENEFITS	0	8	8
OTHER NON-CASH BENEFITS & SERVICES	CURRENT MONTH	PREVIOUS MONTH YTD	YEAR-TO-DATE
ASSISTED IN OBTAINING SOCIAL SECURITY CARD	1	67	68
ASSISTED IN OBTAINING CASH AID / TANF	0	17	17
ASSISTED IN OBTAINING CALFRESH BENEFITS	3	42	45
ASSISTED IN OBTAINING HEALTH INSURANCE	2	31	33
ASSISTED IN OBTAINING ACCESS TO HEALTHCARE APPOINTMENTS (MEDICAL, DENTAL, EYE CARE)	3	44	47
ASSISTED IN OBTAINING A GOVT. PHONE	1	8	9
ASSISTED IN OBTAINING PET DOCUMENTATION	2	8	10
ASSISTED IN OBTAINING BIRTH CERTIFICATE	6	45	51
ASSISTED IN OBTAINING DRIVER'S LICENSE	0	2	2
REFERRALS MADE TO DSS HSP	2	49	51
REFERRALS MADE TO THE VA	1	10	11
REFERRALS MADE TO CPS	1	5	6
REFERRALS MADE TO VICTIM SERVICES	0	13	13
REFERRAL TO FOSTER CARE SERVICES	0	0	0
PROVIDED SHOES OR CLOTHES TO CLIENT	0	27	27
PROVIDED DMV VOUCHER FOR ID	2	89	91

DELIVERED COMMODITIES	25	227	252
ARRANGED TRANSPORTATION	12	96	108
CONNECTED TO VOLUNTEER WORK	0	0	0
ADVOCACY WITH LEGAL MATTER	0	26	26
TRANSITIONAL AGE YOUTH CLIENTS	5	82	87

OTHER HELP CENTER SERVICES

HOUSING GUIDE PROVIDED	8
HOUSEHOLDS IN EMERGENCY SHELTER	23



Report to the Board of Directors

Agenda Item Number: E-1

Board of Directors Meeting for: June 9, 2022

Author: Cristal Sanchez and Russell K. Ryan, Esq.

DATE: May 31, 2022

TO: Board of Directors

FROM: Mattie Mendez, Executive Director

SUBJECT: Resuming In-Person Board of Directors Meetings

I. RECOMMENDATION:

Accept resuming the Board of Directors meetings to exclusively in-person without a virtual option effective July 7, 2022 except to the extent a majority of the Board of Directors has approved a teleconferencing exemption for a particular meeting in accordance with the provisions of Government Code Section 54953(e)(1)-(e)(3).

II. SUMMARY:

At the May 12, 2022 regular Board of Directors meeting members of the Board of Directors discussed resuming meetings to exclusively in-person without the option of attending virtually. Staff was instructed to submit an action item on the agenda for the June Board of Directors meeting for an official vote.

III. DISCUSSION:

- The majority of Board Members opted for in-person meetings without the option of attending virtually during the discussion held at the regular Board of Directors meeting on May 12, 2022.
- The Community Action Partnership of Madera County, Inc. Conference Room allows for accommodation of social distancing and safety protocols.
- The Agency's legal counsel has expressed no objection regarding the resumption of resuming in-person meetings without the option of attending virtually, but does recommend that the Board of Directors allow for a teleconferencing exemption upon a majority of the Board of Directors in accordance with the provisions of Government Code Section 54953(e)(1) *et seq.*

IV. FINANCING:

Not applicable

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FRESNO, CALIFORNIA 93711

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1952-2021

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FACSIMILE (559) 439-5654

POST OFFICE BOX 9099
FRESNO, CALIFORNIA 93790-9099

*INACTIVE
†A PROFESSIONAL CORPORATION
‡ALSO ADMITTED IN UTAH

June 3, 2022

Board of Directors
COMMUNITY ACTION PARTNERSHIP
OF MADERA COUNTY
1225 Gill Avenue
Madera, California 93637

Re: **Recommendation Regarding the Resumption of In-Person
Board Meetings Subject to Exception Approving
Teleconferencing Exemption Should Circumstances Warrant**

Dear Members of the Board:

I was asked to provide guidance with regard to the proposed action item on the June 9, 2022 agenda with regard to the resumption of in-person board meetings. The action item is certainly appropriate and consistent with the Brown Act although I would recommend that we include language consistent with current Brown Act language allowing for the Board to vote to allow for a limited teleconferencing exemption should circumstances warrant as set forth below.

A. Overview

As the COVID-19 Pandemic continues into its third year many public agencies as well as quasi-public agencies like CAPMC that are required to comply with the Brown Act have resumed in-person meetings. Agencies vary in their approaches with some requiring full and complete in-person attendance while others opting to have hybrid participation with certain participants permitted to attend remotely due to health conditions or recent COVID-19 exposure or actual contraction of the illness given that there remains a state of emergency within the State of California and official continued to advise or require social distancing.

Many agencies have opted to specifically include in their practices or bylaws the recognized teleconferencing exemption found in Government Code Section 54953(e)(1), which allows local agencies to meet via teleconference without complying with the Brown Act's traditional agenda posting, physical access and quorum requirements for teleconferencing, but only during a state of emergency proclaimed by the Governor (in accordance with Government Code section 8625) in which (1) state or local health officials have imposed or recommended measures to promote social distancing; or (2) the legislative body has determined (or is meeting to determine) by majority vote that meeting in person would present imminent risk to the health or safety of the attendees. This new authority clearly includes, but is not limited to, emergencies arising from pandemics and remains in effect until January 1, 2024.

Using the teleconferencing exemption would be useful where a number of members of the Board or staff have become ill or exposed to a life-threatening illness such as COVID-19 and/or certain federal and state mandates are preventing in-person attendance. *I recommend that the Board and CAPMC specifically recognize the fact that there is a teleconferencing option, but to be only used as needed upon a vote of a majority of the Board of Directors.*

B. How to Use the Teleconferencing Exemption

If CAPMC chooses to use the teleconferencing exemption for a particular meeting and forego the Brown Act's traditional agenda posting requiring the identity of and public access to each teleconference location and quorum requirements for teleconferencing, CAPMC would be required to:

- Give timely notice of the meeting and post agendas as required by the Brown Act;
- Make a finding at the meeting that CAPMC has considered the state of emergency circumstances and finds that (1) a state of emergency continues to directly impact the ability of the members to meet safely in person; or (ii) that state or local officials continue to impose or recommend measures to promote social distancing.
- Allow members of the public to access the meeting and directly address the legislative body as provided by Section 54954.3. Each agenda must provide notice of the means by which the public may access the meeting and offer public

Board of Directors
June 3, 2022
Page 3

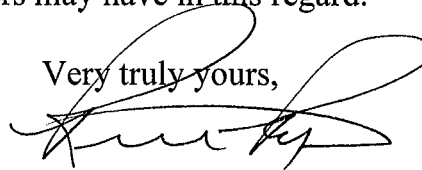
MOTSCHIEDLER, MICHAELIDES, WISHON,
BREWER & RYAN, LLP
ATTORNEYS AT LAW

comment. The agenda must identify and include an opportunity for all persons to attend via a call-in option OR an internet-based service option;

- Conduct teleconference meetings in a manner that protects the statutory and constitutional rights of the parties and the public appearing before the legislative body;
- In the event of a service disruption that prevents broadcasting the meeting or in the event of a disruption within the local agency's control that prevents public comment for members of the public using the call-in option or internet-based option, stop the meeting and take no further action on agenda items until public access is restored. Actions taken on agenda items during a disruption may be subject to challenge pursuant to Section 54960.1.

I hope this is helpful. I am available to answer any questions or concerns that the Board or its individual members may have in this regard.

Very truly yours,



Russell K. Ryan

RKR:cabr

cc: Ms. Mattie Mendez (via e-mail)



Report to the Board of Directors

Agenda Item Number: E-2

Board of Directors Meeting for: June 9, 2022

Author: Jennifer Coronado

DATE: 6/1/2022

TO: Board of Directors

FROM: Jennifer Coronado, Victim Services Program Manager

SUBJECT: Victim Witness Assistance (VW) Program

I. RECOMMENDATION:

Authorize the Executive Director to sign and submit the October 1, 2022 through September 30, 2023 grant application for Victim Witness Assistance (VW) Program, including any extensions and/or amendments during the funding period.

II. SUMMARY:

The grant application submitted to the California Office of Emergency Services (Cal OES) for the purpose of the VW Program is to operate and maintain Victim Witness Assistance Centers (Centers) and provide comprehensive services to victims and witnesses of all types of violent crimes, pursuant to California Penal Code §13835, in each of California's 58 counties.

III. DISCUSSION:

The services provided under the VW Program include, but are not limited to, information about victims' rights (Marsy's Law), orientation to the criminal justice system, crisis intervention, emergency assistance, court accompaniment, case status/disposition, victim compensation claim assistance, counseling, property return, notification to family/friends/employers, resource and referral assistance, restitution assistance upon request of the victim, community outreach and public presentations.

Available funding has effectively decreased by \$37,955 compared to the grant ending September 30, 2022. This will largely be offset by a reduction in total hours spent by management-level employees on this program.

IV. FINANCING:

The total project costs are \$316,881, comprised of the following:

2020 VOCA: \$215,000

2022 VOCA: \$69,265

2022 VWAO: \$32,616

Cal OES #		FIPS #		VS#		Subaward #	
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CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD FACE SHEET

The California Governor's Office of Emergency Services (Cal OES) hereby makes a Grant Subaward of funds to the following:

- 1. Subrecipient:** County of Madera **1a. UEI#:** KNFYKHLWNKE1
- 2. Implementing Agency:** Community Action Partnership of Madera County **2a. UEI#:** V9D5YUNVFNA4
- 3. Implementing Agency Address:** 1225 Gill Avenue Madera 93637-5234
(Street) (City) (Zip+4)
- 4. Location of Project:** Madera Madera 93637-5234
(City) (County) (Zip+4)
- 5. Disaster/Program Title:** VW - Victim/Witness Assistance Program **6. Performance/
Budget Period:** 10/1/2022 **to** 9/30/2023
(Start Date) (End Date)
- 7. Indirect Cost Rate:** Federally Approved ICR **Federally Approved ICR (if applicable):** 9.10 %

Item Number	Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Cost
8.	2020	VOCA		\$215,000					\$215,000
9.	2022	VOCA		\$69,265					\$69,265
10.	2022	VWA0	\$32,616						\$32,616
11.	Select	Select							
12.	Select	Select							
Total	Project	Cost	\$32,616	\$284,265	\$316,881				\$316,881

13. Certification - This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. CA Public Records Act - Grant applications are subject to the California Public Records Act, Government Code section 6250 et seq. Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

15. Official Authorized to Sign for Subrecipient:

Name: Mattie Mendez Title: Executive Director

Payment Mailing Address: 1225 Gill Avenue City: Madera Zip Code+4: 93637-5234

Signature: _____ Date: _____

16. Federal Employer ID Number: 941612823

(FOR Cal OES USE ONLY)

I hereby certify upon my personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

(Cal OES Fiscal Officer) (Date)

(Cal OES Director or Designee) (Date)



Grant Subaward Contact Information

Grant Subaward #: VW21 36 0200

Subrecipient: Madera County

1. **Grant Subaward Director:**

Name: Jennifer Coronado

Title: Program Manager

Telephone #: (559) 675-5706

Email Address: JCoronado@MaderaCAP.org

Address/City/ Zip Code (9-digit): 812 W. Yosemite Avenue, Suite 101, Madera, CA 93637-4288

2. **Financial Officer:**

Name: Daniel Seeto

Title: Chief Financial Officer

Telephone #: (559) 675-5755

Email Address: DSeeto@MaderaCAP.org

Address/City/ Zip Code (9-digit): 1225 Gill Avenue, Madera, CA 93637-5234

3. **Programmatic Point of Contact:**

Name: Jennifer Coronado

Title: Program Manager

Telephone #: (559) 675-5706

Email Address: JCoronado@MaderaCAP.org

Address/City/ Zip Code (9-digit): 812 W. Yosemite Avenue, Suite 101, Madera, CA 93637-4288

4. **Financial Point of Contact:**

Name: Nicole Vulich

Title: Accountant Program Manager

Telephone #: (559) 675-5762

Email Address: NVulich@MaderaCAP.org

Address/City/ Zip Code (9-digit): 1225 Gill Avenue, Madera, CA 93637-5234

5. **Executive Director** of a Non-Governmental Organization or the **Chief Executive Officer** (i.e., chief of police, superintendent of schools) of the implementing agency:

Name: Mattie Mendez

Title: Executive Director

Telephone #: (559) 675-5749

Email Address: MMendez@MaderaCAP.org

Address/City/ Zip Code (9-digit): 1225 Gill Avenue, Madera, CA 93637-5234

6. **Official Designee**, as stated in Section 15 of the Grant Subaward Face Sheet:

Name: Mattie Mendez

Title: Executive Director

Telephone #: (559) 675-5749

Email Address: MMendez@MaderaCAP.org

Address/City/ Zip Code (9-digit): 1225 Gill Avenue, Madera, CA 93637-5234

7. **Chair** of the **Governing Body** of the Subrecipient:

Name: Tyson Pogue

Title: Board Chairperson

Telephone #: (559) 675-7770

Email Address: TPogue@MaderaCounty.com

Address/City/ Zip Code (9-digit): 2725 Falcon Drive, Madera, CA 93637-4465



Grant Subaward Signature Authorization

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

Implementing Agency: Community Action Partnership of Madera County

The **Grant Subaward Director** and **Financial Officer** are **REQUIRED** to sign this form.

Grant Subaward Director:

Printed Name: Jennifer Coronado

Signature: _____

Date: _____

Financial Officer:

Printed Name: Danial Seeto

Signature: _____

Date: _____

The following persons are authorized to sign for the **Grant Subaward Director**:

Signature: _____

Printed Name: Leticia Lujan-Rojas

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

The following persons are authorized to sign for the **Financial Officer**:

Signature: _____

Printed Name: Nicole Vulich

Signature: _____

Printed Name: Belinda Javius

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____



Cal OES

GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

Grant Subaward Certification of Assurance of Compliance

Subrecipient: Madera County

	Cal OES Program Name	Grant Subaward #:	Grant Subaward Performance Period
1	Victim Witness Assistance (VW) Program	VW22 36 0200	10/01/2022 to 09/30/2023
2			
3			
4			
5			
6			

I, Mattie Mendez (Official Designee; same person as Section 15 of the Grant Subaward Face Sheet) hereby certify that the above Subrecipient is responsible for reviewing the Subrecipient Handbook (SRH) and adhering to all of the Grant Subaward requirements as directed by Cal OES including, but not limited to, the following areas:

I. Proof of Authority – SRH 1.055

The Subrecipient certifies they have written authority by the governing board (e.g., County Board of Supervisors, City Council, or Governing Board) granting authority for the Subrecipient/Official Designee (see Section 3.030) to enter into a specific Grant Subaward (indicated by the Cal OES Program name and initial Grant Subaward performance period) and applicable Grant Subaward Amendments with Cal OES. The authorization includes naming of an Official Designee (e.g., Executive Director, District Attorney, Police Chief) for the agency/organization who is granted permission to sign Grant Subaward documents on behalf of the Subrecipient. Written proof of authority includes one of the following: signed Board Resolution or approved Board Meeting minutes.

II. Civil Rights Compliance – SRH Section 2.020

The Subrecipient acknowledges awareness of, and the responsibility to comply with all state and federal civil rights laws. The Subrecipient certifies it will not discriminate in the delivery of services or benefits based on any protected class and will comply with all requirements of this section of the SRH.

III. Equal Employment Opportunity – SRH Section 2.025

The Subrecipient certifies it will promote Equal Employment Opportunity by prohibiting discrimination or harassment in employment because of any status protected by state or federal law and will comply with all requirements of this section of the SRH.



Cal OES

GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

IV. Drug-Free Workplace Act of 1990 – SRH Section 2.030

The Subrecipient certifies it will comply with the Drug-Free Workplace Act of 1990 and all other requirements of this section of the SRH.

V. California Environmental Quality Act (CEQA) – SRH Section 2.035

The Subrecipient certifies that, if the activities of the Grant Subaward meet the definition of a "project" pursuant to the CEQA, Section 20165, it will comply with all requirements of CEQA and this section of the SRH.

VI. Lobbying – SRH Sections 2.040 and 4.105

The Subrecipient certifies it will not use Grant Subaward funds, property, or funded positions for any lobbying activities and will comply with all requirements of this section of the SRH.

All appropriate documentation must be maintained on file by the Subrecipient and available for Cal OES upon request. Failure to comply with these requirements may result in suspension of payments under the Grant Subaward(s), termination of the Grant Subaward(s), and/or ineligibility for future Grant Subawards if Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) the Subrecipient violated the certification by failing to carry out the requirements as noted above.

CERTIFICATION	
I, the official named below, am the same individual authorized to sign the Grant Subaward [Section 15 on Grant Subaward Face Sheet], and hereby affirm that I am duly authorized legally to bind the Subrecipient to the above-described certification. I am fully aware that this certification, executed on the date, is made under penalty of perjury under the laws of the State of California.	
Official Designee's Signature:	_____
Official Designee's Typed Name:	Mattie Mendez _____
Official Designee's Title:	Executive Director _____
Date Executed:	_____
AUTHORIZED BY:	
I grant authority for the Subrecipient/Official Designee to enter into the specific Grant Subaward(s) (indicated by the Cal OES Program name and initial Grant Subaward performance period identified above) and applicable Grant Subaward Amendments with Cal OES.	
<input type="checkbox"/> City Financial Officer	<input type="checkbox"/> County Financial Officer
<input type="checkbox"/> City Manager	<input type="checkbox"/> County Manager
<input checked="" type="checkbox"/> Governing Board Chair	
Signature:	_____
Typed Name:	Tyson Pogue _____
Title:	Board Chairperson _____
Date Executed:	_____



**Federal Fund Grant Subaward Assurances
Victims of Crime Act (VOCA) Victim Assistance Formula Grant Program**

Subrecipient: Madera County

	Cal OES Program Name	Grant Subaward #	Grant Subaward Performance Period
1.	Victim Witness Assistance (VW) Program	VW22 36 0200	10/01/2022 to 09/30/2023
2.			
3.			
4.			
5.			
6.			

Subrecipients agree to adhere to the following and ensure these assurances are passed down to Second-Tier Subrecipients.

1. Required Audits and Financial Statements (SRH Section 14.005)

Subrecipients expending \$750,000 or more in federal funds annually must comply with the single audit requirement established by the Federal Office of Management and Budget (OMB) Uniform Guidance 2 CFR Part 200, Subpart F and arrange for a single audit by an independent Certified Public Accountant (CPA) firm annually. Audits conducted under this section will be performed using the guidelines established by the American Institute of Certified Public Accountants (AICPA) for such audits.

- Subrecipient expends \$750,000 or more in federal funds annually.
- Subrecipient does not expend \$750,000 or more in federal funds annually.

2. Applicability of Part 200 Uniform Requirements

The Uniform Administrative Requirements, Cost Principles, and Audit Requirements in 2 C.F.R. Part 200, as adopted and supplemented by the DOJ in 2 C.F.R. Part 2800 (together, the "Part 200 Uniform Requirements") apply to this Grant Subaward.

For more information and resources on the Part-200 Uniform Requirements as they relate, see the OJP website at <https://ojp.gov/funding/Part200UniformRequirements.htm>.

3. Requirement to Report Actual or Imminent Breach of Personally Identifiable Information

Subrecipients (and any Second-Tier Subrecipients) must have written procedures in place to respond in the event of an actual or imminent "breach" (OMB M-17-12) if they:

- Create, collect, use, process, store, maintain, disseminate, disclose, or dispose of "Personally Identifiable Information (PII)" (2 CFR 200.1) within the scope of an OJP grant-funded program or activity, or
- Use or operate a "Federal information system" (OMB Circular A-130).

Subrecipients (and any Second-Tier Subrecipients) must have breach procedures that must include a requirement to report actual or imminent breach of PII to Cal OES no later than 24 hours after an occurrence of an actual breach, or the detection of an imminent breach.

4. Compliance with DOJ Regulations Pertaining to Civil Rights and Nondiscrimination - 28 C.F.R. Part 38

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements of 28 C.F.R. Part 38 (as may be applicable from time to time), specifically including any applicable requirements regarding written notice to program beneficiaries and prospective program beneficiaries.

Currently, among other things, 28 C.F.R. Part 38 includes rules that prohibit specific forms of discrimination on the basis of religion, a religious belief, a refusal to hold a religious belief, or refusal to attend or participate in a religious practice. Part 38, currently, also sets out rules and requirements that pertain to Subrecipient organizations (and any Second-Tier Subrecipient organizations) that engage in or conduct explicitly religious activities, as well as rules and requirements that pertain to Subrecipients (and any Second-Tier Subrecipients) that are faith-based or religious organizations.

The text of 28 C.F.R. Part 38 is available via the Electronic Code of Federal Regulations (currently accessible at <https://www.ecfr.gov/cgi-bin/ECFR?page=browse>), by browsing to Title 28-Judicial Administration, Chapter 1, Part 38, under e-CFR "current" data.

5. Compliance with DOJ Regulations Pertaining to Civil Rights and Nondiscrimination - 28 C.F.R. Part 42

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements of 28 C.F.R. Part 42, specifically including any applicable requirements in Subpart E of 28 C.F.R. Part 42 that relate to an equal employment opportunity

program.

6. Compliance with DOJ Regulations Pertaining to Civil Rights and Nondiscrimination - 28 C.F.R. Part 54

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements of 28 C.F.R. Part 54, that relate to nondiscrimination on the basis of sex in certain "educational programs."

7. Compliance with 41 U.S.C. 4712 (including prohibitions on reprisal; notice to employees)

Subrecipients (and any Second-Tier Subrecipients) must comply with, and are subject to, all applicable provisions of 41 U.S.C. 4712, including all applicable provisions that prohibit, under specified circumstances, discrimination against an employee as reprisal for the employee's disclosure of information related to gross mismanagement of a federal grant, a gross waste of federal funds, an abuse of authority relating to a federal grant, a substantial and specific danger to public health or safety, or a violation of law, rule, or regulation related to a federal grant.

Subrecipients (and any Second-Tier Subrecipients) also must inform their employees, in writing (and in the predominant native language of the workforce), of employee rights and remedies under 41 U.S.C. 4712.

8. Compliance with Applicable Rules Regarding Approval, Planning, and Reporting of Conferences, Meetings, Trainings, and Other Events

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable laws, regulations, policies, and official DOJ guidance (including specific cost limits, prior approval and reporting requirements, where applicable) governing the use of federal funds for expenses related to conferences (as that term is defined by DOJ), including the provision of food and/or beverages at such conferences, and costs of attendance at such conferences.

Information on the pertinent DOJ definition of conferences and the rules applicable to this Grant Subaward appears in the DOJ Grants Financial Guide (currently, as section 3.10 of "Postaward Requirements" in the "DOJ Grants Financial Guide").

9. Requirement for Data on Performance and Effectiveness under the Grant Subaward

Subrecipients (and any Second-Tier Subrecipients) must collect and maintain data that measure the performance and effectiveness of work under this Grant Subaward. Subrecipients (and any Second-Tier Subrecipients) must provide data (within the required timeframes) to OJP via the Performance Measurement Tool (PMT).

10. Determination of Suitability to Interact with Participating Minors

This condition applies to the Grant Subaward (if it is indicated) when some or all of the activities to be carried out under the Grant Subaward (whether by Subrecipients, or Second-Tier Subrecipients) is to benefit a set of individuals under 18 years of age.

Subrecipients (and any Second-Tier Subrecipients) must make determinations of suitability before certain individuals may interact with participating minors. This requirement applies regardless of an individual's employment status.

The details of this requirement are posted on the OJP web site at <https://ojp.gov/funding/Explore/Interact-Minors.htm>.

11. Compliance with DOJ Grants Financial Guide

Subrecipients (and any Second Tier Subrecipients) must comply with all applicable sections of the DOJ Financial Guide. References to the DOJ Grants Financial Guide are to the DOJ Grants Financial Guide as posted on the OJP website (currently, the "DOJ Grants Financial Guide" available at <https://ojp.gov/financialguide/DOJ/index.htm>), including any updated version that may be posted during the period of performance. Subrecipients agree to comply with the DOJ Grants Financial Guide.

12. Encouragement of Policies to Ban Text Messaging while Driving

Pursuant to Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," 74 Fed. Reg. 51225 (October 1, 2009), the DOJ encourages Subrecipients (and any Second-Tier Subrecipients) to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this Grant Subaward, and to establish workplace safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.

13. Compliance with General Appropriations-law Restrictions on the use of Federal Funds

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable restrictions on the use of federal funds set out in federal appropriations statutes. Pertinent restrictions, including from various "general provisions" in the Consolidated Appropriations Act, 2021, are set out at <https://ojp.gov/funding/Explore/FY21AppropriationsRestrictions.htm>.

Should a question arise as to whether a particular use of federal funds by Subrecipients (and any Second-Tier Subrecipients) would or might fall within the scope of an appropriations or law restriction, Subrecipients are to contact Cal OES

for guidance, and may not proceed without the express prior written approval of Cal OES.

14. Potential Imposition of Additional Requirements

Subrecipients (and any Second-Tier Subrecipients) agree to comply with any additional requirements that may be imposed by the DOJ awarding agency (OJP or OVW, as appropriate) during the period of performance for this Grant Subaward, if Subrecipients are designated as "high-risk" for purposes of the DOJ high-risk grantee list.

15. Employment Eligibility Verification for Hiring under the Grant Subaward

a. Subrecipients (and any Second-Tier Subrecipients) must:

- 1) Ensure that, as part of the hiring process for any position within the United States that is or will be funded (in whole or in part) with Grant Subaward funds, Subrecipients (and any Second-Tier Subrecipients) properly verify the employment eligibility of the individual who is being hired, consistent with the provisions of 8 U.S.C. 1324a(a)(1).
- 2) Notify all persons associated with Subrecipients (or any Second-Tier Subrecipients) who are or will be involved in activities under this Grant Subaward of both:
 - a) This Grant Subaward requirement for verification of employment eligibility, and
 - b) The associated provisions in 8 U.S.C. 1324a(a)(1) that, generally speaking, make it unlawful, in the United States, to hire (or recruit for employment) certain aliens.
- 3) Provide training (to the extent necessary) to those persons required by this condition to be notified of the Grant Subaward requirement for employment eligibility verification and of the associated provisions of 8 U.S.C. 1324a(a)(1).
- 4) As part of the recordkeeping for the Grant Subaward (including pursuant to the Part 200 Uniform Requirements), maintain records of all employment eligibility verifications pertinent to compliance with this Grant Subaward condition in accordance with Form I-9 record retention requirements, as well as records of all pertinent notifications and trainings.

b. Monitoring

Subrecipients' monitoring responsibilities include monitoring Second-Tier Subrecipients' compliance with this condition.

c. Allowable costs

To the extent that such costs are not reimbursed under any other federal program, Grant Subaward funds may be obligated for the reasonable, necessary, and allocable costs (if any) of actions designed to ensure compliance with this condition.

d. Rules of construction

1) Staff involved in the hiring process

For purposes of this condition, persons "who are or will be involved in activities under this Grant Subaward" specifically includes (without limitation) any and all Subrecipient officials or other staff who are or will be involved in the hiring process with respect to a position that is or will be funded (in whole or in part) with Grant Subaward funds.

2) Employment eligibility confirmation with E-Verify

For purposes of satisfying the requirement of this condition regarding verification of employment eligibility, Subrecipients (and any Second-Tier Subrecipients) may choose to participate in, and use, E-Verify (www.e-verify.gov), provided an appropriate person authorized to act on behalf of the Subrecipient (and any Second-Tier Subrecipient) uses E-Verify (and follows the proper E-Verify procedures, including in the event of a "Tentative Nonconfirmation" or a "Final Nonconfirmation") to confirm employment eligibility for each hiring for a position in the United States that is or will be funded (in whole or in part) with Grant Subaward funds.

3) "United States" specifically includes the District of Columbia, Puerto Rico, Guam, the Virgin Islands of the United States, and the Commonwealth of the Northern Mariana Islands.

4) Nothing in this condition shall be understood to authorize or require Subrecipients (and any Second-Tier Subrecipients), or any person or other entity, to violate any federal law, including any applicable civil rights or nondiscrimination law.

5) Nothing in this condition, including in paragraph 4.B., shall be understood to relieve Subrecipients (and any Second-Tier Subrecipients) or any person or other entity, of any obligation otherwise imposed by law, including 8 U.S.C. 1324a(a)(1).

Questions about E-Verify should be directed to DHS. For more information about E-Verify visit the E-Verify website (<https://www.e-verify.gov/>).

16. Restrictions and Certifications Regarding Non-disclosure Agreements and Related Matters

No Subrecipients (and any Second-Tier Subrecipients) under this Grant Subaward, or entity that receives a procurement contract or subcontract with any funds under this Grant Subaward, may require any employee or contractor to sign an internal confidentiality agreement or statement that prohibits or otherwise restricts, or purports to prohibit or restrict, the reporting (in accordance with law) of waste, fraud, or abuse to an investigative or law enforcement representative of a federal department or agency authorized to receive such information.

The foregoing is not intended, and shall not be understood by the agency making this Grant Subaward, to contravene requirements applicable to Standard Form 312 (which relates to classified information), Form 4414 (which relates to sensitive compartmented information), or any other form issued by a federal department or agency governing the nondisclosure of classified information.

- a. In accepting this Grant Subaward, Subrecipients (and any Second-Tier Subrecipients):
 - 1) Represent that they neither require, nor have required, internal confidentiality agreements or statements from employees or contractors that currently prohibit or otherwise currently restrict (or purport to prohibit or restrict) employees or contractors from reporting waste, fraud, or abuse as described above; and
 - 2) Certify that, if they learn, or are notified, that they have, or have been, requiring their employees or contractors to execute agreements or statements that prohibit or otherwise restrict (or purport to prohibit or restrict), reporting of waste, fraud, or abuse as described above, they will immediately stop any further obligations of Grant Subaward funds, will provide prompt written notification to Cal OES, and will resume (or permit resumption of) such obligations only if expressly authorized to do so by Cal OES.
- b. If Subrecipients are authorized under this award to make Second-Tier Subawards, procurement contracts, or both:
 - 1) Subrecipients represent that:
 - a) No other entity (whether through a Second-Tier Subaward ("subgrant"), procurement contract, or subcontract under a procurement contract) that they pass funds to either requires or has required internal confidentiality agreements or statements from employees or contractors that currently prohibit or otherwise currently restrict (or purport to prohibit or restrict) employees or contractors from reporting waste, fraud, or abuse as described above; and

- b) Appropriate inquiry has been made, or otherwise Subrecipients have an adequate factual basis, to support this representation; and
- 2) If learned or notified that any Second-Tier Subrecipient, contractor, or subcontractor entity that receives funds under this Grant Subaward is, or has been, requiring its employees or contractors to execute agreements or statements that prohibit or otherwise restrict (or purport to prohibit or restrict), reporting of waste, fraud, or abuse as described above, they will immediately stop any further obligations of Grant Subaward funds to or by that entity, will provide prompt written notification to Cal OES, and will resume (or permit resumption of) such obligations only if expressly authorized to do so by Cal OES.

17. OJP Training Guiding Principles

Subrecipients (and any Second-Tier Subrecipients) agree that they will adhere to the OJP Training Guiding Principle for Grantee and Subgrantees (available at <https://ojp.gov/funding/Implement/TrainingPrinciplesForGrantees-Subgrantees.htm>) for all training or training materials developed or delivered with these funds.

18. Federal Authorization

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements for authorization of any Grant Subaward. This condition applies to agreements that -- for purposes of federal grants administrative requirements -- OJP considers a "Grant Subaward" (and therefore does not consider a procurement "contract").

The details of the requirement for authorization of any Grant Subaward are posted on the OJP web site at <https://ojp.gov/funding/Explore/SubawardAuthorization.htm>.

19. Requirements Related to System for Award Management and Universal Identifier Requirements

Subrecipients (and any Second-Tier Subrecipients) must comply with applicable requirements regarding the System for Award Management (SAM), currently accessible at <https://www.sam.gov/>. This includes applicable requirements regarding registration with SAM, as well as maintaining the currency of information in SAM.

Subrecipients also must comply with applicable restrictions for Second-Tier Subawards, including restrictions on Grant Subawards to entities that do not acquire and provide (to Subrecipients) the unique entity identifier required for SAM registration.

The details of the Subrecipients' obligations related to SAM and to unique entity identifiers are posted on the OJP web site at <https://ojp.gov/funding/Explore/SAM.htm>.

This condition does not apply to a Grant Subaward to an individual who received the Grant Subaward as a natural person (i.e., unrelated to any business or non-profit organization that he or she may own or operate in his or her name).

20. Restrictions on "lobbying"

In general, as a matter of federal law, federal funds awarded by OJP may not be used by Subrecipients (and any Second-Tier Subrecipients), either directly or indirectly, to support or oppose the enactment, repeal, modification, or adoption of any law, regulation, or policy, at any level of government. See 18 U.S.C. 1913. (There may be exceptions if an applicable federal statute specifically authorizes certain activities that otherwise would be barred by law.)

Another federal law generally prohibits federal funds awarded by OJP from being used by Subrecipients (and any Second-Tier Subrecipients), to pay any person to influence (or attempt to influence) a federal agency, a Member of Congress, or Congress (or an official or employee of any of them) with respect to the awarding of a federal grant or cooperative agreement, subgrant, contract, subcontract, or loan, or with respect to actions such as renewing, extending, or modifying any such award. See 31 U.S.C. 1352. Certain exceptions to this law apply, including an exception that applies to Indian tribes and tribal organizations.

21. Specific Post-award Approval Required to Use a Noncompetitive Approach in any Procurement Contract that would Exceed \$250,000

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements to obtain specific advance approval to use a noncompetitive approach in any procurement contract that would exceed the Simplified Acquisition Threshold (currently, \$250,000). This condition applies to agreements that -- for purposes of federal grants administrative requirements -- OJP considers a procurement "contract" (and therefore does not consider a subaward).

The details of the requirement for advance approval to use a noncompetitive approach in a procurement contract under an OJP award are posted on the OJP web site at <https://ojp.gov/funding/Explore/NoncompetitiveProcurement.htm>.

22. Requirements Pertaining to Prohibited Conduct Related to Trafficking in Persons (including reporting requirements and OJP Authority to Terminate Grant Subaward)

Subrecipients (and any Second-Tier Subrecipients) must comply with all applicable requirements (including requirements to report allegations) pertaining to prohibited conduct related to the trafficking of persons, whether on the part of Subrecipients

(and any Second-Tier Subrecipients), or individuals defined (for purposes of this condition) as "employees" of Subrecipients (and any Second-Tier Subrecipients).

The details of the Subrecipients' obligations related to prohibited conduct related to trafficking in persons are posted on the OJP web site at <https://ojp.gov/funding/Explore/ProhibitedConduct-Trafficking.htm>.

23. Reporting Potential Fraud, Waste, and Abuse, and Similar Misconduct

Subrecipients (and any Second-Tier Subrecipients) must promptly refer to Cal OES any credible evidence that a principal, employee, agent, Subrecipient, contractor, subcontractor, or other person has, in connection with funds under this Grant Subaward-- (1) submitted a claim that violates the False Claims Act; or (2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct.

Potential fraud, waste, abuse, or misconduct involving or relating to funds under this Grant Subaward should must also be reported to Cal OES. Additional information is available from the DOJ OIG website at <https://oig.justice.gov/hotline>.

24. Discrimination Findings

Subrecipients (and any Second-Tier Subrecipients) assure that in the event that a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the ground of race, religion, national origin, sex, or disability against a recipient of victim assistance formula funds under this Grant Subaward, Subrecipients will forward a copy of the findings to the Office for Civil Rights of OJP.

25. VOCA Requirements

Subrecipients (and any Second-Tier Subrecipients) assure that they will comply with the conditions of the Victims of Crime Act (VOCA) of 1984, sections 1404(a)(2), and 1404(b)(1) and (2), 34 U.S.C. 20103(a)(2) and (b)(1) and (2) (and the applicable program guidelines and regulations), as required.

CERTIFICATION

I certify the Subrecipient identified above will comply with the requirements of the Subrecipient Handbook and the federal fund Grant Subaward assurances outlined above.

Official Designee's Signature: _____

Official Designee's Typed Name: Mattie Mendez

Official Designee's Title: Executive Director

Date Executed: _____



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

Summary

The proposed budget provides the salaries for the advocates to conduct the mandatory services outlined in the grant application. The budget supports the training required for the advocates to be informed about victims' rights and resources. The budget secures operational necessities to conduct activities such as: offices that provide meeting, consulting and record-keeping space, computers to generate state claims, telephones for receiving crisis calls, contacting clients, contacting the district attorney's office and for other client services, and office supplies to track client cases. This budget supports service from both the City of Madera and Oakhurst. All of the items listed in the budget are required to achieve the objectives and activities of victim services.

Community Action Partnership of Madera County, Inc. is requesting \$316,881 in total Cal OES Victim/Witness Assistance Program Funds. The source of these funds is VOCA 2020 \$215,000, VOCA 2022 \$69,265 and State VWA0 2022 \$32,616. Of these amounts, \$241,430 will be utilized for salaries and employee benefits and the balance of \$75,451 will be used for operation expenses and



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

Summary (Continued)

indirect/administration expenses. A match waiver will be requested for the entire match requirement.

Funds have been allocated to maintain personnel and operating cost consistent with the prior year. The allocation of costs allows for consistent support and advocacy time and the addition of a Program Assistant for the Oakhurst site. This will provide for adequate direct support to staff.

I. Personal Services – Salaries/Employee Benefits

The budget includes mid-year salary adjustments.

Victim Services Program Manager – 15% Full Time Equivalent

The Victim Services Program Manager is responsible for the daily project operations and supervises the program staff. The manager assures compliance with State requirements and ensures that daily operations are meeting standards, as well as assisting with direct client services. The manager is required to have a BA or BS degree in public administration, criminology, sociology or a related field



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

I. Personal Services – Salaries/Employee Benefits (Continued)

or a master's degree in criminology or sociology. The manager is also required to have three years of related experience.

Victim Services Coordinator – 20% Full Time Equivalent

The Victim Services Coordinator provides office support and assists the Program Manager. This position directly supervises the work and performance of the advocates and provides advocacy services as needed. The job description for the Victim Services Coordinator now requires the position to have a BA/BS degree in social work, psychology, victimology or a related field. Three years of experience working with grants and two years of management experience is also required.

Advocate II's – Two @ 100% each - 2.0 Full Time Equivalents

The advocates provide direct services to clients including crisis intervention, counseling, advocacy, accompaniment, information and referrals and community education. The advocates maintain records of service delivery. The Advocate II is required to have an Associate's Degree in Criminology, Victimology, Social work Sociology or Psychology.



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

I. Personal Services – Salaries/Employee Benefits (Continued)

Administrative Aide – 13% Full Time Equivalent

The Administrative Aide serves as an assistant/aide to the Victim Services Program Manager and as secretarial back up to administrative staff. The position responds to all mail, screens written correspondence, updates schedule and appointment calendars, and types and circulates minutes. In addition, the aide processes status forms for staff, disburses payroll and provides a variety of other tasks such as purchasing requisitions and ordering materials and supplies. The Administrative Aide is required to have an A.A. Degree in business Administration or high school diploma with three years of experience in office or administrative work may be substituted for degree. 1 year of experience in a clerical or secretarial field.

Specialty Advocate – 100% Full Time Equivalent

The Specialty Advocate provides direct services to clients including crisis intervention to specialty populations, counseling, advocacy, accompaniment, information and referrals and community education. The Specialty Advocate is required to have a Bachelor's Degree in Criminology, Victimology, Social work, Sociology, or Psychology.



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

I. Personal Services – Salaries/Employee Benefits (Continued)

Volunteer Advocates

Volunteer Advocates provide after-business-hours crisis response, initial counseling, intake services, emergency food and clothing, and assist with scheduling.

The proposed staff commitment/percentage of time, in addition to this project is as follows:

Title	Rape Crisis	Victim Wit.	Behav. Health	UV	XH	DV Shelt	CILAP	Total
VICTIM SERVICES COORDINATOR	25%	20%		20%	15%	20%		100%
VICTIM SERVICES PROGRAM MANAGER	45%	15%		15%	15%	10%		100%
ADMINISTRATIVE AIDE	50%	13%		17%	15%	5%		100%
ADVOCATE III/VICTIM SERVICES	100%							100%
ADVOCATE III/VICTIM SERVICES	100%							100%
SPECIALTY ADVOCATE/VICTIM SERVICES	100%							100%
ADVOCATE II/VICTIM SERVICES		100%						100%
ADVOCATE II/VICTIM SERVICES		100%						100%
SPECIALITY ADVOCATE/VICTIM SERVICES		100%						100%
SPECIALTY ADVOCATE/VICTIM SERVICES			6%			94%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
ADVOCATE III/VICTIM SERVICES						100%		100%
ADVOCATE III/VICTIM SERVICES						100%		100%
SHELTER/RESIDENT SUPPORT AIDE						100%		100%
TRANSITIONAL HOUSING CASE WORKER					100%			100%
ADVOCATE III/VICTIM SERVICES				100%				100%



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

I. Personal Services – Salaries/Employee Benefits (Continued)

Related employee benefits consist of FICA (7.6%), Medicare (1.45%), SUI (6.2%) and Workers' Compensation, as required by law. Health/Dental/Vision/Life and Retirement (4% and \$225 per month) benefits are provided for full time staff after meeting certain eligibility requirements.

II. Operating Expenses

The Victim Services Center has its main office in the city of Madera located at 1225 Gill Avenue. The Center moved to a new office located at 812 West Yosemite Avenue Ste. 101 and 102 in Madera, CA. in October 2018. Funds are requested for facility rental to be utilized by program staff for office space, client appointments, and counseling, information and referral services. A letter of justification is on file with Cal OES to address the rent and common areas that need to be included at the new location.

Funds are requested for facility rental, utilities, property insurance, building maintenance, and janitorial services to be utilized by program staff for office space, client appointments, and counseling, information and referral services.



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

II. Operating Expenses (Continued)

There is a satellite office located approximately 60 miles away in Eastern Madera County. This provides greater access to services for residents of this area of the county. Funds are also requested for telephone services to both locations. Telephone services include internet access. Local/long distance services and cell phone for advocate, and bandwidth are requested to provide follow-up counseling, advocacy, and information and referral.

Funds are requested for postage, data processing, and office supplies. These include desktop consumables, computer paper and supplies, and copy machine toner/paper to maintain project records. Data processing includes annual costs that include warranty for computer switch, camera switch, and phone switch, as well as the fee for security firewall. Postage will be utilized for client-related mailings and general correspondence. Funds are requested to cover advertising costs and printing and publication costs for victim witness materials.

Per Diem expenses and non-local travel will provide funds for staff to attend trainings in accordance with the state travel policy. Local travel was included



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

II. Operating Expenses (Continued)

for advocates at .585 cents per mile and vehicle daily logs are kept to document mileage.

Funds are requested for program supplies. These will provide instructional/educational materials as well as consumables to be distributed at various victim witness presentations.

Equipment maintenance has been budgeted for the program photocopiers that are necessary to maintain at the Victim Services Center. Equipment rental covers the use of the postage machine and leased photocopiers. Property tax funding has been included on the postage meter.

Funds are requested for fees and licenses fees to cover memberships to California Crime Victims Assistance Association, for administrative fees for the third party administrator who oversees the employee retirement fund and other employment related fees. Funds are requested for consultants to provide victim



Grant Subaward Budget Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: County of Madera (Implemented by Community Action Partnership of Madera County)

II. Operating Expenses (Continued)

related counseling services by conducting sessions for survivors and witnesses to a crime for in both Spanish and English sessions.

Gas and oil, vehicle insurance, and vehicle repair and maintenance are budgeted to cover the programs use of an Agency vehicle. Insurance has been included to cover volunteer liability and bonding for the program. Funding is budgeted for any required DMV reports or fingerprints.

The indirect/administrative overhead rate is budgeted at 9.1% of direct project costs based on our federally approved indirect cost rate agreement. The overhead rate covers such indirect costs as personnel services and fringe benefits of administrative, accounting and human resources staff. It will also cover indirect administrative operating expenses such as rent, telephone, audit, supplies, etc. associated with the administrative and indirect staff.

The Agency does not anticipate the need for subcontracts nor foresees any unusual expenditure.



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

The Community Action Partnership of Madera County, Inc. (CAPMC) has been the implementing agency of the Victim Witness Assistance Program since 1982 in Madera County. Currently, is one of three Victim Witness Programs in California that operate under a non-profit organization.

CAPMC's Victim Services Program Manager is responsible for the administrative oversight of the Victim Witness Program. The Victim Services Coordinator is responsible for data collection and reporting of the Victim Witness Assistance Program. Both employees share the responsibility of supervising staff assigned to the program and together bring over twenty years of experience working with victims of crime. A Specialty Advocate and two Victim Advocates provide direct services, one at each of three sites located throughout Madera County-Madera (servicing the City of Madera and surrounding townships of Madera Ranchos, La Vina, Ripperdan, Parksdale, Parkwood and Madera Acres), Chowchilla (serving the City of Chowchilla and surrounding townships of Fairmead, Dairyland, Allview and Redtop), and Oakhurst (serving mountain townships of Oakhurst, Coarsegold, Raymond, North Fork, and Bass Lake). Crime victims in Madera County are assigned an Advocate that provides all mandatory and some optional services to meet the needs of crime victims.



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

Services are provided in a victim's primary language when possible. Most of CAPMC's Advocates are bilingual, a language access line or interpreter is used when needed. All services are tracked using a data collection software. All Advocates have completed the California Advanced Training for Victim Witness Advocates provided by the California Crime Victim's Assistance Association (CCVAA). Advocates and Management will attend the Crisis Response (CR) training provided by CCVAA this Grant Subaward performance period.

Mandatory Services

a. Crisis Intervention

Victims and community partners can contact Victims Services during business hours at (559) 661-1000 or the 24-hour crisis hotline (800) 355-8989. Volunteers and Advocates provide crisis intervention and support to reduce the level of trauma. Volunteers and Advocates provide services over the phone and will respond to crime scenes, law enforcement agencies, and social services when requested.

b. Emergency Assistance

Emergency assistance is provided as needed. CAPMC is able to provide emergency food, hygiene products and clothing using community donations and items purchased by the agency when needed.



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

Emergency housing and shelter is provided by collaboration agreement with emergency shelters, motel vouchers are used as a last resort. Access to petty cash is available to provide other emergency assistance such as, but not limited to gasoline and transportation tickets.

c. Resource and Referral Assistance

CAPMC provides resource and referral assistance to meet a victim's needs while service organizations, law enforcement agencies and other non-profits are used to refer victims for services such as long-term food assistance, permanent housing, rental assistance, cash aid, MediCal and educational services to name a few. Additionally, to keep up to date of services available in the community, CAPMC participates in collaborative meetings such as Social Agencies Linking Together (SALT), Central Valley Human Trafficking Task Force, Suspected Child Abuse and Neglect Review Team, Central Valley Immigration Task Force, Adult Protective Services Multi-Disciplinary Team, and other collaboration teams where community agencies come together to share information about cases, community events and services offered.

d. Direct Counseling



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

CAPMC Advocates provide telephone and in-person peer counseling to victims of crime. This is done to provide follow-up, guidance and emotional support to victims of crime. Referrals are made for victims needing professional counseling; a list of licensed providers in Madera County is also available.

e. California Victim Compensation Board

CAPMC strongly encourages victims of crime to apply for benefits through the California Victim Compensation Board (CalVCB) for costs incurred due to a crime. Advocates assist with the completion of the application, gathering necessary documentation to support the claim, and submitting the application. Advocates follow-up with crime victims until a decision is reached by CalVCB and notices are sent to victims. In cases where applications are rejected, victims are explained the appeal process and when possible, assisted with submitting an appeal or given other alternatives.

f. Property Return

In cases where property is taken as evidence, Advocates work with local law enforcement agencies and the District Attorney's Office to release the property to the crime victim. In cases where property will not be given



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

back to the direct victim or family member, Advocates work with the District Attorney's Office to provide the victim or family member with an explanation as to why that decision was made.

g. Orientation to the Criminal Justice System

When first contact is made with crime victims, Advocates provide an orientation to the criminal justice system. They explain the investigation process as well as their Mary's Law Rights and how to apply them. When cases are forwarded for prosecution, Advocates explain the court process, inform the crime victims of the next step and when needed court preparation.

h. Court Escort

Advocates provide victims of crime accompaniment to court proceedings via in-person or virtual. Prior to the court hearing, victims are informed what is expected to happen at each court hearing. After the hearing the Advocate will explain what occurred and what is expected to happen next. If a victim is attending virtually, the Advocate will contact the victim by telephone prior to the court hearing and after to make sure the victim understood the proceedings as well as to provide emotional



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

support. Accompaniment is also provided when meetings are scheduled with prosecutors or investigators handling the criminal case.

i. Presentation and Training for Criminal Justice Agencies

CAPMC will provide training to local criminal justice agencies to inform them of our role, services, Marsy's Law Rights, needs of victims, and how to access services. At a minimum, CAPMC will reach out to each law enforcement agency once per year; additional training will be provided upon request of the law enforcement agency.

j. Public Presentations and Publicity

Each year during National Crime Victim's Rights Week, CAPMC holds an event to honor victims of crime and awards community members that go above and beyond their job duties to uphold victim's rights. CAPMC will reach out to our local city and county officials to proclaim National Crimes Victim's Rights week in April. Additionally, CAPMC will participate in community events to promote the program and conduct a minimum of 4 community presentations throughout the year regarding services and how to access them. CAPMC also promotes the Victim Witness Assistance Program through its website at www.maderacap.org and social media



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

accounts: Facebook page *CAPMC Victim Services* and Instagram @vscmadera.

k. Case Status

Advocates maintain rapport with prosecutors, detectives, and investigators to keep the crime victim updated with case status reports. Communication with victims is maintained through telephone, email and/or letter to ensure victims are involved in the process and their Marys' Law Rights are not violated.

l. Family/Friend/Employer Notification

Upon the request of the victim, Advocates will notify a victim's relatives or friends of the occurrence of a crime and the victim's condition as a result of that crime.

m. Employer Notification/Intervention

Upon the request of the victim, Advocates will also notify a victim's employer of their victimization to minimize any loss of pay or other benefits which may have resulted because of the crime or the employee's participation in the criminal justice system.

n. Restitution



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

Advocates will inform crime victims seeking assistance of their right to restitution and inform them of the necessary documentation needed to obtain a court order for restitution.

Optional Services

When possible and if funds are available, Advocates will provide optional program services such as creditor intervention, child care assistance, and crime prevention information.

Madera County has limited public transportation options. When a victim is in need of transportation assistance, Advocates will arrange for transportation of the victim to court or crime related appointments or provide public transportation tickets and schedules.

When a survivor of homicide contacts CAPMC, they are provided information on CalVCB and how they may be able to assist with funeral and burial assistance. CAPMC has a working relationship with local funeral homes in Madera County that work with victims and accept direct payment from CalVCB; this helps reduce the stress of the surviving family members.

Advocates will work with court personnel to provide a waiting area during court proceedings when a defendant and their family/friends may pose an



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

uncomfortable situation or risk for the victim. Advocates will assist victims with Temporary Restraining Orders (TRO's) on a case by case basis.

Multiple Field Offices

In order to provide victims with services, CAPMC has three offices throughout Madera County to better serve the community, each office has a Victim Witness Advocate. The Coordinator of the Victim Witness Program is Leticia Lujan-rojas, lrojas@maderacap.org and the Program Manager is Jennifer Coronado, jcoronado@maderacap.org.

Madera Office

812 W. Yosemite Avenue, STE 101, Madera, CA 93637. The office number is (559)661-100 and the 24-hour crisis line is (800)355-8989.

Chowchilla Office

228 Trinity Avenue, Chowchilla, CA 93610. Office number (559)201-9353 and 24-hour crisis line (800)355-8989.

Oakhurst Office

49269 Golden Oak Drive, STE. 200, Oakhurst, CA 93644. Office number (559)658-8588 and 24-hour crisis line (800)355-8989.

Training



Grant Subaward Programmatic Narrative

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

CAPMC maintains a membership with California Crime Victims Association (CCVAA) to stay informed on the most recent changes to policies and laws that affect crime victims. Additionally, all Advocates attend training throughout the year on crime related topics, laws, trends, research and resources. New Advocates would be required to attend the California Victim Witness Entry Level Advocate Training provided by the California Crime Victims Assistance Association (CCVAA). All Advocates will also be required to attend the Crisis Response training.

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**

Subrecipient: Madera County	UEI # KNPYKHLWNKE1	FIPS #: 039-00000
Grant Disaster/Program Title: Victim Witness Assistance Program		
Performance Period: 10/01/22	to 09/30/22	Subaward Amount Requested: \$ 416,881
Type of Non-Federal Entity (Check Applicable Box)	<input type="checkbox"/> State Govt <input type="checkbox"/> Local Govt <input type="checkbox"/> JPA <input checked="" type="checkbox"/> Non-Profit <input type="checkbox"/> Tribe	

Per Title 2 CFR § 200.332, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of federal grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, *grant manager* is the individual who has primary responsibility for day-to-day administration of the grant, *bookkeeper/accounting staff* means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and *organization* refers to the subrecipient applying for the award, and/or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 years
3. How many grants does your organization currently receive?	>10 grant
4. What is the approximate total dollar amount of all grants your organization receives?	\$ 29,000,000
5. Are individual staff members assigned to work on multiple grants?	Yes
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
7. How often does your organization have a financial audit?	Annually
8. Has your organization received any audit findings in the last three years?	No
9. Do you have a written plan to charge costs to grants?	Yes
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Sometimes
12. How many years do you maintain receipts, deposits, cancelled checks, invoices?	>5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	Yes

Certification: *This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.*

Signature: (Authorized Agent)	Date:
Print Name and Title: Mattie Mendez, Executive Director	Phone Number: (559) 675-5749
Cal OES Staff Only: SUBAWARD #	



Grant Subaward Service Area Information

Grant Subaward #: VW22 36 0200

Subrecipient: Madera County

1. County or Counties Served:
Madera County

County where principal office is located: Madera County

2. U.S. Congressional District(s) Served:
CA 16
CA 4

U.S. Congressional District where principal office is located: District 16

3. State Assembly District(s) Served:
District 5

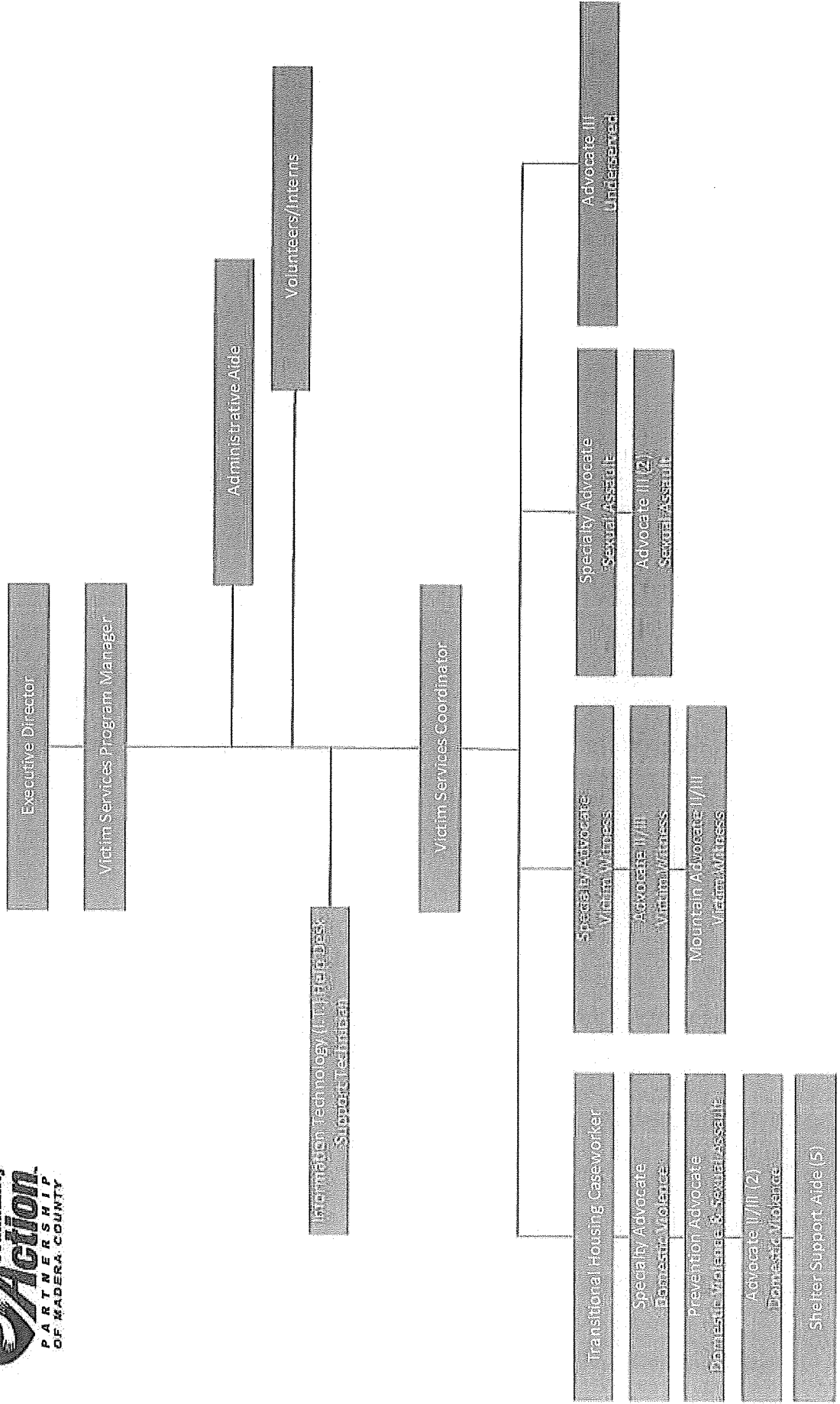
State Assembly District where principal office is located: District 5

4. State Senate District(s) Served:
District 14
District 12

State Senate District where principal office is located: District 12

5. Population of Service Area: 156,255 (Census.gov, 2020 Decennial Census)

VICTIM SERVICES





Victims of Crime Act (VOCA) Victim Assistance Formula Grant Program Match Waiver Request Form

Cal OES Subrecipients may request a partial or full match waiver for Victim of Crime Act (VOCA) Victim Assistance Formula Grant Program funds. Approval is dependent on a compelling justification. To request a partial or full match waiver, the Subrecipient must complete the following:

1. Cal OES Grant Subaward Number: VW22 36 0200
2. Subrecipient's Name: Madera County
3. Grant Subaward Performance Period 10/01/2022 through 09/30/2023
4. VOCA Fund Source #1: 20VOCA
VOCA Victim Assistance Formula Grant Program Funds Awarded: \$ 215,000
Amount of Match Proposed (post approved Match Waiver): \$ 0
5. VOCA Fund Source #2 (if applicable): 22VOCA
VOCA Victim Assistance Formula Grant Program Funds Awarded: \$ 69,265
Amount of Match Proposed (post approved Match Waiver): \$ 0

6. Briefly summarize the services provided:

The Victim Witness Program provides assistance with crisis intervention, California Victim Compensation Board claims, emergency assistance, notifications of victims rights, orientation to the criminal justice system, U-Visa application assistance, case status updates, and victim impact statements. Public presentations to community partners and to the public have been conducted virtually due to the COVID-19 pandemic, presentation will resume in-person once restrictions are lifted.

7. Describe practical/logistical obstacles and/or local resource constraints to providing match:

Community Action Partnership of Madera County, Inc. (CAPMC) operates five California Office of Emergency Services grants, all which have a match requirement. CAPMC Victim Services has been impacted over the past few years with the retention of volunteers. Madera County has been experiencing decreasing number of volunteers and donations. We are located between Fresno and Merced County, which both have college universities. College students are more interested in doing their internships with Merced and Fresno County because they are larger counties and have more job opportunities than Madera County. Most students would prefer not to commute to intern with us; creating a steady decline on new volunteers and interns. We have also been hiring from within our pool of volunteers which also contributes to our steady decline in volunteers.

Approved

Denied

Susan Grace
Unit Chief Name


Unit Chief Signature

5/20/2022
Date



Operational Agreement Summary

Information and Instructions

Operational Agreements (OA) (also referred to as a Memorandum of Understanding (MOU)) are a formal agreement, without the exchange of money, between a Subrecipient and one or more participating agency(ies)/organization(s). The OA reflects the roles each agency/organization will play in achieving the goals and objectives of the Grant Subaward.

Many programs require OAs. In such instances, the RFA or RFP will provide instructions concerning the agencies/organizations for which the Subrecipient must have an OA. In addition to any programmatic OA requirements, Subrecipients are encouraged to establish an OA with any agency/organization that will be an active participant in the implementation of the Grant Subaward.

The Operational Agreement Summary is a list of active OAs, meeting the requirements of Subrecipient Handbook Section 7.005, that a Subrecipient has with participating agencies/organizations.

Complete all sections of the form and include, at a minimum, all OAs required by the RFA or RFP. If necessary, use additional forms to show all OAs.

This form must be submitted as part of the Grant Subaward Application when required by the RFA or RFP and/or with a Grant Subaward Modification (Cal OES Form 2-223), if changes are requested during the Grant Subaward performance period.



Operational Agreement Summary

Grant Subaward #: VW 22 36 0200

Subrecipient: Madera County

Participating Agency/Organization/Individual	Date Signed	Time Frame of OA
1. <u>Lideres Campesinas</u>	<u>11/15/2019</u>	<u>10/01/2019</u> to <u>09/30/22</u>
2. <u>Madera County District Attorney</u>	<u>05/07/19</u>	<u>07/01/2019</u> to <u>09/30/22</u>
3. <u>Madera Police Department</u>	<u>05/07/19</u>	<u>07/01/19</u> to <u>09/30/2022</u>
4. <u>Chowchilla Police Department</u>	<u>05/07/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
5. <u>Madera Sheriff's Office</u>	<u>05/07/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
6. <u>California Highway Patrol</u>	<u>06/25/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
7. <u>Madera Community Hospital</u>	<u>05/07/19</u>	<u>07/01/2019</u> to <u>09/30/22</u>
8. <u>Madera County Public Health D.</u>	<u>05/07/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
9. <u>Madera Unified School District</u>	<u>06/04/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
10. <u>Madera County Department of</u>	<u>06/26/19</u>	<u>07/01/19</u> to <u>09/30/22</u>
11. <u>Camarena Health Center</u>	<u>07/18/19</u>	<u>10/01/19</u> to <u>09/30/22</u>
12. <u>Haven's Women's Center of Star</u>	<u>07/23/19</u>	<u>10/01/19</u> to <u>09/30/22</u>
13. <u>Family Services of Tulare</u>	<u>07/18/19</u>	<u>10/01/19</u> to <u>09/30/22</u>
14. <u>Marjaree Mason Center</u>	<u>07/20/19</u>	<u>10/01/19</u> to <u>09/30/22</u>
15.		to _____
16.		to _____
17.		to _____
18.		to _____
19.		to _____
20.		to _____



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
A. Personnel Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Victim Services Program Manager 15% Salary \$82,111.60 annually * 15% = \$12,316.74 /12 mos = \$1,026.40/mo salary \$1,026.40/mo * 9 mos = \$9,237.60 \$1,026.40/mo * 3 mos = \$3,079.20 Benefits \$12,316.74 * 13.304% rate = \$1,638.65 /12 mos = \$136.55/mo \$136.55/mo * 9 mos = \$1,228.95 \$136.55/mo * 3 mos = \$409.65	\$9,238	\$3,079		\$9,238 \$3,079
Administrative Aide FTE 13% Salary \$45,118.94 annually * 12 mos = \$5,865.46 /12 mos = \$488.79/mo salary \$488.79/mo * 9 mos = \$4,399.11 \$488.79/mo * 3 mos = \$1,466.37 Benefits \$5,865.46 * 29.069% rate = \$1,705.08 /12 mos = \$142.09/mo \$142.09/mo * 9 mos = \$1,278.81 \$142.09/mo * 3 mos = \$426.27	\$4,399	\$1,466	\$410	\$4,399 \$1,466
Victim Services Coordinator FTE 20% Salary \$70,377.84 annually * 10% = \$14,075.57 /12 mos = \$1,172.96/mo salary \$1,172.96/mo * 9 mos = \$10,547.64 \$1,172.96/mo * 3 mos = \$3,518.88 Benefits \$7,037.78 * 22.949% rate = \$1,615.14 /12 mos = \$134.60/mo \$134.60/mo * 9 mos = \$1,211.40 \$134.60/mo * 3 mos = \$403.80	\$10,548	\$3,519	\$427	\$10,548 \$3,519
Advocate II FTE 100% Salary \$56,366.54 annually * 100% = \$56,366.54 /12 mos = \$4,697.21/mo \$4,697.21 * 9 mos = \$42,274.89 \$4,697.21 * 3 mos = \$14,091.63	\$2,423	\$808		\$2,423 \$808
	\$42,275	\$14,092		\$42,275 \$14,092



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
A. Personnel Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Benefits \$56,366.54 * 25.8689% rate = \$14,581.40 /12 mo = \$1,215.12/mo \$1,215.12 * 9 mos = \$10,936.08 \$1,215.12 * 3 mos = \$3,645.36	\$10,936		\$3,645	\$10,936 \$3,645
Advocate II FTE 100% Salary \$51,053.39 annually/ 12 mos = \$4,254.45/mo \$4,254.45 * 9 mos = \$38,290.05 \$4,254.45 * 3 mos = \$12,763.35	\$38,290		\$12,763	\$38,290 \$12,763
Benefits \$51,053.39 * 18.9147% rate = \$9,656.61 /12 mos = \$804.72/mo \$804.72 * 9 mos = \$7,242.48 \$804.72 * 3 mos = \$2,414.19	\$7,242		\$2,414	\$7,242 \$2,414
Specialty Advocate FTE 100% Salary \$56,366.54 annually * 100% = \$56,366.54 /12 mos = \$4,697.21/mo \$4,697.21 * 9 mos = \$42,274.89 \$4,697.21 * 3 mos = \$14,091.63	\$42,275		\$14,092	\$42,275 \$14,092
Benefits \$56,366.54 * 25.8689% rate = \$14,581.38 /12 mos = \$1,215.12/mo \$1,215.12 * 9 mos = \$10,936.08 \$1,215.12 * 3 mos = \$3,645.36	\$10,936		\$3,645	\$10,936 \$3,645
**Benefits include: FICA/SUI, Health/Dental/Vision, Worker's Comp, and 4\$ retirement contribution				
Personnel Costs Fund Source Totals	\$181,070	\$60,360		\$241,430
PERSONNEL COSTS CATEGORY TOTAL				\$241,430



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
B. Operating Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Office Supplies: \$25/mo * 12 mos = \$300	\$225	\$75		\$300
Data Processing supplies: to support collection of program objectives, track and monitor progress and provide client services. Includes desktop supplies, toner, software, backup \$815. Annual warranty computer/phone switch and firewall security \$185	\$750	\$250		\$1,000
Program Supplies: to promote Victim Awareness Day and for outreach and support programs - \$1,377 Supplies for office space & staff @ Oakhurst \$400	\$1,156	\$621		\$1,777
Postage and Shipping: \$25/mo * 12 mos = \$300	\$150		\$150	\$300
Equipment rental: \$37,50/mo * 12 mos = \$450 for postage meter, photo copier rentals	\$225	\$225		\$450
Advertising & Promotion: Madera Tribune \$60 at 33% = \$20; Employee recruitment: \$200; Advertising for Victims Rights Week/Outreach = \$255	\$237	\$238		\$475
Telephone/Communication Phone service, Verizon staff cell phones, Comcast FAX & internet, Oakhurst services \$335/mo * 12 mos - \$4,020	\$2,400	\$1,620		\$4,020



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
B. Operating Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Total Rent (main office & satellite): Main office 3264 sqft Rent = 3,264 sq * \$1/sq * 12 mos = \$32,640, charging less Direct staff: 2.15 FTE * 125 sq * \$1/sq * 12 mos = \$3,225 Training/Interview/Waiting areas: 1554 sq * 21.6912% for VW = 347.08 sq * \$1/sq * 12 mos = \$4,045 Intake areas: 210sq * 48.6524% for VW = 102.17 sq * \$1/sq * 12 mos = \$1,226 Rent for office space in Oakhurts used for VW only \$861.90/mo * 12 mos = \$10,343 \$3,225 + \$4,045 + \$1,226 + \$10,343 = \$18,839 \$1,569.92/mo * 8.619708 mos = \$13,532 \$1,569.92/mo * 2.974044 mos = \$4,669 \$1,569.92/mo * 0.406248 mos = \$638	\$13,532	\$4,669	\$638	\$18,839
Utilities: Water, sewer, disposal, natural gas * electricity services, since moving \$230/mo * 12 mos = \$2,760 Service at Oakhurst location \$170/mo * 12 mos = \$2,040 \$2,760 + \$2,040 = \$4,800	\$1,380		\$1,380	\$2,760
Burglar Alarm Alarm at Oakhurst \$35/mo * 12 mos = \$420 Alarm at Madera \$17.66/mo * 12 mos = \$212	\$474		\$158	\$632
Property insurance: \$45.58/mo * 12 mos = \$547	\$410		\$137	\$547
Custodial Services Maint/Janitorial services \$178.64/mo * 12 mos= \$2,144	\$1,072		\$1,072	\$2,144



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
B. Operating Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Gas & oil Fuel for agency automobile \$170/mo * 12 mos = \$2,040. \$50/oil chg * 3 = \$150	\$1,643		\$547	\$2,190
Vehicle Insurance: \$482.29/mo * 12 mos = \$5,787	\$4,340		\$1,448	\$5,788
Vehicle Repair & Maintenance: \$45/mo * 12 mos = \$540	\$270		\$270	\$540
Liability Insurance: General liability & insurance for volunteers \$51.74/mo * 12 mos = \$621	\$466		\$155	\$621
Fees & Licenses: Retirement Plan Administration \$200 CA Crime Victim's Assistance Association \$100	\$150		\$150	\$300
Fingerprinting: Fingerprint \$15/ * 4 prints = \$60	\$120		\$125	\$245
Travel: Crisis Response Training San Francisco 4 nights x \$200, 3 days of full per diem x \$50, 2 days of partial per diem \$64, \$0.585 x 330 miles = Total of \$1,207.05		\$1,207		\$1,207



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
B. Operating Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Direct services/ Client Transportation: Dial-a-Ride tickets for direct services to client	\$85			\$85
**Indirect costs: 9.10% of direct project costs, excluding equipment @ \$290,450.05 = \$26,430.95. See attached ICR rate agreement w/Dept of HHS. Indirect covers personnel services, fringe benefits of Admin, Accounting, and HR staff. Also covers associated indirect admin operating expenses such as rent, telephone, audit, supplies, etc	\$2,445		\$23,986	\$26,431
	\$33,930	\$8,905	\$32,616	\$75,451
OPERATING COSTS CATEGORY TOTAL				\$75,451



Grant Subaward Budget Pages
Multiple Fund Sources

Subrecipient: County of Madera		Grant Subaward #: VW22 35 0200		
C. Equipment Costs - Line-item description and calculation	20VOCA	22VOCA	22VWAO	Total Amount Allocated
Equipment Costs Fund Source Totals				
EQUIPMENT COSTS CATEGORY TOTAL				

Grant Subaward Totals - Totals must match the Grant Subaward Face Sheet	20VOCA	22VOCA	22VWAO	Total Project Cost
Fund Source Totals	\$215,000	\$69,265	\$32,616	\$316,881



Report to the Board of Directors

Agenda Item Number: E-3

Board of Directors Meeting for: June 9, 2022

Author: Maritza Gomez-Zaragoza

DATE: April 21, 2022

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Program Director

SUBJECT: Early Head Start Non-Federal Share Waiver

I. RECOMMENDATION:

Review and consider approving the submission of the Madera Early Head Start Non-Federal Share Waiver for 2021-2022.

II. SUMMARY:

CAPMC Early Head Start has determined that based on the current non-federal share (in-kind) earnings the program will not be able to meet the required amount of \$155,456 by the end of May 2022. Therefore, staff will be submitting a waiver to Region IX for the amount of \$54,765

III. DISCUSSION:

- A. After the review and analysis of the March in-kind report, staff have determined that there is a potential that the non-federal share amount will not be reached by the end of the budget year – May 2022.
- B. Staff had a discussion with the Region IX Program Specialist and the suggestion was to submit a non-federal share waiver for the amount the program foresees being short.
- C. The Early Head Start program provides its service in the home. Family Facilitators, in a regular year, make weekly home visits to the participating families/children. However, due to COVID-19, services to the families/children are being provided via distance learning and home visits as families are available/comfortable with Facilitators coming to their home. This service option limits the contact with families and thus limits the ability to generate in-kind.
- D. Family Facilitators have developed some creative ways for collecting in-kind but families are unable to complete some of the activities since they are overwhelmed with the current situation.
- E. Based on the average amounts earned, the program foresees a shortage of about \$54,765.
- F. The Early Head Start Facilitators and Area Manager will be developing a plan to ensure a variety of activities are provided and promoted with families to generate in-kind and meet required amount for the 2022-2023 program year.

- The Submission of CAPMC Madera Early Head Start Non-Federal Share Waiver for 2021-2022 will be presented to the Policy Council for approval on June 2, 2022.

IV: FINANCING: None



Report to the Board of Directors

Agenda Item Number: E-4

Board of Directors Meeting for: June 9, 2022

Author: Maritza Gomez-Zaragoza

DATE: April 21, 2022

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Director

SUBJECT: Approval of Madera Regional & Early Head Start Cost of Living Adjustment (COLA) and Quality Improvement Grant Applications for the 2022-2023 Funding Year.

I. RECOMMENDATION:

Review and consider approving the 2022-2023 Regional and Early Head Start COLA and Quality Improvement Grant Applications.

II. SUMMARY:

The Consolidated Appropriations Act of 2022 contain an increase to Head Start Programs for the fiscal year of 2022. Part of the funding was earmarked for a Cost of Living Adjustment (COLA) and Quality Improvement for the Head Start Programs. The funding is intended to increase the on-going funding level of Head Start Programs through a COLA increase in the amount of 2.28%. In addition, additional funding was allocated for Quality Improvement Funds.

III. DISCUSSION:

- A. The COLA funds were earmarked for a 2.28% salary increase for staff. In the funding guidance for the Quality Improvement funds, recipients were encouraged to consider using the funding to enhance staff's salaries. After some consideration of all CAPMC Head Start Program's funding, it was proposed to consider a 3% increase for all staff. For the Head Start and Early Head Start programs the funding was combined in order to provide a 3% salary increase for all Head Start staff. The COLA funding will cover 2.65% and the Quality Improvement funds will cover .35%.
- B. The Regional and Early Head Start budgets have been amended to reflect 3% salary increase with the COLA and Quality Improvement funds beginning June 1, 2022. Related fringe benefit cost (FICA taxes, worker's compensation insurance, and retirement benefits) have been increased accordingly.
- C. After applying cost to salaries and benefits, the Early Head Start program will have some left-over funding which will be applied to the program supplies category.
- D. The attachments provide a summary of the original funding, the addition of the COLA and Quality Improvement funding, and where it was applied.

E. The allowable indirect expense for the two (2) grants is the agency's approved rate of 9.1%.

F. The Non-Federal Share (in-kind) amounts are \$15,737 for COLA and \$61,519 for Quality Improvement. The total amount has been allocated to volunteer hours.

➤ The 2022-2023 Regional and Early Head Start COLA and Quality Improvement Grant Applications for the 2022-2023 Funding year will be presented for Policy Council approval on June 2, 2022.

e. **FINANCING:**

	Head Start	Early Head Start
COLA Funding: Increase: Regional HS:	\$93,712	\$13,873
Quality Improvement Funding: Increase	\$12,803	\$3,340
Non-Federal Share: Increase of	\$26,629	\$4,303

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
MADERA REGIONAL/MARIPOSA HEAD START
BASIC DURATION BUDGET JUSTIFICATION
JUNE 1, 2022 - MAY 31, 2023

	Original		w/2.28% Cola			w/Quality		
	<u>BASIC</u>	<u>TOTAL</u>	<u>Basic</u>	<u>Basic w/Cola</u>	<u>Variance</u>	<u>Basic</u>	<u>Basic w/Quality</u>	<u>Variance</u>
6a. SALARIES	1,983,618.28	\$ 2,140,727	2,052,172.34	\$ 2,213,439.86	\$ 68,554.06	\$ 2,061,537.42	\$ 2,223,372.39	\$ 9,365.08
	157,108.47		161,267.52		\$ 4,159	\$ 161,835		\$ 567.48
6b. FRINGE BENEFITS		\$ 669,696		\$ 682,879.00			\$ 684,682.00	
Health Insurance	230,113.00		230,113.00		-	230,113.00		-
Worker's Comp (Various)	84,608.00		87,487.00		2,879.00	87,878.00		391.00
Pension Spending Credit \$200	156,122.00		160,705.00		4,583.00	161,333.00		628.00
FICA (7.65%)	168,885.00		174,606.00		5,721.00	175,390.00		784.00
SUTA (6.2%)	29,968.00		29,968.00		-	29,968.00		-
Accr Vac Fica	-							
TOTAL SALARIES & FRINGE BENEFITS		<u>\$ 2,810,423</u>		<u>\$ 2,896,319</u>	<u>\$ 85,896</u>		<u>\$ 2,908,054</u>	<u>\$ 11,735</u>
OPERATIONAL EXPENSES								
6c. TRAVEL	9,500.00	\$ 9,500		\$ 9,500	-		\$ 9,500	-
1. Lodging for 1 parent and 1 staff attending National Head Start Conference								
6d. EQUIPMENT		\$ 41,232		\$ 41,232	-		\$ 41,232	-
1. AC Unit Replacement - North Fork HS Classroom & Office								
2. Burglar Alarm System - HS Allocation								
3. Surveillance Equipment - Warehouse HS Allocation								
6e. SUPPLIES		<u>\$ 302,587</u>		<u>\$ 302,587</u>			<u>\$ 302,587</u>	<u>\$ -</u>
1 OFFICE SUPPLIES	35,362.00		35,362.00		-	35,362.00		-
Central Head Start Office:								
Head Start Sites:								
2 DATA SUPPLIES	75,000.00		75,000.00		-	75,000.00		-
Central Head Start Office:								
Head Start Sites:								
3 FOOD SUPPLIES	12,000.00		12,000.00		-	12,000.00		-
a. Children Food Program Overage								
b. Kitchen Supplies								
4 PROGRAM SUPPLIES	##### #		119,325.00		-	119,325.00		-
Central Head Start Office:								
Head Start Sites:								
5 INSTRUCTIONAL SUPPLIES	30,000.00		30,000.00		-	30,000.00		-
Central Head Start Office:								
Head Start Sites:								
6 CUSTODIAL SUPPLIES	25,000.00		25,000.00		-	25,000.00		-
Central Head Start Office:								
Head Start Sites:								
7 MEDICAL & DENTAL SUPPLIES	5,000.00		5,000.00		-	5,000.00		-
a. Head Start Sites:								
8 POSTAGE								
a. Central Head Start Office	900.00		900.00		-	900.00		-

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
MADERA REGIONAL/MARIPOSA HEAD START
BASIC DURATION BUDGET JUSTIFICATION
JUNE 1, 2022 - MAY 31, 2023

	Original		w/2.28% Cola			w/Quality		
	BASIC	TOTAL	Basic	Basic w/Cola	Variance	Basic	Basic w/Quality	Variance
6f. CONTRACTUAL	41,930.00	\$ 41,930		\$ 41,930	\$ -		\$ 41,930	\$ -
Contracts - Chawanakee (North Fork) Lbr Mental Health Consultant Fees & Expenses								
6g. CONSTRUCTION		\$ -						
6h. OTHER		\$ 561,679		\$ 561,679	\$ -		\$ 561,679	\$ -
1 Linen/Laundry Costs	-		-			-		
2 Uniform Purchases:	300.00		300.00			300		
3 Rental, Leases & Repair	33,500.00		33,500.00			33,500		
4 Equipment Maintenance & Repair	13,700.00		13,700.00			13,700		
5 Publications / Advertising / Printing	5,200.00		5,200.00			5,200		
6 Telephone/Internet -Mobile Communications	50,000.00		50,000.00			50,000		
7 Annual Rent	174,602.00		174,602.00			174,602		
8 Utilities - Electricity, Water, & Disposal	71,064.00		71,064.00			71,064		
9 Building Maintenance/Repair and Other Occupancy	128,177		128,177.00			128,177		
10 Building and Liability Insurance	12,610.00		12,610.00			12,610		
11 Consultants	-		-			-		
12 Consultant Expenses	-		-			-		
13 Legal fees and Union Negotiation	6,000.00		6,000.00			6,000		
14 Child Service Consultants	-		-			-		
15 Human Resource & Personnel Fees	12,736.00		12,736.00			12,736		
16 Transportation	22,332.00		22,332.00			22,332		
17 Local Travel	2,196.00		2,196.00			2,196		
18 Parent Activities	-		-			-		
19 Parent Services	9,420.00		9,420.00			9,420		
20 Training or Staff Development	17,000.00		17,000.00			17,000		
21 Classroom field trip	2,800.00		2,800.00			2,800		
22 Property Taxes	42.00		42.00			42		
TOTAL OPERATIONAL COST	BASIC	\$ 956,928		\$ 956,928	\$ -		\$ 956,928	\$ -
TOTAL PAYROLL COST		\$ 2,810,423		\$ 2,896,319	\$ 85,896		\$ 2,908,054	\$ 11,735
		\$ 3,767,351		\$ 3,853,247	\$ 85,896		\$ 3,864,982	\$ 11,735
6i. INDIRECT COSTS								
Indirect Costs 9.1% Of Total Direct Charges		\$ 342,829		\$ 350,645	\$ 7,816		\$ 351,713	\$ 1,068
TOTAL PA 22 HEAD START BUDGET		\$ 4,110,180		\$ 4,203,892	\$ 93,712		\$ 4,216,695	\$ 12,803
Children		246		246			246	
Cost per Child	\$	16,708	\$	17,089	\$ 381	\$	17,141	\$ 52

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY
MADERA REGIONAL/MARIPOSA HEAD START
EHS BUDDGET DETAIL JUSTIFICATION
JUNE 1, 2022 - MAY 31, 2023

	ORIGINAL		w/2.28% Cola			w/Quality		
	BASIC	TOTAL	Basic	Basic w/Cola	Variance	Basic	Basic w/Quality	Variance
6a. SALARIES	\$ 302,239	\$ 317,015	\$ 310,226	\$ 325,393	\$ 8,378	\$ 311,309	\$ 326,529	\$ 1,136
	\$ 14,776		\$ 15,167			\$ 15,220		
6b. FRINGE BENEFITS		\$ 80,927		\$ 82,181			\$ 82,354	
Insurance	\$ 27,620		\$ 27,620		\$ -	\$ 27,620		\$ -
Worker's Comp (Various)	\$ 3,665		\$ 3,762		\$ 97	\$ 3,778		\$ 16
Pension (4.0%)	\$ 18,547		\$ 19,036		\$ 489	\$ 19,104		\$ 68
Pension Spending Credit \$200	\$ 3,384		\$ 3,384		\$ -	\$ 3,384		\$ -
FICA (7.65%)	\$ 25,089		\$ 25,751		\$ 662	\$ 25,840		\$ 89
SUTA (6.2%)	\$ 2,622		\$ 2,628		\$ 6	\$ 2,628		\$ -
TOTAL SALARIES & FRINGE BENEFITS		\$ 397,942		\$ 407,574	\$ 9,632		\$ 408,883	\$ 1,309
OPERATIONAL EXPENSES								
6c. TRAVEL		\$ 1,500		\$ 1,500	\$ -		\$ 1,500	\$ -
1. EHS Conference-Florida								
6d. EQUIPMENT		\$ -						
6e. SUPPLIES		\$ 50,406		\$ 53,490	\$ 3,084		\$ 55,243	\$ 1,753
1 OFFICE SUPPLIES	\$ 4,800		\$ 4,800.00			\$ 4,800.00		
2 DATA SUPPLIES	#####		\$ 13,866			\$ 13,866		
3 FOOD SUPPLIES	\$ 200		\$ 200			\$ 200		
4 PROGRAM SUPPLIES	#####		\$ 25,314		\$ 3,084	\$ 27,067		\$ 1,753
5 MEDICAL & DENTAL SUPPLIES								
6 INSTRUCTIONAL SUPPLIES	\$ 8,400		\$ 8,400			\$ 8,400		
7 CUSTODIAL SUPPLIES	\$ 360		\$ 360			\$ 360		
8 POSTAGE	\$ 60		\$ 60			\$ 60		
6f. CONTRACTUAL		\$ 10,000		\$ 10,000			\$ 10,000	\$ -
Mental Health Consultant Fees & Expenses								
6g. CONSTRUCTION								
6h. OTHER		\$ 97,852		\$ 97,852	\$ -		\$ 97,852	\$ -
1 Equipment Rentals	\$ 1,776		\$ 1,776			\$ 1,776		
2 Equipment Maintanance & Repair	\$ 2,400		\$ 2,400			\$ 2,400		
3 Publications / Advertising / Printing	\$ 720		\$ 720			\$ 720		
4 Telephone/Internet -Mobile Communications	\$ 27,000		\$ 27,000			\$ 27,000		
5 Annual Rent	\$ 47,196		\$ 47,196			\$ 47,196		
6 Utilities - Electricity, Water, & Disposal	\$ 5,004		\$ 5,004			\$ 5,004		
7 Building Maintenance/Repair and Other Occupancy	\$ 1,716		\$ 1,716			\$ 1,716		
8 Building and Liability Insurance	\$ 3,132		\$ 3,132			\$ 3,132		
9 Other Consultants and Consultant Expenses	\$ 1,000		\$ 1,000			\$ 1,000		
10 Child Service Consultants								
11 Human Resource & Personnel Fees	\$ 0		\$ -			\$ -		
12 Transportation	\$ 3,408		\$ 3,408			\$ 3,408		
13 Local Travel	\$ 0		\$ -			\$ -		
14 Parent Services	\$ 200		\$ 200			\$ 200		
15 Training or Staff Development	\$ 4,300		\$ 4,300			\$ 4,300		
16 Classroom field trip	\$ 0		\$ -			\$ -		
17 Interest Expense	\$ 0		\$ -			\$ -		
18 Property Taxes	\$ 0		\$ -			\$ -		
TOTAL OPERATIONAL COST	28.65%	\$ 159,758		\$ 162,842	\$ 3,084		\$ 164,595	\$ 1,753
TOTAL PAYROLL COST	71.35%	\$ 397,942		\$ 407,574	\$ 9,632		\$ 408,883	\$ 1,309
Sub-Total		\$ 557,700		\$ 570,416	\$ 12,716		\$ 573,478	\$ 3,062
6i. INDIRECT COSTS								
Indirect Costs of Total Direct Charges		\$ 50,751		\$ 51,908	\$ 1,157		\$ 52,186	\$ 278
TOTAL PA 22 HEAD START BUDGET		\$ 608,451		\$ 622,324	\$ 13,873		\$ 625,664	\$ 3,340
Children	\$ 42		\$ 42			\$ 42		
Cost per Child	\$ 14,487		\$ 14,817	\$ 330		\$ 14,897	\$ 80	



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | 330 C St., SW, 4th Floor, Washington DC 20201 | eclkc.ohs.acf.hhs.gov

April 20, 2022

Grant No. 09CH011519

Dear Head Start Grant Recipient:

The Consolidated Appropriations Act, 2022, contains an increase for Head Start of approximately \$289 million over the Fiscal Year (FY) 2021 level. This includes a cost-of-living adjustment (COLA) of \$234 million and a \$52 million Quality Improvement investment. The COLA supports a 2.28 percent adjustment above FY 2021 funding levels to increase the pay scales of Head Start and Early Head Start staff, including vacant positions, fringe benefits, and to offset higher operating costs. Quality Improvement funds are allocated proportionately based on federal funded enrollment levels, with additional adjustments given to smaller grant recipients to allow for a meaningful investment, as permitted by the Act.

The following table reflects the COLA and Quality Improvement increases available for FY 2022.

Funding Type	Head Start	Early Head Start
Cost-of-Living Adjustment (COLA)	\$93,712	\$13,873
Quality Improvement (QI)	\$12,803	\$3,340
Total Funding		\$123,728

Please note, these permanent increases are effective at the start of the FY 2022 budget period and are retroactive if this period has already commenced. Allocations are subject to adjustment if changes are made to annual funding/enrollment levels. Applicable to recipients operating both a Head Start and Early Head Start program, allocations for each funding type by program must be budgeted accordingly in application submissions.

Application Submission Requirements

The supplemental application is due **June 1, 2022** and must be submitted in the [Head Start Enterprise System \(HSES\)](#). To apply, please select the **Financials** tab, **Grant Application** tab, **Fiscal Year 2022**, and add the **'Supplement – COLA and Quality Improvement'** amendment type. No other application type for these funds will be accepted. For additional information on the allowable uses of COLA and Quality Improvement funding, refer to Program Instruction ACF-PI-HS-22-02.

Content of 'Supplement – COLA and Quality Improvement' Application

Applications must include separate project narratives and detailed budget justifications for each funding type, COLA and Quality Improvement, and by program, Head Start and/or Early Head Start. Each narrative must use 12-point font, and not exceed 10 pages. All narratives, budget justifications, and other supporting documentation must be uploaded into respective folders within the **Documents** tab of the application.

For COLA, the following must be demonstrated:

- A permanent increase of no less than the required 2.28 percent adjustment to the pay scale for each Head Start/Early Head Start position, including current employees and unfilled vacancies subject to the provisions of Sections 653 and 640(j) of the Head Start Act;

- A rationale and supporting documentation detailing agency policies and procedures if a position is receiving less than the required COLA percentage or differential COLA increases;
- The provision of a no less than 2.28 percent increase to all delegate agencies and partners or justification if less than the required percentage or differential increases are provided to delegate agencies and partners;
- Written confirmation that increases will be applied retroactively to the start of the FY 2022 budget period with a description of how funds will be distributed to affected employees, if applicable;
- The planned uses for any portion of the COLA funds to offset higher operating costs, once the 2.28 percent increase is provided to all staff, delegates and partners.

For Quality Improvement, the following must be demonstrated:

- Investments are consistent with Sec. 640(a)(5) of the Act (except programs are not bound by the requirements that at least 50 percent of the funds be used for staff compensation or that no more than 10 percent of funds be used on transportation. For more information on allowable activities as outlined in the Act, please see Attachment A);
- Investments made in Quality Improvement should be ongoing; description and written confirmation that funds will be used for ongoing purposes consistent with Section 640(a)(5) of the Act;
- If funds are used for staff wages, written confirmation that increases will be applied retroactively to the start of the FY 2022 budget period with a description of how funds will be distributed to all affected employees.
- If funds are used for one-time activities in the FY 2022 budget period, describe plans for how the funds will be allocated in the subsequent budget period.

Recipients are strongly encouraged to commit to sustained quality improvement investments, such as further increasing wages of Head Start/Early Head Start educational staff. However, grant recipients have the flexibility to use these funds to support the greatest local needs, consistent with Section 640(a)(5) of the Act.

Application's Budget Tab Requirements

The data entered on the Budget tab within the application populates the SF-424A. Grantees are required to include funds for both COLA and Quality Improvement, and within the appropriate program, Head Start or Early Head Start.

Non-Federal Match

The budget and detailed budget justification must include each source of non-federal match, including estimated amount per source and the valuation methodology. Flexibilities continue for waiver requests of the non-federal match requirement through the public health emergency due to the COVID-19 pandemic. If a non-federal match waiver is being request, a value of \$0 must be entered in Section C of the SF-424A of the application. No additional justification is required, and the issuance of a notice of award constitutes approval of the request.

Supporting Documents

Signed statements of the Governing Body and Policy Council Chairs along with Governing Body and Policy Council minutes documenting each group's participation in the development and approval of the application must be provided. Through the public health emergency, at a minimum a statement confirming approval by Governing Body and Policy Council members available for contact will be accepted.

The application must be submitted on behalf of the Authorizing Official registered in the HSES. **Incomplete applications will not be processed.**

Please ensure the application contains all of the required information. If you have any questions or need assistance, please contact Chris Pflaumer, Head Start Program Specialist, at 415-437-8445 or chris.pflaumer@acf.hhs.gov or Matthew Louie, Grants Management Specialist, at 415-437-8662 or matthew.louie@acf.hhs.gov.

Program Improvement (One-Time) Requests

Grant recipients encountering program improvement needs that cannot be supported by the agency budget are invited to apply for one-time funding. This funding must be applied for separately through the appropriate amendment in HSES. Program Improvement requests are prioritized and subject to funding availability. For questions regarding program improvement needs and requests, please contact the regional office.

For technical assistance in preparing the application, please contact the HSES Help Desk at help@hsesinfo.org or 1-866-771-4737.

Sincerely,
The Office of Head Start

Attachment A

Allowable Uses of Quality Improvement Funds as Specified in the Head Start Act

1. To improve the compensation (including benefits) of educational personnel, family service workers, and child counselors, as described in Sections [644\(a\)](#) and [653](#) of the Head Start Act, in the manner determined by the Head Start agencies (including Early Head Start agencies) involved, to support the following —
 - ensure that compensation is adequate to attract and retain qualified staff for the programs involved in order to enhance program quality;
 - improve staff qualifications and assist with the implementation of career development programs for staff that support ongoing improvement of their skills and expertise; and
 - provide education and professional development to enable teachers to be fully competent to meet the professional standards established under [Sec. 648A\(a\)\(1\)](#) of the Act, including—
 - providing assistance to complete postsecondary course work;
 - improving the qualifications and skills of educational personnel to become certified and licensed as bilingual education teachers, or as teachers of English as a second language; and
 - improving the qualifications and skills of educational personnel to teach and provide services to children with disabilities
2. To support staff training, child counseling, and other services necessary to address the challenges of children from immigrant, refugee, and asylee families; homeless children; children in foster care; children with limited English proficiency; children of migrant or seasonal farmworker families; children from families in crisis; children referred to Head Start programs (including Early Head Start programs) by child welfare agencies; and children who are exposed to chronic violence or substance abuse.
3. To ensure that the physical environments of Head Start programs are conducive to providing effective program services to children and families, and are accessible to children with disabilities and other individuals with disabilities.

4. To employ additional qualified classroom staff to reduce the child-to-teacher ratio in the classroom and additional qualified family service workers to reduce the family-to-staff ratio for those workers.
5. To ensure that Head Start programs have qualified staff that promote the language skills and literacy growth of children and that provide children with a variety of skills that have been identified, through scientifically based reading research, as predictive of later reading achievement.
6. To increase hours of program operation, including the following —
 - conversion of part-day programs to full-working day programs; and
 - increasing the number of weeks of operation in a calendar year.
7. To improve community wide strategic planning and needs assessments for Head Start programs and collaboration efforts for such programs, including outreach to children described in no. 2 above.
8. To transport children in Head Start programs safely.
9. To improve the compensation and benefits of staff of Head Start agencies, in order to improve the quality of Head Start programs.



Report to the Board of Directors

Agenda Item Number: E-5

Policy Committee Meeting for: June 9, 2022

Author: Maritza Gomez-Zaragoza

DATE: April 21, 2022

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Director

SUBJECT: Approval of Madera Migrant Seasonal Head Start Cost of Living Adjustment (COLA) and Quality Improvement Grant Applications for the Contract Year Ending February 28, 2023.

I. RECOMMENDATION:

Review and consider approving the 2022-2023 Madera Migrant Seasonal Head Start COLA and Quality Improvement Grant Applications.

II. SUMMARY:

The Consolidated Appropriations Act of 2022 contain an increase to Head Start Programs for the fiscal year of 2022. Part of the funding was earmarked for a Cost of Living Adjustment (COLA) and Quality Improvement for the Head Start Programs. The funding is intended to increase the on-going funding level of Head Start Programs through a COLA increase in the amount of 2.28%. In addition, additional funding was allocated for Quality Improvement Funds.

III. DISCUSSION:

- A. The COLA funds were earmarked for a 2.28% salary increase for staff. In the funding guidance for the Quality Improvement funds, recipients were encouraged to consider using the funding to enhance staff's salaries. After some consideration of all CAPMC Head Start Program's funding, it was proposed to consider a 3% increase for all staff. For the Migrant Seasonal Head Start program the COLA funding will be used to increase salaries by the 2.28% as designated and Quality Improvement funds will cover .72% to provide a combined 3% salary increase. Any remaining funds will be allocated to areas found to need additional funding.
- B. The Migrant Seasonal Head Start budget have been amended to reflect 3% salary increase with the COLA and Quality Improvement funds beginning March 1, 2022. Related fringe benefit cost (FICA taxes, worker's compensation insurance, and retirement benefits) have been increased accordingly.
- C. The attachments provide a summary of the original funding, the addition of the COLA and Quality Improvement funding, and areas where any remaining funds were applied.

D. The allowable indirect expense for the two (2) grants is the agency's approved rate of 9.1%.

- The Madera Migrant Seasonal Head Start Cost of Living Adjustment (COLA) and Quality Improvement Grant Applications will be presented for approval on June 7, 2022.

IV. FINANCING:

COLA Funding: Increase of \$124,690

Quality Improvement Funding: Increase \$39,376

Non-Federal Share: Increase of \$0

STANISLAUS COUNTY OFFICE OF EDUCATION
CENTRAL CALIFORNIA MIGRANT HEAD START
ENTERPRISE BUDGET
March 1, 2022 - February 28, 2023

Delegate Agency: Community Action Partnership of Madera County, Inc.

		Federal Resource Pre-COLA MSHS	Federal Resource 2.28% COLA	Federal Resource Post-COLA MSHS	Federal Resource Quality MSHS 0.72%	Federal Resource Post-Quality MSHS	Federal Resource T&TA MSHS	Federal Resource Budget Total	Non-Federal Share Total	Federal & State (NFS) TOTAL BUDGET	Refunding Administrative Budget	Cola Administrative Budget	Quality Administrative Budget	TOTAL Administrative Budget
		\$ 5,468,877	\$ 124,690	\$ 5,593,567	\$ 39,376	\$ 5,632,943	\$ 31,845	\$ 5,664,788	\$ 1,375,181	\$ 7,039,969	\$ 648,877	\$ 11,845	\$ 3,741	\$ 664,548
6a Personnel														
Ent Code	Title	\$ 3,245,122	\$ 74,013	\$ 3,319,135	\$ 23,517	\$ 3,342,652	\$ -	\$ 3,342,652	\$ 721,917	\$ 4,064,569	\$ 119,257	\$ 1,073	\$ 339	\$ 120,669
CHILD HEALTH AND DEVELOPMENT														
a1	Program Managers and Content Area Experts	87,624	1,999	89,623	618	90,241	-	90,241	3,390	93,631	-	-	-	-
a2	Teachers/Infant Toddler Teachers	1,576,598	35,958	1,612,556	11,343	1,623,899	-	1,623,899	394,033	2,017,932	-	-	-	-
a3	Family Child Care Personnel	-	-	-	-	-	-	-	-	-	-	-	-	-
a4	Home Visitors	-	-	-	-	-	-	-	-	-	-	-	-	-
a5	Teacher Aides and Other Education Personnel	560,358	12,782	573,140	3,924	577,064	-	577,064	142,780	719,844	-	-	-	-
a6	Health/Mental Health Services Personnel	64,933	1,482	66,415	441	66,856	-	66,856	-	66,856	-	-	-	-
a7	Disabilities Services Personnel	-	-	-	-	-	-	-	-	-	-	-	-	-
a8	Nutrition Services Personnel	265,704	6,056	271,760	1,921	273,681	-	273,681	68,178	341,859	-	-	-	-
a9.1	Other Child Services Personnel	-	-	-	-	-	-	-	-	-	-	-	-	-
FAMILY AND COMMUNITY PARTNERSHIP														
a10	Program Managers and Content Area Experts	75,932	1,732	77,664	559	78,223	-	78,223	4,390	82,613	-	-	-	-
a11.1	Other Family and Community Partnerships Personnel : Family Service We	262,386	5,986	268,372	1,907	270,279	-	270,279	98,131	368,410	-	-	-	-
PROGRAM DESIGN AND MANAGEMENT														
a12	Executive Director	-	-	-	-	-	-	-	-	-	-	-	-	-
a13	Head Start/Early Head Start Director	36,882	841	37,723	272	37,995	-	37,995	-	37,995	36,882	841	272	37,995
a14.1	Managers	-	-	-	-	-	-	-	-	-	-	-	-	-
a15	Staff Development	29,794	679	30,473	212	30,685	-	30,685	-	30,685	-	-	-	-
a16	Clerical Personnel	134,955	3,079	138,034	926	138,960	-	138,960	11,015	149,975	12,012	-	-	12,012
a17	Fiscal Personnel	-	-	-	-	-	-	-	-	-	-	-	-	-
a18.1	Other Administrative Personnel	37,610	858	38,468	621	39,089	-	39,089	-	39,089	37,610	-	-	37,610
OTHER														
a19	Maintenance Personnel	84,851	1,934	86,785	574	87,359	-	87,359	-	87,359	5,258	-	-	5,258
a20	Transportation Personnel	-	-	-	-	-	-	-	-	-	-	-	-	-
a21.1	Other Personnel	27,495	627	28,122	199	28,321	-	28,321	-	28,321	27,495	232	67	27,994
6b Fringe Benefits		\$ 887,976	\$ 12,391	\$ 900,367	\$ 3,937	\$ 904,304	\$ -	\$ 904,304	\$ 206,290	\$ 1,110,594	\$ 32,835	\$ 373	\$ 119	\$ 33,410
b1	FICA/Medicare/SUI/Workers Comp	383,767	7,978	391,745	2,535	394,280	-	394,280	86,461	480,741	14,155	240	76	14,471
b2	Health/Dental/Life Insurance	320,563	-	320,563	-	320,563	-	320,563	78,121	398,684	11,962	-	-	11,962
b3	Retirement	183,646	4,413	188,059	1,402	189,461	-	189,461	41,708	231,169	6,614	133	42	6,958
b4.1	Other Fringe: OPEB	-	-	-	-	-	-	-	-	-	-	-	-	-
b4.2	Cell Phone Stipend	-	-	-	-	-	-	-	-	-	-	-	-	-
6c Travel (Out of County)		\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,414	\$ 4,414	\$ -	\$ 4,414	\$ 353	\$ -	\$ -	\$ 353
c1	Out-of-county Travel	-	-	-	-	-	4,414	4,414	-	4,414	353	-	-	353
6d Equipment (\$5,000 or more per unit)		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d1	Office Equipment	-	-	-	-	-	-	-	-	-	-	-	-	-
d2	Classroom/Outdoor/Home-based/FCC	-	-	-	-	-	-	-	-	-	-	-	-	-
d3	Vehicle Purchase	-	-	-	-	-	-	-	-	-	-	-	-	-
d4.1	Other Equipment	-	-	-	-	-	-	-	-	-	-	-	-	-

Delegate Agency: Community Action Partnership of Madera County, Inc.

	Federal Resource Pre-COLA MSHS	Federal Resource 2.28% COLA	Federal Resource Post-COLA MSHS	Federal Resource Quality MSHS 0.72%	Federal Resource Post-Quality MSHS	Federal Resource T&TA MSHS	Federal Resource Budget Total	Non-Federal Share Total	Federal & State (NFS) TOTAL BUDGET	Refunding Administrative Budget	Cola Administrative Budget	Quality Administrative Budget	TOTAL Administrative Budget
	\$ 5,468,877	\$ 124,690	\$ 5,593,567	\$ 39,376	\$ 5,632,943	\$ 31,845	\$ 5,664,788	\$ 1,375,181	\$ 7,039,969	\$ 648,877	\$ 11,845	\$ 3,741	\$ 664,548
6e Supplies and Equipment Under \$5,000/Unit	\$ 221,954	\$ 25,887	\$ 247,841	\$ -	\$ 247,841	\$ 3,303	\$ 251,144	\$ 5,601	\$ 256,745	\$ 5,639	\$ -	\$ -	\$ 5,639
e1 Office Supplies	11,538	-	11,538	-	11,538	-	11,538	-	11,538	2,885	-	-	2,885
e2 Child and Family Services Supplies	108,437	7,887	116,324	-	116,324	-	116,324	4,581	120,905	-	-	-	-
e3 Food Services Supplies	2,251	-	2,251	-	2,251	3,303	5,554	1,020	6,574	-	-	-	-
e4.1 Other Supplies: Non-Capitalized Equipment	42,000	-	42,000	-	42,000	-	42,000	-	42,000	-	-	-	-
e4.1 Other Supplies - Custodial Supplies	27,072	-	27,072	-	27,072	-	27,072	-	27,072	1,354	-	-	1,354
e4.2 Other Supplies - General Operation Supplies	30,656	18,000	48,656	-	48,656	-	48,656	-	48,656	1,400	-	-	1,400
6f Contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6g Construction, Repairs/Renovations (Subject to 1309 Requirements)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g1 New Construction	-	-	-	-	-	-	-	-	-	-	-	-	-
g2 Major Renovation	-	-	-	-	-	-	-	-	-	-	-	-	-
g3 Acquisition of Buildings/Modular Units	-	-	-	-	-	-	-	-	-	-	-	-	-
6h Other	\$ 657,667	\$ 2,000	\$ 659,667	\$ 8,638	\$ 668,305	\$ 21,472	\$ 689,777	\$ 441,373	\$ 1,131,150	\$ 31,979	\$ -	\$ -	\$ 31,979
h1 Depreciation/Use Allowance	-	-	-	-	-	-	-	-	-	-	-	-	-
h2 Rent	196,152	-	196,152	-	196,152	-	196,152	120,898	317,050	7,668	-	-	7,668
h3 Mortgage	-	-	-	-	-	-	-	-	-	-	-	-	-
h4 Utilities, Telephone	174,280	-	174,280	-	174,280	-	174,280	223	174,503	8,725	-	-	8,725
h5 Building and Child Liability Insurance	21,168	-	21,168	-	21,168	-	21,168	-	21,168	1,058	-	-	1,058
h6 Building Maintenance / Repair and Other Occupancy	158,784	-	158,784	-	158,784	-	158,784	-	158,784	635	-	-	635
h7 Incidental Alterations/Renovations	-	-	-	-	-	-	-	-	-	-	-	-	-
h8 Local Travel	39,408	-	39,408	-	39,408	-	39,408	-	39,408	1,200	-	-	1,200
h9 Nutrition Services	-	-	-	-	-	-	-	-	-	-	-	-	-
h10 Child Service Consultants	25,125	-	25,125	-	25,125	7,000	32,125	-	32,125	350	-	-	350
h11 Volunteers	-	-	-	-	-	-	-	320,252	320,252	-	-	-	-
h12 Substitutes (if not paid benefits)	-	-	-	-	-	-	-	-	-	-	-	-	-
h13 Parent Services	7,687	-	7,687	-	7,687	-	7,687	-	7,687	-	-	-	-
h14 Accounting and Legal Services	8,006	-	8,006	-	8,006	-	8,006	-	8,006	8,006	-	-	8,006
h15 Publications / Advertising / Printing	4,000	2,000	6,000	-	6,000	-	6,000	-	6,000	2,000	-	-	2,000
h16 Training or Staff Development	8,057	-	8,057	8,638	16,695	14,472	31,167	-	31,167	1,087	-	-	1,087
h17.1 Other - Software	-	-	-	-	-	-	-	-	-	-	-	-	-
h17.1 Other - Fingerprinting/Staff Medical Screenings	5,000	-	5,000	-	5,000	-	5,000	-	5,000	250	-	-	250
h17.2 Other - Fees & Licenses	10,000	-	10,000	-	10,000	-	10,000	-	10,000	1,000	-	-	1,000
h17.3 Other - Network Services	-	-	-	-	-	-	-	-	-	-	-	-	-
h17.4 Other - Translation Services	-	-	-	-	-	-	-	-	-	-	-	-	-
6i Direct Costs	\$ 5,012,719	\$ 114,291	\$ 5,127,010	\$ 36,092	\$ 5,163,102	\$ 29,189	\$ 5,192,291	\$ 1,375,181	\$ 6,567,472	\$ 190,063	\$ 1,446	\$ 458	\$ 192,051
6j Indirect	\$ 456,158	\$ 10,399	\$ 466,557	\$ 3,284	\$ 469,841	\$ 2,656	\$ 472,497	\$ -	\$ 472,497	\$ 458,814	\$ 10,399	\$ 3,284	\$ 472,497
j1 Indirect Costs	456,158	10,399	466,557	3,284	469,841	2,656	472,497	-	472,497	458,814	10,399	3,284	472,497
	\$ 5,468,877	\$ 124,690	\$ 5,593,567	\$ 39,376	\$ 5,632,943	\$ 31,845	\$ 5,664,788	\$ 1,375,181	\$ 7,039,969	\$ 648,877	\$ 11,845	\$ 3,742	\$ 664,548
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

April 27, 2022

Mattie Mendez, Executive Director
Community Action Partnership of Madera County (CAPMC)
1225 Gill Avenue
Madera, CA 93637

Dear Mattie:

The Migrant Seasonal and Migrant Early Head Start COLA & Quality application is due to the Office of Head Start Region XII office by June 1, 2022. The next phase is developing agency budgets. Enclosed please find the necessary guidelines and documents needed for your proposed 2022-2023 COLA & Quality budget submission.

Your funding allocation for the 2022-23 is as indicated below:

	<i>MHS</i>
COLA funds (2.28%)	\$124,690
Quality funds (0.72%)	\$39,376
Non-Federal Share	\$0
Administrative Cost Rate	9.5%

In order to assist with a timely submission of the application to the Regional office, please prepare the following documents utilizing the format provided and **submit to Stanislaus County Office of Education by May 9, 2022.**

1. 2022-23 COLA & Quality Budget (including Administrative Budget, starting with the Refunding Budget Template). Please note the Non-Federal Share budget amount will not be affected as a waiver is being requested for this application.
2. 2022-23 Total compensation form for Executive Director, Head Start Director, Human Resources Director and Fiscal Director (This is a form to comply with additional information the Office of Head Start requires in order to process our application). These forms are only applicable if the salaries are subject to COLA & Quality increases.
3. If your agency has an indirect cost and it will be charged either as a cost or Non-Federal Share, submit your agency's current approval letter.
4. Agency's 2022-23 Cost allocation plan
5. Signed 424 documents (accessed thru HSES)
6. Budget narrative
7. Program Service Plan (if revisions are needed)
8. Policy Committee and Board Approval *Ratification*. **(Please submit no later than June 30, 2022)**
9. Wage Comparability Study used to Support the Budget.

Please see Attachment A for guidelines regarding the COLA & Quality funding requirements.

Your agency's budget is to be input online through the Head Start Enterprise System (HSES). **Login and password information can be requested through PIM@stancoe.org. Please contact Steve Larson regarding the HSES entry process and for any on-site training arrangements needed.**

Please note that the submission of the 2022-23 COLA & Quality budget documents requires the approval of your agency's Governing Board and Policy Committee. The signature page must be signed and received by **June 30, 2022**, however, we can grant extensions on this document submission. Please request an extension from Steve Larson, if needed.

Please upload and submit all documents to Basecamp. In addition, submit original hard copy signature pages *only*. You may not change the total budget amounts indicated above unless it is approved by this office.

Please continue to follow the new budget format as you develop 2022-23 COLA & Quality budgets. It is critical that the budgets be submitted in this format. Any budgets received that are not in the required format will be returned for resubmission.

This data is being provided for planning purposes only and should not be interpreted as the offer of a contract.

Please submit all COLA & Quality application materials by May 9, 2022 through Basecamp.

Should you have any questions regarding the enclosed information, please contact Marissa Duran for program questions and myself for fiscal inquiries at (209) 238-6300.

Thank you for your continued efforts to serve children and their families.

Sincerely,

Ramona Trejo

Ramona Trejo
Director of CFS Financial Services

CC: Tony Jordan, Executive Director
Marissa Duran, Director II
Steve Larson, Senior Financial Services Manager
Christine Rodriguez, Manager, Planning and Information Management



STANISLAUS COUNTY OFFICE OF EDUCATION
CENTRAL CALIFORNIA MIGRANT HEAD START

Application for Federal Assistance
Policy Council/Committee and Board Approval Verification

Agency Community Action Partnership of Madera County, Inc.
Amount of Request Cola \$124,690 & Quality \$39,376
Date of Request May 9, 2022
Period of Request March 1, 2022 to February 28, 2023
Number of Children 579

This application has the approval of the Governing Board of
Community Action Partnership of Madera County, Inc.
As recorded in their minutes of _____.

(Signed) _____
(Governing Board/President)

(Date) _____

This application has the approval of the Central California Migrant
Head Start Parent Policy Council/Committee of
Community Action Partnership of Madera County, Inc.
As recorded in their minutes of _____.

(Signed) _____
(Policy Council/Committee Chairperson)

(Date) _____



Report to the Board of Directors

Agenda Item Number: E-6

Board of Directors Meeting for: June 9, 2022

Author: Maritza Gomez-Zaragoza

DATE: April 21, 2022

TO: Board of Directors

FROM: Maritza Gomez-Zaragoza, Head Start Director

SUBJECT: Approval of Fresno Migrant Seasonal Head Start Cost of Living Adjustment (COLA) and Quality Improvement Grant Applications for the Contract Year Ending August 30, 2023.

I. RECOMMENDATION:

Review and consider approving the 2022-2023 Fresno Migrant Seasonal Head Start COLA and Quality Improvement Grant Applications.

II. SUMMARY:

The Consolidated Appropriations Act of 2022 contain an increase to Head Start Programs for the fiscal year of 2022. Part of the funding was earmarked for a Cost of Living Adjustment (COLA) and Quality Improvement for the Head Start Programs. The funding is intended to increase the on-going funding level of Head Start Programs through a COLA increase in the amount of 2.28%. In addition, additional funding was allocated for Quality Improvement Funds.

III. DISCUSSION:

A. The COLA funds were earmarked for a 2.28% salary increase for staff. In the funding guidance for the Quality Improvement funds, recipients were encouraged to consider using the funding to enhance staff's salaries. After some consideration of all CAPMC Head Start Program's funding, it was proposed to consider a 3% increase for all staff. For the Fresno Migrant Seasonal Head Start program the 2.28% of the COLA will be used as intended. Additionally the Quality Improvement funds will be utilized to provide an additional .72% in order to provide a 3% salary increase for all Head Start staff. Any remaining funds will be applied to categories that have been found to need additional funding due to rising cost.

B. The Migrant Seasonal Head Start budget have been amended to reflect 3% salary increase with the COLA and Quality Improvement funds beginning September 1, 2022. Related fringe benefit cost (FICA taxes, worker's compensation insurance, and retirement benefits) have been increased accordingly.

C. The attached budget will provide a summary of the original funding, the addition of the COLA and Quality Improvement funding, and where it was applied. The budget comparison will also provide information of categories that were increased with the remaining funding.

D. The allowable indirect expense for the two (2) grants is the agency's approved rate of 9.1%.

E. The Non-Federal Share (in-kind) budget has been revised to include the additional funding. The amounts have been added to volunteer hours.

- The Fresno Migrant Seasonal Head Start Cost of Living Adjustment (COLA) and Quality Improvement Grant Applications for the Contract Year Ending August 30, 2023 will be presented for approval on June 8, 2022.

IV. FINANCING:

COLA Funding	\$106,076
Quality Improvement Funding	\$ 44,763
Non-Federal Share Increase	\$ 20,569

Community Action Partnership of San Luis Obispo County, Inc.
 Fresno Migrant and Seasonal Head Start
 Community Action Partnership of Madera County
 PA 23 Basic Budget
 2022-23

5/12/2022
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	Original BASIC	Original TOTAL	2.28% Cola BASIC	2.28% Cola TOTAL	Variance	Quality BASIC	Quality TOTAL	Variance
SALARIES	\$ 2,721,015	\$ 2,895,512	\$ 2,782,882	\$ 2,961,358	\$ 65,846	\$ 2,802,858	\$ 2,982,618	\$ 21,260
	\$ 174,497		\$ 178,476			\$ 179,760		
FRINGE BENEFITS		\$ 777,483		\$ 786,291	\$ 8,808		\$ 789,724	\$ 3,433
Health Insurance	\$ 227,216		\$ 227,216		\$ -	\$ 227,216		\$ -
Worker's Comp (Various)	\$ 109,261		\$ 111,729		\$ 2,468	\$ 112,519		\$ -
Pension (4.0%)	\$ 144,779		\$ 148,073		\$ 3,294	\$ 149,125		\$ -
Pension Spending Credit \$200	\$ 35,980		\$ 35,980		\$ -	\$ 35,980		\$ -
FICA (7.65%)	\$ 218,319		\$ 221,365		\$ 3,046	\$ 222,956		\$ -
SUTA (6.2%)	\$ 41,928		\$ 41,928		\$ -	\$ 41,928		\$ -
TOTAL SALARIES & FRINGE BENEFITS		<u>\$ 3,672,995</u>		<u>\$ 3,747,649</u>	<u>\$ 74,654</u>		<u>\$ 3,772,342</u>	<u>\$ 24,693</u>
Out of the Area Travel-Staff								
Staff Travel (Out of the Area)	\$ -		\$ -		\$ -	\$ -		\$ -
Per Diem Staff	\$ -		\$ -		\$ -	\$ -		\$ -
Total Travel (Out of the Area)		<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>
Equipment (Excess \$5000.00/Unit)								
Insight Company								
Total Equipment (Excess \$5000/Unit)		<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>
Office Supplies								
Office Supplies-Fresno Head Start Office	\$ 6,072	\$ 14,580	\$ 6,072	\$ 14,580	\$ -	\$ 6,072	\$ 14,580	\$ -
Office Supplies-Head Start Sites	\$ 8,508		\$ 8,508		\$ -	\$ 8,508		\$ -
Data Processing Supplies		\$ 10,000		\$ 10,000	\$ -		\$ 10,000	\$ -
Office Supplies-Fresno Head Start Office	\$ 3,000		\$ 3,000		\$ -	\$ 3,000		\$ -
Office Supplies-Head Start Sites	\$ 7,000		\$ 7,000		\$ -	\$ 7,000		\$ -
Food Supplies		\$ 20,000		\$ 20,000	\$ -		\$ 20,000	\$ -
Food/Children -Food Experience -Head Start Sites	\$ 20,000		\$ 20,000		\$ -	\$ 20,000		\$ -
Kitchen Supplies- Head Start Sites		\$ 1,050.00		\$ 1,050	\$ -		\$ 1,050	\$ -
Program Supplies								
Fresno Headstart Office	\$ 14,600	\$ 50,000	\$ 14,600	\$ 50,000	\$ -	\$ 14,600	\$ 50,000	\$ -
Program Supplies-Head Start Sites	\$ 35,400		\$ 35,400		\$ -	\$ 35,400		\$ -
Medical Supplies								
Fresno Headstart Office	\$ -	\$ 175	\$ -	\$ 175	\$ -	\$ -	\$ 175	\$ -
Medical/Dental Supplies-Head Start Sites	\$ 175		\$ 175		\$ -	\$ 175		\$ -
Instructional Supplies								
Fresno Headstart Office Truma Literature and Supplies	\$ -	\$ 1,050	\$ -	\$ 1,050	\$ -	\$ -	\$ 1,050	\$ -
Program Supplies-Head Start Sites	\$ 1,050		\$ 1,050		\$ -	\$ 1,050		\$ -
Custodial Supplies								
Fresno Headstart Office	\$ 4,500	\$ 20,400	\$ 4,500	\$ 20,400	\$ -	\$ 4,500	\$ 20,400	\$ -
Custodial Supplies-Head Start Sites	\$ 15,900		\$ 15,900		\$ -	\$ 15,900		\$ -
Postage								
Fresno Head Start Office	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ -	\$ 1,500	\$ 1,500	\$ -
Total Supplies		<u>\$ 118,755</u>		<u>\$ 118,755</u>	<u>\$ -</u>		<u>\$ 118,755</u>	<u>\$ -</u>
Contracts								
Speech Therapist - Screenings	\$ 13,700		\$ 13,700		\$ -	\$ 13,700		\$ -
Total Contracts		<u>\$ 13,700</u>		<u>\$ 13,700</u>	<u>\$ -</u>		<u>\$ 13,700</u>	<u>\$ -</u>
Renovation								
Total Renovation		<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>		<u>\$ -</u>	<u>\$ -</u>
Other								
Rentals and Leases								
Fresno Headstart Office	\$ 12,996.00	\$ 33,876	\$ 12,996	\$ 33,876	\$ -	\$ 12,996	\$ 33,876	\$ -
Rentals -Head Start Sites	\$ 20,880.00		\$ 20,880		\$ -	\$ 20,880		\$ -
Equipment Repair and Maintenance								
Fresno Headstart Office	\$ 1,596.00	\$ 14,568	\$ 1,596	\$ 14,568	\$ -	\$ 2,520	\$ 17,362	\$ 2,794
Repairs & Maintenance -Head Start Sites	\$ 12,972.00		\$ 12,972		\$ -	\$ 14,842		\$ -
Printing and Advertising								
Printing and Publications-Fresno Office	\$ 5,010.00	\$ 5,010	\$ 5,010	\$ 5,010	\$ -	\$ 5,010	\$ 5,010	\$ -
Printing and Publications-Head Start Sites	\$ -		\$ -		\$ -	\$ -		\$ -
Advertising & Promotion	\$ 240	\$ 240	\$ 240	\$ 240	\$ -	\$ 240	\$ 240	\$ -
Communications								
Fresno Headstart Office	\$ 16,992.00	\$ 74,868	\$ 16,992	\$ 74,868	\$ -	\$ 16,992	\$ 74,868	\$ -
Telephone Head Start Sites	\$ 57,876.00		\$ 57,876		\$ -	\$ 57,876		\$ -
Annual Rent								
Fresno Headstart Office	\$ 62,196.00	\$ 79,601	\$ 84,769	\$ 102,175	\$ 22,574	\$ 84,769	\$ 102,175	\$ -
Head Start Sites	\$ 17,405.00		\$ 17,406		\$ -	\$ 17,406		\$ -
UTILITIES								
Fresno Headstart Office	\$ 19,596.00	\$ 72,240	\$ 19,596	\$ 72,240	\$ -	\$ 25,356	\$ 78,000	\$ 5,760
Head Start Sites	\$ 52,644.00		\$ 52,644		\$ -	\$ 52,644		\$ -
Building Maintenance, Repair, and Occupancy								
Fresno Headstart Office R&M	\$ 4,000.00	\$ 32,000	\$ 4,000	\$ 32,000	\$ -	\$ 4,000	\$ 32,000	\$ -
Head Start Sites R&M	\$ 28,000.00		\$ 28,000		\$ -	\$ 28,000		\$ -
Grounds Maintenance	\$ 18,960	\$ 18,960	\$ 18,960	\$ 18,960	\$ -	\$ 21,000	\$ 21,000	\$ 2,040
Pest Control-Centers	\$ 6,600	\$ 6,600	\$ 6,600	\$ 6,600	\$ -	\$ 6,600	\$ 6,600	\$ -
Burglar & Fire Alarm	\$ 6,512	\$ 6,512	\$ 6,512	\$ 6,512	\$ -	\$ 6,512	\$ 6,512	\$ -
Custodial Services	\$ 4,776	\$ 4,776	\$ 4,776	\$ 4,776	\$ -	\$ 4,776	\$ 4,776	\$ -

Community Action Partnership of San Luis Obispo County, Inc.
 Fresno Migrant and Seasonal Head Start
 Community Action Partnership of Madera County
 PA 23 Basic Budget
 2022-23

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	Original BASIC	Original TOTAL	2.28% Cola BASIC	2.28% Cola TOTAL	Variance	Quality BASIC	Quality TOTAL	Variance
Building and Child Liability								
Property Insurance	\$ 12,480	\$ 14,052	\$ 12,480	\$ 14,052	\$ -	\$ 13,600	\$ 15,172	\$ 1,120
Liability Insurance	\$ 432		\$ 432		\$ -	\$ 432		\$ -
Student Activity Insurance	\$ 1,140		\$ 1,140		\$ -	\$ 1,140		\$ -
Consultants								
Psychological/Child Observation Services	\$ 18,520	\$ 24,898	\$ 18,520	\$ 24,898	\$ -	\$ 18,520	\$ 24,898	\$ -
Consultant Expenses	\$ 378		\$ 378		\$ -	\$ 378		\$ -
Legal	\$ 6,000		\$ 6,000		\$ -	\$ 6,000		\$ -
Screening/Medical								
Employee Screening/Medical & Drug Testing	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ -	\$ 1,000	\$ 1,000	\$ -
Vehicle Repair & Maintenance								
Vehicle Gas & Oil	\$ 12,500	\$ 38,888	\$ 12,500	\$ 38,888	\$ -	\$ 12,500	\$ 42,296	\$ 3,408
Vehicle Insurance	\$ 16,392		\$ 16,392		\$ -	\$ 19,800		\$ -
Vehicle Repair & Maintenance	\$ 9,996		\$ 9,996		\$ -	\$ 9,996		\$ -
Travel and Per Diem								
Staff Travel Local	\$ 3,930	\$ 3,930	\$ 3,930	\$ 3,930	\$ -	\$ 3,930	\$ 3,930	\$ -
Per Diem -Parent	\$ -		\$ -		\$ -	\$ -		\$ -
Volunteer Travel	\$ -		\$ -		\$ -	\$ -		\$ -
Staff Training								
Staff Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Training-Volunteer	\$ -		\$ -		\$ -	\$ -		\$ -
Training-Participants/clients	\$ -		\$ -		\$ -	\$ -		\$ -
Training-Parents	\$ -		\$ -		\$ -	\$ -		\$ -
Education Reimbursement	\$ -		\$ -		\$ -	\$ -		\$ -
Pupil Field Trips	\$ -		\$ -		\$ -	\$ -		\$ -
Other		\$ 26,941		\$ 26,941	\$ -		\$ 26,941	\$ -
Property Taxes	\$ 5,800.00		\$ 5,800		\$ -	\$ 5,800		\$ -
Fees and Licenses	\$ 10,500.00		\$ 10,500		\$ -	\$ 10,500		\$ -
Fingerprints	\$ 500.00		\$ 500		\$ -	\$ 500		\$ -
CPR Fees	\$ 240.00		\$ 240		\$ -	\$ 240		\$ -
Depreciation Expense	\$ -		\$ -		\$ -	\$ -		\$ -
Interest Expense	\$ -		\$ -		\$ -	\$ -		\$ -
Employee Health and Safety	\$ 8,475		\$ 8,475		\$ -	\$ 8,475		\$ -
Volunteer Recognition	\$ -		\$ -		\$ -	\$ -		\$ -
Parent Activity	\$ 700		\$ 700		\$ -	\$ 700		\$ -
Parent Mileage	\$ 126		\$ 126		\$ -	\$ 126		\$ -
Parent Involvement	\$ -		\$ -		\$ -	\$ -		\$ -
Policy Council Food	\$ 600		\$ 600		\$ -	\$ 600		\$ -
Total Other		\$ 458,960		\$ 481,534	\$ 22,574		\$ 497,870	\$ 16,336
Total Operational Cost	12.7%	\$ 591,415	12.9%	\$ 613,989	\$ 22,574	13.1%	\$ 630,325	\$ 16,336
Total Payroll Cost	78.9%	\$ 3,672,995	78.8%	\$ 3,747,649	\$ 74,654	78.5%	\$ 3,772,342	\$ 24,693
Total Costs		\$ 4,264,410		\$ 4,361,638	\$ 97,228		\$ 4,402,667	\$ 41,029
Total Indirect Costs	8.34%	\$ 388,061	8.34%	\$ 396,909	\$ 8,848	8.34%	\$ 400,643	\$ 3,734
TOTAL BUDGET	Contract	\$ 4,652,471	Contract	\$ 4,758,547	\$ 106,076	Contract	\$ 4,803,310	\$ 44,763
		469		469	\$ -		469	\$ -
		\$ 9,920		\$ 10,146	\$ 226		\$ 10,242	\$ 96



Report to the Board of Directors

Agenda Item Number: E-7

Board of Directors Meeting for: June 9, 2022

Author: Sandra Ramirez

DATE: April 28, 2022

TO: Board of Directors

FROM: Sandra Ramirez

SUBJECT: 2021-2022 State Based Migrant Part Year Program (CMIG) One-Time COVID Round 2 Funds

I. RECOMMENDATION:

Review and consider approving the 2021-2022 Amendment #2 Budget for CMIG One-Time COVID Round 2 funding to Stanislaus County Office of Education.

II. SUMMARY:

Staff have prepared a budget for Round 2 One-Time COVID funds on Amendment #2 on March 21, 2022. Fund must be spent by June 30, 2022.

III. DISCUSSION:

The CMIG One-Time COVID funds to be used for additional supplies for Sierra Vista Head Start Center to purchase program related supplies like children's furniture, class materials, playground supplies, and employee aprons.

IV. FINANCING:

Award \$16,200
Indirect cost 9.1%

**STANISLAUS COUNTY OFFICE OF EDUCATION
 CMIG ONE-TIME COVID-19 ROUND 2 BUDGET
 July 1, 2021 - June 30, 2022**

Delegate Agency: Community Action Partnership of Madera County

						Total 825 COVID CMIG FUND AB82 16,200	
6a Personnel						\$ -	
Ent Code	Title					<u>\$ -</u>	
6b Fringe Benefits						\$ -	
6c Travel (Out of County)						\$ -	
6d Equipment (\$5,000 or more per unit)						\$ -	
6e Supplies and Equipment Under \$5,000/Unit						\$ 14,849	
e1	Office Supplies						
e2	Child and Family Services Supplies					14,849	
e2	Program Materials						
e2	Program Materials (classroom supplies and outdoor supplies)	4,950	/month	x	3	months	14,849
e2	Center Office Supplies						
e2	Instructional Supplies	-	/month	x		months	-
e2	Medical/Dental Supplies						
6f Contracts						\$ -	
6g Construction, Repairs/Renovations (Subject to 1309 Requirements)						\$ -	
6h Other						\$ -	
6i Direct Costs						\$ 14,849	
6j Indirect						\$ 1,351	
j1	Indirect Costs					1,351	
	Covid Fund CMIG AB82 9.1%					1,351	
					\$ 16,200		
					<u>\$ 0</u>		



Report to the Board of Directors

Agenda Item Number: E-8

Board of Directors Meeting for: June 9, 2022

Author: Sandra Ramirez

DATE: May 27, 2022

TO: Board of Directors

FROM: Sandra Ramirez

SUBJECT: 2021-2022 State Based Migrant Part Year Program (CMIG) Funding Grant Budget Revision for Amendment #3

I. RECOMMENDATION:

Review and consider approving the 2021-2022 Amendment #3 One-time increase in CMIG funds from Stanislaus County Office of Education.

II. SUMMARY:

Staff have prepared comparison budget revision based on agency's funding allocations for the 2021-2022 funding guidance and amounts received from Stanislaus County Office of Education.

III. DISCUSSION:

Stanislaus County Office of Education contact CAPMC for the opportunity to provide one-time increase of CMIG funding to meet the needs of the CMIG program.

- A. Increase in base funding and transfer more costs from the Blended program for the following categories in CMIG:
 - a. Personnel and Fringe
 - b. Supplies
 - c. Other expenditures like telephone, utilities, building repair and maintenance.
 - d. Indirect cost

IV: FINANCING:

	Approved	Amendment#3	Increase
Total Grant Award CMIG Budget	\$786,682	\$813,089	\$26,407

**STANISLAUS COUNTY OFFICE OF EDUCATION
STATE MIGRANT CHILD CARE - CMIG
CMIG BUDGET COMPARISON REVISION
July 1, 2021 - June 30, 2022**

Delegate Agency: COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

322 CMIG		Approved Budget	Modification Changes	Revised Budget
6a	Personnel	556,795	5,050	561,845
6b	Fringe	156,245	6,325	162,570
6c	Travel	-	0	-
6d	Equip >5,000	-	0	-
6e	Equip <5,000	-	0	-
6e	Supplies	6,575	803	7,378
6f	Contracts	-	0	-
6g	Renovations	-	0	-
6h	Other	1,450	12,026	13,476
	Total Direct	721,065	24,204	745,269
6i	Indirect	65,617	2,203	67,820
	Total	786,682	26,407	813,089

Explanation of requested variance/changes:			Changes
6a	Net Increase:	Increase funds from Amendment #3 to increase the base funding and transfer more blended costs for Personnel to CMIG program.	5,050
6b	Net Increase:	Increase funds from Amendment #3 to increase the base funding and transfer more blended costs for Fringe to CMIG program.	6,325
6c	No Change		-
6d	No Change		-
6e	No Change		-
6e	Net Increase:	Increase funds from Amendment #3 to increase the base funding and transfer more blended costs for Supplies to CMIG program.	803
6f	No Change		-
6g	No Change		-
6h	Net Increase:	Increase funds from Amendment #3 to increase the base funding and transfer more blended costs for Other overhead costs to CMIG program like phone, utilites, and building repair & maintenance.	12,026
6i	Net Increase:	Increase funds to allocate indirect costs from categories above.	2,203
Total			26,407

Approval Section	
Delegate Director:	Date:
Agency Executive Director:	Date:
Policy Committee Approval: not required	Date:
Board Approval:	Date:
Grantee Director:	Date:



Report to the Board of Directors

Agenda Item Number: E-9

Board of Directors Meeting for: June 9, 2022

Author: Daniel Seeto

DATE: June 7, 2022

TO: Board of Directors

FROM: Daniel Seeto, Chief Financial Officer

SUBJECT: Community Action Partnership of Madera County, Inc. Agency-wide Budget

I. RECOMMENDATION:

Approve the agency-wide budget required by the CSBG Organizational Standards adopted by the State of California Community Services Division.

II. SUMMARY:

The CSBG Organizational Standards require that the CAPMC Board of Directors approve an agency-wide budget. Attached for your review is the proposed budget for the fiscal year ending June 30, 2022.

III. DISCUSSION:

- A. This agency-wide budget summary is intended to complement, not replace program budgets and is prepared for the fiscal year from July 1, 2021 to June 30, 2022.
- B. It is recognized that each grant or program will likely have an annual budget that may be for a different time period. Grant or program budgets may cross two organization fiscal years.
- C. The agency-wide budget is a forecast for the upcoming fiscal year, based on the best information at the time of development. It provides the board with an overview of expected revenues and expenditures. It is probable that actual revenues and expenditures will differ. There is no requirement for the agency to pass a modified agency-wide budget during the course of a year as things change.
- D. This budget has been prepared without using cash reserves and to maintain programs and services at existing levels.
- E. The budget reflects a decrease to Child Care Programs compared to the prior year budget, but this is mostly due to the prior budget assuming that the full contract will be earned. Based on data from both 2021 and 2022 however, CAPMC knows the contract amounts allocated exceed the existing demand in the service area, so the fiscal year 2022 budget has incorporated this accordingly.
- F. Attached is the CAPMC agency-wide budget for the 2021-2022 year for your review and consideration.

- G. The elimination entries on the agency-wide budget involve the agency's indirect cost pool that funds administration, human resources, and fiscal services. It eliminates inter-agency revenue and expenses.

IV. FINANCING

The estimated revenues and expenses are approximately \$32.85 million. The actual revenues and expenses for 2020-2021 were about \$32.87 million.



Report to the Board of Directors

Agenda Item Number: E-10

Board of Directors' Meeting for: June 9, 2022

Author: Daniel Seeto

DATE: June 3, 2022

TO: Board of Directors

FROM: Daniel Seeto, Chief Financial Officer

SUBJECT: Review and ratify the filings of the Tax and Information Returns of Community Action Partnership of Madera County, Inc. (CAPMC) prepared by Brown Armstrong CPA's for the Year Ended June 30, 2021

I. RECOMMENDATION:

Review and ratify the filings of the tax and information returns of Community Action Partnership of Madera County, Inc. prepared by Brown Armstrong CPA's.

II. SUMMARY:

The agency is required to file certain tax and information returns each year. Brown Armstrong CPA's prepared the returns from the financial statement information for the year ended June 30, 2021.

III. DISCUSSION:

- A. A copy of the Form 990 is attached for your review and consideration. This return has to be filed electronically. The CFO and his designee Consultant have reviewed the tax return prior to presenting it to the Board of Directors.
- B. The returns are prepared from information obtained from the audited financial statements for the year ended June 30, 2021.
- C. The appropriate filing extensions were obtained and granted until May 16, 2022. The returns were submitted before the due date.
- D. The other required federal and state returns have been reviewed by the CFO and/or his designee Consultant and will be filed on behalf of the agency by the CFO. These include the California Return for Exempt Organizations Form 199 and the Annual Registry of Charitable Trusts Registration Form.

IV. FINANCING: Not Applicable



**BROWN
ARMSTRONG**
CERTIFIED PUBLIC ACCOUNTANTS

May 13, 2022

Community Action Partnership of
Madera County, Inc.
1225 Gill Avenue
Madera, CA 93637

Dear Mr. Seeto:

Your 2020 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Your 2020 California Exempt Organization Annual Information Return will be electronically filed with the State of California upon receipt of a signed Form 8453-EO. No tax is payable with the filing of this return.

Enclosed is your California Registration/Renewal Fee Report to the Attorney General. The original should be signed at the bottom of page one. There is a fee due of \$800 payable by May 16, 2022. Make the check or money order payable to "Department of Justice" and mail your California report on or before May 16, 2022 to:

REGISTRY OF CHARITABLE TRUSTS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

The returns, as you know, were prepared from data made available to but not audited by us. Before executing the returns, you should review the information reported on them to determine that there are no omissions or misstatements of material facts.

We recommend mailing all tax filings via certified mail, return receipt requested, for substantiation that your documents were mailed by the required due dates.

Please be sure to call if you have any questions.

Sincerely,

BROWN ARMSTRONG
ACCOUNTANCY CORPORATION

By: Clint W. Baird

Enclosure(s)

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning 7/01, 2020, and ending 6/30, 202021

▶ Do not send to the IRS. Keep for your records.
▶ Go to www.irs.gov/Form8879EO for the latest information.

2020

Department of the Treasury
Internal Revenue Service

Name of exempt organization or person subject to tax
**COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.**

Taxpayer identification number
94-1612823

DANIEL SEETO CFO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1 a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b <u>31,351,556.</u>
2 a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2 b _____
3 a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b _____
4 a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b _____
5 a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5 b _____
6 a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6 b _____
7 a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7 b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize BROWN ARMSTRONG ACCOUNTANCY CORP to enter my PIN 17650 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency (ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN 77508827800
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature CLINT W. BAIRD Date _____

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2020** calendar year, or tax year beginning **7/01**, **2020**, and ending **6/30**, **20** **2021**

B Check if applicable:	C	D Employer identification number
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC. 1225 GILL AVENUE MADERA, CA 93637	94-1612823 E Telephone number (559) 673-9173
		G Gross receipts \$ 31,351,556.

F Name and address of principal officer: SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>If "No," attach a list. See instructions</small>
--	--	--

I Tax-exempt status:	<input checked="" type="checkbox"/> 501(c)(3)	501(c) () (insert no.)	4947(a)(1) or	527
-----------------------------	---	-------------------------	---------------	-----

J Website: WWW.MADERACAP.ORG	H(c) Group exemption number ▶
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K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1965	M State of legal domicile: CA
---	---	---

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>HELPING PEOPLE, CHANGING LIVES AND MAKING OUR COMMUNITY A BETTER PLACE TO LIVE BY PROVIDING RESOURCES AND SERVICES THAT INSPIRE PERSONAL GROWTH AND INDEPENDENCE.</u>				
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3 Number of voting members of the governing body (Part VI, line 1a)	3			15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4			15
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5			339
	6 Total number of volunteers (estimate if necessary)	6			954
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a			0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b			0.
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)		29,114,993.	30,941,311.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		177,675.	304,447.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,565.	1,560.	
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		33,333.	104,238.	
			29,327,566.	31,351,556.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)				
	14 Benefits paid to or for members (Part IX, column (A), line 4)				
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		15,288,356.	16,529,898.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)				
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 98,225.				
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,959,233.	14,810,984.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		29,247,589.	31,340,882.		
19 Revenue less expenses. Subtract line 18 from line 12		79,977.	10,674.		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)		7,066,885.	7,553,724.	
	22 Net assets or fund balances. Subtract line 21 from line 20		4,637,234.	4,914,156.	
		2,429,651.	2,639,568.		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date
	▶ DANIEL SEETO <small>Type or print name and title</small>	CFO

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	CLINT W. BAIRD	CLINT W. BAIRD			P01318969
	Firm's name ▶ BROWN ARMSTRONG ACCOUNTANCY CORP	Firm's address ▶ 4200 TRUXTUN AVE STE 300		Firm's EIN ▶ 95-3109182	
	BAKERSFIELD, CA 93309	Phone no. (661) 324-4971			

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

HELPING PEOPLE, CHANGING LIVES AND MAKING OUR COMMUNITY A BETTER PLACE TO LIVE BY PROVIDING RESOURCES AND SERVICES THAT INSPIRE PERSONAL GROWTH AND INDEPENDENCE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,121,244. including grants of \$) (Revenue \$ 54,901.)

MIGRANT PROGRAMS: THE MIGRANT PROGRAMS PROVIDE EARLY EDUCATION AND OTHER SERVICES TO LOW INCOME CHILDREN AND FAMILIES OF MIGRANT WORKERS IN FRESNO AND MADERA COUNTIES. SERVICES INCLUDE CHILD CARE, MEDICAL / DENTAL SCREENING, MEALS FOR CHILDREN, MENTAL HEALTH & DISABILITY SERVICES, AND HEALTH AND NUTRITION EDUCATION. IT SERVED 849 CHILDREN AND FAMILIES.

4b (Code:) (Expenses \$ 9,306,684. including grants of \$) (Revenue \$ 310,442.)

CHILD CARE PROGRAMS: THE CHILD CARE PROGRAMS PROVIDE CHILD CARE AND REFERRAL SERVICES FOR LOW INCOME FAMILIES. OTHER SERVICES PROVIDED INCLUDE EDUCATIONAL AND LEARNING MATERIALS, MEALS FOR CHILDREN AND CPR AND FIRST AID CLASSES TO PROVIDERS. APPROXIMATELY SERVED 758 CHILDREN WITH CHILD CARE, AND 137 CHILD CARE HOMES AND CENTERS WERE SERVED.

PROVIDED CHILDREN WITH 22,521 BREAKFASTS, 19,313 LUNCHES, AND 14,782 AFTERNOON SNACKS. STATE MIGRANT PROGRAM SERVED 52 CHILDREN AND THE CALIFORNIA STATE PRESCHOOL PROGRAM SERVED 88 CHILDREN.

4c (Code:) (Expenses \$ 4,786,315. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4d Other program services (Describe on Schedule O.) SEE SCHEDULE O

(Expenses \$ 4,563,791. including grants of \$) (Revenue \$)

4e Total program service expenses 28,778,034.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II.</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>	X	
b Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>		X
c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV.</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV.</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I</i> See instructions.		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28b A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 339		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a		X
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a		X
b	If 'Yes,' enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966? 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12. 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders. 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O. 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15		X
If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16		X
If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI.

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year. 1 a 15 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1 b	Enter the number of voting members included on line 1a, above, who are independent. 1 b 15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7 b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?		X
10 b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11 b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	X	
12 b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12 c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15 a	The organization's CEO, Executive Director, or top management official.	X	
15 b	Other officers or key employees of the organization. SEE SCHEDULE O.	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16 b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ CA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ▶ DANIEL SEETO 1225 GILL AVENUE MADERA CA 93637 (559) 673-9173

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII.

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DONNA TOOLEY PAST CFO	40 0			X			189,313.	0.	13,685.	
(2) MATTIE MENDEZ EXECUTIVE DIR.	40 0			X			0.	136,058.	66,047.	
(3) MARTIZA GOMEZ-ZARAGOSA MADERA DIRECTOR	40 0					X	127,245.	0.	11,758.	
(4) IRENE YANG HR DIRECTOR	40 0					X	117,334.	0.	7,716.	
(5) DANIEL SEETO CFO	40 0			X			83,514.	0.	8,511.	
(6) VICKI BANDY BOARD MEMBER	1 0	X					0.	0.	0.	
(7) DEBI BRAY BOARD MEMBER	1 0	X					0.	0.	0.	
(8) DEBORAH MARTINEZ BOARD MEMBER	1 0	X					0.	0.	0.	
(9) DAVID HERNANDEZ SEC / TREASURER	1 0	X					0.	0.	0.	
(10) LETICIA GONZALEZ BOARD MEMBER	1 0	X					0.	0.	0.	
(11) DIANA PALMER BOARD MEMBER	1 0	X					0.	0.	0.	
(12) DONALD HOLLEY BOARD MEMBER	1 0	X					0.	0.	0.	
(13) ERIC LICALSI VICE CHAIR	1 0	X					0.	0.	0.	
(14) ALMA HERNANDEZ BOARD MEMBER	1 0	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) RICHARD GUTIERREZ BOARD MEMBER	1 0	X					0.	0.	0.	
(16) TYSON POGUE CHAIRPERSON	1 0	X					0.	0.	0.	
(17) MOLLY HERNANDEZ BOARD MEMBER	1 0	X					0.	0.	0.	
(18) AURORA FLORES BOARD MEMBER	1 0	X					0.	0.	0.	
(19) STEVE MONTES BOARD MEMBER	0 0	X					0.	0.	0.	
(20) MARTHA GARCIA BOARD MEMBER	0 0	X					0.	0.	0.	
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Subtotal							517,406.	136,058.	107,717.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							517,406.	136,058.	107,717.	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization										3

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual.</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person.</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MERCED COUNTY COMMUNITY ACTION AGENCY P.O. BOX 2085 MERCED, CA 95344	WEATHERIZATION SERV.	209,428.
FRESNO ECONOMIC OPPORTUNITIES COMMISSION 1920 MARIPOSA MALL, STE. 33	DELIVERY SERVICES	315,863.
KIDS KARE SCHOOLS, INC. 4697 N. BENDEL FRESNO, CA 93722	CHILD CARE SERVICES	1,013,196.
MADERA COUNTY AUDITOR CONTROLLER 200 WEST FOURTH STREET MADERA, CA 9	SALARY REIMBURSEMENT	235,041.
KC CONSTRUCTION COMPANY 635 BARSTOW AVENUE, #21 CLOVIS, CA 93612	CONSTRUCTION/MAINTENANCE	211,761.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e 30,817,241.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 124,070.				
	g Noncash contributions included in lines 1a-1f	1 g				
	h Total. Add lines 1a-1f		30,941,311.			
	Program Service Revenue	2 a PARENT FEES	Business Code 900099	304,447.	304,447.	
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			304,447.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,560.		1,560.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real	41,797.			
		(ii) Personal				
		6 b Less: rental expenses				
	6 c Rental income or (loss)		41,797.			
	d Net rental income or (loss)		41,797.		41,797.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7 b Less: cost or other basis and sales expenses				
	7 c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
8 b Less: direct expenses						
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19						
	9 b Less: direct expenses					
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances						
	10 b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	62,441.	62,441.		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		62,441.			
12 Total revenue. See instructions		31,351,556.	366,888.	0.	43,357.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX.

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	408,885.	136,058.	272,827.	0.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	12,754,752.	11,593,403.	1,089,168.	72,181.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	3,366,261.	3,031,171.	316,930.	18,160.
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,074,424.	889,352.	185,072.	
12 Advertising and promotion				
13 Office expenses	3,057,937.	2,828,468.	229,469.	
14 Information technology				
15 Royalties				
16 Occupancy	2,174,953.	1,939,446.	227,623.	7,884.
17 Travel	208,743.	202,425.	6,318.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	41,563.	10,380.	31,183.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>DIRECT ASSISTANCE</u>	7,036,119.	7,036,119.		
b <u>TELEPHONE</u>	404,506.	365,268.	39,238.	
c <u>CAPITAL PURCHASES</u>	267,104.	267,104.		
d <u>OTHER EXPENSES</u>	176,622.	139,780.	36,842.	
e All other expenses	369,013.	339,060.	29,953.	
25 Total functional expenses. Add lines 1 through 24e	31,340,882.	28,778,034.	2,464,623.	98,225.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X.

		(A) Beginning of year		(B) End of year
Assets	1 Cash – non-interest-bearing	56,594.	1	44,089.
	2 Savings and temporary cash investments	1,790,658.	2	2,803,466.
	3 Pledges and grants receivable, net	3,490,094.	3	2,735,763.
	4 Accounts receivable, net		4	32,359.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	28,029.	8	26,446.
	9 Prepaid expenses and deferred charges	35,428.	9	44,833.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,258,553.		
	b Less: accumulated depreciation	10b 5,487,161.	1,558,424.	10c 1,771,392.
	11 Investments – publicly traded securities		11	
	12 Investments – other securities. See Part IV, line 11		12	
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	107,658.	15	95,376.
16 Total assets. Add lines 1 through 15 (must equal line 33)	7,066,885.	16	7,553,724.	
Liabilities	17 Accounts payable and accrued expenses	4,362,345.	17	4,214,964.
	18 Grants payable		18	
	19 Deferred revenue	234,851.	19	470,365.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	40,038.	25	228,827.
	26 Total liabilities. Add lines 17 through 25	4,637,234.	26	4,914,156.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,429,651.	27	2,639,568.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	2,429,651.	32	2,639,568.	
33 Total liabilities and net assets/fund balances	7,066,885.	33	7,553,724.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,351,556.
2	Total expenses (must equal Part IX, column (A), line 25)	2	31,340,882.
3	Revenue less expenses. Subtract line 2 from line 1	3	10,674.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,429,651.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE O	9	199,243.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,639,568.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.	Employer identification number 94-1612823
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	23982967.	24528517.	26206306.	29069955.	30817241.	134604986.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	23982967.	24528517.	26206306.	29069955.	30817241.	134604986.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4.						134604986.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4.	23982967.	24528517.	26206306.	29069955.	30817241.	134604986.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	23,565.	25,344.	27,702.	23,889.	43,357.	143,857.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI	21,644.	4,967.				26,611.
11 Total support. Add lines 7 through 10.						134775454.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).	14	99.87 %
15 Public support percentage from 2019 Schedule A, Part II, line 14.	15	99.84 %

16a **33-1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ▶

b **33-1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ▶

17a **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. ▶

b **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. ▶

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)).	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)).	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

b 33-1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If 'Yes,' answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If 'Yes,' describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ('foreign supported organization')? <i>If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If 'Yes,' provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If 'Yes,' answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a	
b A family member of a person described in line 11a above?	11b	
c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI .	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI .	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

BAA

Schedule A (Form 990 or 990-EZ) 2020

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

BAA

Schedule A (Form 990 or 990-EZ) 2020

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>	<u>2016</u>
SPECIAL EVENT INCOME				\$ 4,967.	\$ 21,644.
TOTAL	\$ 0.	\$ 0.	\$ 0.	\$ 4,967.	\$ 21,644.

Schedule B**(Form 990, 990-EZ, or 990-PF)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020Name of the organization **COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.**Employer identification number
94-1612823**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization COMMUNITY ACTION PARTNERSHIP OF	Employer identification number 94-1612823
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPT. OF HEALTH & HUMAN SERV 330 C STREET, SW WASHINGTON, DC 20201	\$ 4,977,956.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CALIFORNIA DEPT. OF EDUCATION 1430 N STREET SACRAMENTO, CA 95814	\$ 7,498,582.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	STANISLAUS CO. OFFICE OF EDUCATION 1100 H STREET MODESTO, CA 95354	\$ 7,411,919.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	COMM. ACTION PARTNERSHIP OF SLO CO. 1030 SOUTHWOOD DRIVE SAN LUIS OBISPO, CA 93401	\$ 5,397,512.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CALIFORNIA DEPT. OF CSD 2389 GATEWAY OAKS DRIVE, #100 SACRAMENTO, CA 95833	\$ 1,748,614.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	CA GOVERNOR'S OFFICE OF EMER. SERV. 3650 SCHRIEVER AVENUE MATHER, CA 95655	\$ 1,563,236.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COMMUNITY ACTION PARTNERSHIP OF	Employer identification number 94-1612823
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	N/A ----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.

94-1612823

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

(ii) Assets included in Form 990, Part X. ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

b Assets included in Form 990, Part X. ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		59,005.		59,005.
b Buildings		4,364,110.	3,484,836.	879,274.
c Leasehold improvements		488,285.	218,781.	269,504.
d Equipment		2,347,153.	1,783,544.	563,609.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 1,771,392.

Part VII Investments – Other Securities.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CDE RESERVE	39,974.
(3) DUE TO FUNDER	188,853.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	228,827.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	32,883,550.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	1,531,994.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	1,531,994.	
3	Subtract line 2e from line 1		3	31,351,556.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	31,351,556.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	32,872,876.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	1,531,994.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	1,531,994.	
3	Subtract line 2e from line 1		3	31,340,882.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	31,340,882.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.

Employer identification number

94-1612823

Part I Questions Regarding Compensation

1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4 a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4 b**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4 c**
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5 a**
- b** Any related organization? **5 b**
- If 'Yes' on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6 a**
- b** Any related organization? **6 b**
- If 'Yes' on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III. **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III. **8**

9 If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1 b		
2		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8		X
9		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MATTIE MENDEZ EXECUTIVE DIR.	(i)	0.	0.	0.	0.	0.	0.	
	(ii)	136,058.	0.	0.	0.	0.	136,058.	
2 DONNA TOOLEY PAST CFO	(i)	189,313.	0.	0.	0.	0.	189,313.	
	(ii)	0.	0.	0.	0.	0.	0.	
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.

Employer identification number

94-1612823

FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

OTHER PROGRAMS INCLUDING THE FOLLOWING:

*RAPE/SEXUAL ASSAULT SERVICES: VICTIM SERVICES PROVIDES HELP FOR SURVIVORS OF SEXUAL ASSAULT REGARDLESS OF HOW LONG AGO IT HAPPENED OR WHETHER OR NOT THE ASSAULT WAS REPORTED. SERVICES INCLUDE A CONFIDENTIAL 24-HOUR CRISIS LINE AND COUNSELING.

*CHILD FORENSIC INTERVIEW TEAM: PROVIDES MULTI-DISCIPLINARY TEAM TO CONDUCT INTERVIEW OF ALLEGED SEXUAL ABUSE WITH CHILDREN. PROVIDED 112 INTERVIEWS.

*VICTIM & WITNESS SERVICES: VICTIM SERVICES STRIVES TO REDUCE THE TRAUMA OF A CRIME BY EMPOWERING AND ASSISTING CRIME VICTIMS, WITNESSES, AND SIGNIFICANT OTHERS TO RESTRUCTURE THEIR LIVES THROUGH ADVOCACY, SUPPORT, INFORMATION, AND REFERRALS.

*MARTHA DIAZ DOMESTIC VIOLENCE & TRANSITIONAL HOUSING PROGRAMS: MARTHA DIAZ WILL PROVIDE UP TO 30 DAYS OF EMERGENCY SHELTER TO WOMEN AND CHILDREN WHO ARE IN IMMEDIATE DANGER OF DOMESTIC VIOLENCE. THE EXACT LOCATION OF THE 18-BED SHELTER IS KEPT CONFIDENTIAL TO PROTECT THE SAFETY OF THE RESIDENTS. ALL RESIDENTS RECEIVE LODGING, FOOD, AND CLOTHING. 45 INDIVIDUALS WERE SERVED. THE TRANSITIONAL HOUSING PROGRAM PROVIDES HOUSING AND CONTINUED CASE MANAGEMENT FOR UP TO 18 MONTHS TO WOMEN AND CHILDREN FOLLOWING THE EMERGENCY SHELTER STAY. APPROXIMATELY 17 INDIVIDUALS WERE SERVED.

*STRENGTHENING FAMILIES PROGRAM: THIS PROGRAM INSTRUCTS PARENTS AND CHILDREN ON HOW TO FUNCTION AS AN IMPROVED FAMILY UNIT. IT TEACHES FAMILIES TO INTERACT WITH EACH

OTHER IN A THOUGHTFUL FASHION. APPROXIMATELY 159 FAMILIES SECURED TRAINING.

Name of the organization COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.

Employer identification number
94-1612823

FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

*SENIOR NUTRITION PROGRAM: THIS PROGRAM SERVES MEALS TO SENIORS AND ASSISTS IN THEIR DAILY NUTRITIONAL NEEDS. THERE WERE APPROXIMATELY 120 SENIORS SERVED THROUGH HOMEBOUND DELIVERIES.

*HOUSING PROVIDED ON A NON-EMERGENCY BASIS: THERE WERE APPROXIMATELY 45 INDIVIDUALS WHO WERE PROVIDED HOUSING FOR THOSE WITH MENTAL HEALTH CONDITIONS. THIS HOUSING WAS IN ADDITION TO THOSE RECEIVING EMERGENCY HOUSING.

*EMERGENCY FOOD & SHELTER PROGRAMS: PROVIDE HOUSING ASSISTANCE TO QUALIFIED FAMILIES OF MADERA COUNTY. APPROXIMATELY 45 INDIVIDUALS WERE PROVIDED WITH RENTAL ASSISTANCE AND THERE WERE 1,052 OUTREACH SERVICES.

*CALIFORNIA DISASTER ASSISTANCE ADDRESSING DROUGHT: PROVIDED DRINKING WATER TO 101 FAMILIES WHO HAD NO POTABLE WATER.

ENERGY PROGRAMS:

*THE COMMUNITY SERVICES DEPARTMENT RUNS THE LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP). LIHEAP APPLIES A CREDIT TO PG&E AND PROPANE ACCOUNTS, AND HELPS PAY FOR WOOD FOR APPLICANTS WHO QUALIFY.

*WEATHERIZATION ALSO FALLS UNDER THE COMMUNITY SERVICES DEPARTMENT. THE WEATHERIZATION SERVICE ENABLES FAMILIES TO PERMANENTLY REDUCE THEIR ENERGY BILLS BY MAKING THEIR HOMES MORE ENERGY EFFICIENT.

Name of the organization COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.	Employer identification number 94-1612823
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FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

HEAD START: THE HEAD START PROGRAM PROVIDES EARLY EDUCATION AND SERVICES FOR LOW INCOME CHILDREN AND FAMILIES IN MADERA COUNTY. SERVICES INCLUDE CHILD CARE, MEDICAL/DENTAL SCREENING, MEALS FOR CHILDREN, MENTAL HEALTH & DISABILITY SERVICES, AND HEALTH AND NUTRITION EDUCATION. IT SERVED 304 CHILDREN AND FAMILIES.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

ALL INFORMATION RETURNS ARE REVIEWED BY THE AGENCY'S CFO AND EXECUTIVE DIRECTOR PRIOR TO FILING. COMPLETED FORMS ARE PRESENTED TO THE FINANCE COMMITTEE AND/OR THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

THE AGENCY CONDUCTS A SALARY COMPENSATION STUDY EVERY THREE YEARS. FROM THIS, A SALARY PLAN COVERING ALL CLASSES OF EMPLOYEES IN THE AGENCY IS PREPARED. THE PLAN DEPICTS MINIMUM, INTERMEDIATE AND MAXIMUM RATES OF PAY FOR EACH JOB CLASS. RATES ARE DETERMINED BY REVIEW OF THE FOLLOWING: A. PREVAILING RATES OF PAY FOR COMPARABLE WORK IN OTHER PUBLIC AND PRIVATE EMPLOYMENT; B. APPROPRIATE INTERNAL PAY DIFFERENCES BETWEEN THE AGENCY'S JOB CLASSES; C. CURRENT CHANGES IN COSTS OF LIVING; D. AGENCY FINANCIAL CONDITION; AND E. OTHER INFORMATION OR OUTSIDE SOURCES THE EXECUTIVE DIRECTOR DEEMS REASONABLE OR APPROPRIATE.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

CAPMC IS SUBJECT TO THE CA PUBLIC RECORDS ACT. PEOPLE MAY REQUEST PUBLIC INSPECTION/ACCESS TO RECORDS EXCEPT THOSE EXEMPTED BY LAW. THE REQUEST MUST BE IN WRITING TO THE ED. WITHIN 10 DAYS, THE AGENCY WILL DECIDE IF THE REQUEST WILL BE APPROVED, IF WHOLE, OR IN PART. THE AGENCY'S AUDITED FINANCIAL STATEMENTS AND BOARD AGENDAS ARE ON THE AGENCY'S WEBSITE.

Name of the organization COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.	Employer identification number 94-1612823
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**FORM 990, PART XI, LINE 9
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

DEPRECIATION CHARGED AGAINST RESTRICTED NET ASSETS.....	\$ -345,661.
NET ADDITIONS TO RESTRICTED NET ASSETS.....	544,904.
NET ADJUSTEMENTS FOR FINANCING.....	
TOTAL	<u>\$ 199,243.</u>

2020

California Exempt Organization
Annual Information Return

199

Calendar Year 2020 or fiscal year beginning (mm/dd/yyyy) 7/01/2020, and ending (mm/dd/yyyy) 6/30/2021.

Corporation/Organization name COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.		California corporation number 0500803
Additional information. See instructions.		FEIN 94-1612823
Street address (suite or room) 1225 GILL AVENUE		PMB no.
City MADERA	State CA	Zip code 93637
Foreign country name	Foreign province/state/county	Foreign postal code

<p>A First return. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>B Amended return. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>C IRC Section 4947(a)(1) trust. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>D Final information return? <input checked="" type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized Enter date: (mm/dd/yyyy) ● _____</p> <p>E Check accounting method: 1 <input type="checkbox"/> Cash 2 <input checked="" type="checkbox"/> Accrual 3 <input type="checkbox"/> Other</p> <p>F Federal return filed? 1 ● <input type="checkbox"/> 990T 2 ● <input type="checkbox"/> 990-PF 3 ● <input type="checkbox"/> Sch H (990) 4 <input type="checkbox"/> Other 990 series</p> <p>G Is this a group filing? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>H Is this organization in a group exemption If "Yes," what is the parent's name? _____</p>	<p>I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>K Is the organization exempt under R&TC Section 23701g? If "Yes," enter the gross receipts from nonmember sources. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No \$ _____</p> <p>L Is the organization a limited liability company? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>M Did the organization file Form 100 or Form 109 to report taxable income? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>N Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>O Is federal Form 1023/1024 pending? <input type="checkbox"/> Yes <input type="checkbox"/> No Date filed with IRS _____</p>
--	---

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8.	●	1	410,245.
	2	Gross dues and assessments from members and affiliates.	●	2	
	3	Gross contributions, gifts, grants, and similar amounts received. SEE SCH. B.	●	3	30,941,311.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B.	●	4	31,351,556.
	5	Cost of goods sold.	●	5	
	6	Cost or other basis, and sales expenses of assets sold.	●	6	
	7	Total costs. Add line 5 and line 6.		7	
	8	Total gross income. Subtract line 7 from line 4.	●	8	31,351,556.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18.	●	9	31,340,882.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	●	10	10,674.
Filing Fee	11	Total payments.	●	11	
	12	Use tax. See General Information K.	●	12	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11.	●	13	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12.	●	14	
	15	Penalties and Interest. See General Information J.	●	15	
	16	Balance due. Add line 12 and line 15. Then subtract line 11 from the result.	●	16	0.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		Date	● Telephone (559) 673-9173
	Signature of officer	Title CFO		
Paid Preparer's Use Only	Preparer's signature	CLINT W. BAIRD	Date	● PTIN P01318969
	Firm's name (or yours, if self-employed) and address	BROWN ARMSTRONG ACCOUNTANCY CORP 4200 TRUXTUN AVE STE 300 BAKERSFIELD, CA 93309	Check if self-employed <input type="checkbox"/>	● Firm's FEIN 95-3109182
				● Telephone (661) 324-4971
May the FTB discuss this return with the preparer shown above? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions.	●	1	
	2	Interest	●	2	
	3	Dividends	●	3	
	4	Gross rents	●	4	41,797.
	5	Gross royalties	●	5	
	6	Gross amount received from sale of assets (See Instructions)	●	6	
	7	Other income. Attach schedule. SEE STATEMENT 1	●	7	368,448.
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Page 1, Part I, line 1.		8	410,245.
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule.	●	9	
	10	Disbursements to or for members	●	10	
	11	Compensation of officers, directors, and trustees. Attach schedule	●	11	408,885.
	12	Other salaries and wages	●	12	12,754,752.
	13	Interest	●	13	
	14	Taxes	●	14	
	15	Rents	●	15	2,174,953.
	16	Depreciation and depletion (See instructions)	●	16	
	17	Other expenses and disbursements. Attach schedule. SEE STATEMENT 2	●	17	16,002,292.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Page 1, Part I, line 9.		18	31,340,882.

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		1,847,252.	●	2,847,555.
2	Net accounts receivable		3,490,094.	●	2,768,122.
3	Net notes receivable			●	
4	Inventories		28,029.	●	26,446.
5	Federal and state government obligations			●	
6	Investments in other bonds			●	
7	Investments in stock			●	
8	Mortgage loans			●	
9	Other investments. Attach schedule			●	
10 a	Depreciable assets	6,640,921.		7,199,548.	
b	Less accumulated depreciation	5,141,502.	1,499,419.	5,487,161.	1,712,387.
11	Land		59,005.	●	59,005.
12	Other assets. Attach schedule. STM 3		143,086.	●	140,209.
13	Total assets		7,066,885.		7,553,724.
Liabilities and net worth					
14	Accounts payable		4,362,345.	●	4,214,964.
15	Contributions, gifts, or grants payable			●	
16	Bonds and notes payable			●	
17	Mortgages payable			●	
18	Other liabilities. Attach schedule. STM 4		274,889.		699,192.
19	Capital stock or principal fund		2,429,651.	●	2,639,568.
20	Paid-in or capital surplus. Attach reconciliation			●	
21	Retained earnings or income fund			●	
22	Total liabilities and net worth		7,066,885.		7,553,724.

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000			
1	Net income per books	●	10,674.
2	Federal income tax	●	
3	Excess of capital losses over capital gains	●	
4	Income not recorded on books this year. Attach schedule.	●	
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●	
6	Total. Add line 1 through line 5.		10,674.
7	Income recorded on books this year not included in this return. Attach schedule	●	
8	Deductions in this return not charged against book income this year. Attach schedule.	●	
9	Total. Add line 7 and line 8		
10	Net income per return. Subtract line 9 from line 6.		10,674.

Schedule B**(Form 990, 990-EZ, or 990-PF)**Department of the Treasury
Internal Revenue ServiceCALIFORNIA COPY
Schedule of Contributors

OMB No. 1545-0047

2020▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**Name of the organization **COMMUNITY ACTION PARTNERSHIP OF
MADERA COUNTY, INC.**Employer identification number
94-1612823**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization COMMUNITY ACTION PARTNERSHIP OF	Employer identification number 94-1612823
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPT. OF HEALTH & HUMAN SERV 330 C STREET, SW WASHINGTON, DC 20201	\$ 4,977,956.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CALIFORNIA DEPT. OF EDUCATION 1430 N STREET SACRAMENTO, CA 95814	\$ 7,498,582.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	STANISLAUS CO. OFFICE OF EDUCATION 1100 H STREET MODESTO, CA 95354	\$ 7,411,919.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	COMM. ACTION PARTNERSHIP OF SLO CO. 1030 SOUTHWOOD DRIVE SAN LUIS OBISPO, CA 93401	\$ 5,397,512.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CALIFORNIA DEPT. OF CSD 2389 GATEWAY OAKS DRIVE, #100 SACRAMENTO, CA 95833	\$ 1,748,614.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	CA GOVERNOR'S OFFICE OF EMER. SERV. 3650 SCHRIEVER AVENUE MATHER, CA 95655	\$ 1,563,236.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COMMUNITY ACTION PARTNERSHIP OF	Employer identification number 94-1612823
---	--

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	N/A ----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

STATEMENT 1
FORM 199, PART II, LINE 7
OTHER INCOME

OTHER INCOME.....	\$ 62,441.
OTHER INVESTMENT INCOME.....	1,560.
PROGRAM SERVICE REVENUE.....	304,447.
TOTAL	<u>\$ 368,448.</u>

STATEMENT 2
FORM 199, PART II, LINE 17
OTHER EXPENSES

CAPITAL PURCHASES.....	\$ 267,104.
DIRECT ASSISTANCE.....	7,036,119.
INSURANCE.....	41,563.
MEDICAL EXPENSES.....	10,916.
OFFICE EXPENSES.....	3,057,937.
OTHER EMPLOYEE BENEFIT.....	3,366,261.
OTHER EXPENSES.....	176,622.
OTHER FEES.....	1,074,424.
POSTAGE AND SHIPPING.....	52,271.
RENTALS.....	140,453.
REPAIRS AND MAINTENANCE.....	45,025.
TELEPHONE.....	404,506.
TRAVEL.....	208,743.
VEHICLE EXPENSES.....	120,348.
TOTAL	<u>\$16,002,292.</u>

STATEMENT 3
FORM 199, SCHEDULE L, LINE 12
OTHER ASSETS

DEPOSITS.....	95,376.
PREPAID EXPENSES AND DEFERRED CHARGES.....	44,833.
TOTAL	<u>\$ 140,209.</u>

STATEMENT 4
FORM 199, SCHEDULE L, LINE 18
OTHER LIABILITIES

CDE RESERVE.....	39,974.
DEFERRED REVENUE.....	470,365.
DUE TO FUNDER.....	188,853.
TOTAL	<u>\$ 699,192.</u>

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS:
www.oag.ca.gov/charities



(For Registry Use Only)

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

**Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312**

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC. <small>Name of Organization</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report
List all DBAs and names the organization uses or has used 1225 GILL AVENUE <small>Address (Number and Street)</small>	State Charity Registration Number CT-46385
MADERA, CA 93637 <small>City or Town, State, and ZIP Code</small>	Corporation or Organization No. 0500803
(559) 673-9173 <small>Telephone Number</small>	DSEETO@MADERACAP.ORG <small>E-mail Address</small>
Federal Employer ID No. 94-1612823	

**ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice**

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

PART A – ACTIVITIES

For your most recent full accounting period (beginning 7/01/20 ending 6/30/21) list:

Total Revenue \$ (including noncash contributions) 31,351,556. **Noncash Contributions \$** 0. **Total Assets \$** 7,553,724.

Program Expenses \$ 0. **Total Expenses \$** 31,340,882.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During this reporting period, were any organization funds used to pay any penalty, fine or judgment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During this reporting period, did the organization receive any governmental funding? SEE STATEMENT 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 During this reporting period, did the organization hold a raffle for charitable purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Does the organization conduct a vehicle donation program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9 At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

DANIEL SEETO <small>Signature of Authorized Agent</small>	CFO <small>Printed Name</small>	Title <small>Title</small>	Date <small>Date</small>
--	------------------------------------	-------------------------------	-----------------------------

**STATEMENT 1
FORM RRF-1, PART B, LINE 5
GOVERNMENT AGENCY THAT PROVIDED FUNDING**

U.S. DEPT. OF HEALTH & HUMAN SERVICES
330 C STREET, SW
WASHINGTON, D.C., 20201

CALIFORNIA DEPT. OF EDUCATION
1430 N STREET
SACRAMENTO, CA 95814

STANISLAUS CO. OFFICE OF EDUCATION
1100 H STREET
MODESTO, CA 95354

COUNTY OF MADERA
200 W. FOURTH STREET
MADERA, CA 93637

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
3650 SCHRIEVER AVENUE
MATHER, CA 95655

DEPT. OF HOUSING & URBAN DEVELOPMENT
451 7TH STREET, SW
WASHNINTON, D.C. 20410

CA DEPT. OF COMMUNITY SERVICES AND DEVELOPMENT
2389 GATEWAY OAKS DRIVE, SUITE 100
SACRAMENTO, CA 95833

CITY OF MADERA
205 WEST FOURTH STREET
MADERA, CA 93637

FRESNO COUNTY OFFICE OF EDUCATION
1111 VAN NESS AVENUE
FRESNO, CA 93721

MADERA COUNTY OFFICE OF EDUCATION
1105 SOUTH MADERA AVENUE
MADERA, CA 93637

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR

California e-file Return Authorization for Exempt Organizations

FORM

2020

8453-EO

Exempt Organization name COMMUNITY ACTION PARTNERSHIP OF	Identifying number 94-1612823
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Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	31,351,556.
2 Total gross income (Form 199, line 8)	2	31,351,556.
3 Total expenses and disbursements (Form 199, line 9)	3	31,340,882.

Part II Settle Your Account Electronically for Taxable Year 2020

4 Electronic funds withdrawal 4a Amount _____ 4b Withdrawal date (mm/dd/yyyy) _____

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____
 6 Account number _____ 7 Type of account: Checking Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2020 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here Signature of officer _____ Date _____ Title **CFO**

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2020 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign	ERO's signature	CLINT W. BAIRD	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN	P01318969
	Firm's name (or yours if self-employed) and address	BROWN ARMSTRONG ACCOUNTANCY CORP 4200 TRUXTUN AVE STE 300 BAKERSFIELD CA			Firm's FEIN	95-3109182	
					ZIP code	93309	

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign	Paid preparer's signature		Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN	
	Firm's name (or yours if self-employed) and address				Firm's FEIN	
					ZIP code	

For Privacy Notice, get FTB 1131 ENG/SP.

FTB 8453-EO 2020

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
CSBG (01/01/22 - 12/31/22) 218	286,748.00	82,488.37	41.67%	28.77%	Large % of administrative costs to operate social services programs
CSBG DISCRETIONARY (06/01/21 - 5/31/22) 217	28,250.00	15,239.57	100.00%	53.95%	Discretionary grant to serve community needs or increase agency capacity
CSBG CARES 2020 (03/27/20 - 5/31/22) 219	390,168.00	372,369.28	100.00%	95.44%	CARES funding to prevent, prepare for and respond to COVID-19 for CSBG clients
CSBG CARES DISCRETIONARY (03/27/20 - 5/31/22) 251	40,370.00	40,324.77	100.00%	99.89%	CARES funding to prevent, prepare for and respond to COVID-19 for CSBG clients
HEAD START & CHILD DEVELOPMENT					
HEAD START REGIONAL (06/1/21 - 05/31/22) 311/380	4,110,180.00	3,968,447.44	100.00%	96.55%	Provide HS services to 246 low income preschool children and families
HEAD START T/TA (06/01/21 - 05/31/22) 310	46,025.00	46,025.00	100.00%	100.00%	Provide training for staff and parents
EARLY HEAD START REGIONAL (06/01/21 - 05/31/22) 312	601,117.00	577,694.41	100.00%	96.10%	Provide early HS services to 42 low income infant, toddlers and pregnant women
EARLY HEAD START T/TA (06/01/21 - 05/31/22) 309	13,373.00	13,373.00	100.00%	100.00%	Provide training for staff and parents
MADERA STATE CSPP/RHS LAYERED (07/01/21 - 06/30/22) 319	761,724.00	792,621.00	91.67%	104.06%	Provide child care services to HS preschool children and families
REGIONAL HEAD START - ARP AMERICAN RESCUE PLAN 04/01/2021 - 03/31/2023 814	344,592.00	270,870.21	58.33%	78.61%	Provide funds to continue supporting children, families, staff and respond to Covid19 in the Head Start program
MADERA STATE CSPP/RHS - AB82 07/01/2021 - 06/30/2022 815	54,023.00	11,675.51	91.67%	21.61%	Provide funds to continue supporting children, families, staff and respond to Covid19 in the Head Start program
REGIONAL HEAD START - CRRSA COVID RESPONSE & RELIEF SUPPLEMENT APPROPRIATIONS 04/01/2021 - 03/31/2023 818	86,679.00	69,029.52	58.33%	79.64%	Provide funds to continue supporting children, families, staff and respond to Covid19 in the Head Start program
CHILD & ADULT CARE FOOD PROGRAM (10/01/21 - 09/30/22) 390	513,902.00	190,375.42	66.67%	37.05%	Provide funds to serve hot meals to HS & state childcare children
MADERA MIGRANT HEAD START (03/01/22 - 02/28/23) 321/362	5,468,877.00	1,077,760.55	25.00%	19.71%	Provide HS services to 458 migrant and 121 seasonal children and families
MADERA MIGRANT HS TRAINING (03/01/22 - 02/28/23) 320	31,845.00	13,773.04	25.00%	43.25%	Provide training for staff and parents
MADERA MIGRANT CHILD CARE - PART YEAR (07/01/21 - 06/30/22) 322/324	919,191.00	835,371.47	91.67%	90.88%	Provide child care services to migrant eligible infant and toddlers
MADERA MIGRANT CHILD CARE - SPECIALIZED SRV (07/01/21 - 06/30/22) 325	137,096.00	120,903.18	91.67%	88.19%	Provide start up funding for supplies and staff to provide services to migrant eligible infant and toddlers

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
MADERA MIGRANT CHILD CARE - PART YEAR COVID FUND - CMIG AB82 07/01/2021 - 06/30/22 822	28,114.00	28,114.00	91.67%	100.00%	Provide funds to prevent, prepare for and respond to COVID-19 in the Madera Migrant Child Care program
MADERA MIGRANT CHILD CARE - PART YEAR COVID FUND - CMIG ONE-TIME ROUND 2 07/01/2021 - 06/30/22 825	16,885.00	3,275.48	91.67%	19.40%	Provide funds to prevent, prepare for and respond to COVID-19 in the Madera Migrant Child Care program
MADERA MIGRANT HEAD START - CRRSA COVID RESPONSE & RELIEF SUPPLEMENT APPROPRIATIONS 04/01/2021 - 03/31/2023 826	163,857.00	25,964.62	58.33%	15.85%	Provide funds to continue supporting children, families, staff and respond to Covid19 in the Head Start program
MIGRANT HEAD START - ARP AMERICAN RESCUE PLAN 04/01/2021 - 03/31/2023 827	535,575.00	219,554.61	58.33%	40.99%	Provide funds to continue supporting children, families, staff and respond to Covid19 in the Head Start program
FRESNO MIGRANT HEAD START (09/01/21 - 08/31/22) 331	4,652,471.00	2,739,372.39	75.00%	58.88%	Provide HS services to to 519 migrant children and families
FRESNO MIGRANT HS -TRAINING (09/01/21 - 08/31/22) 330	82,690.00	25,035.01	75.00%	30.28%	Provide training for staff and parents
FRESNO MIGRANT HEAD START CARES (09/01/21 - 08/31/22) 831	60,391.06	45,465.02	75.00%	75.28%	Provide funds to prevent, prepare for and respond to COVID-19 in the Fresno Migrant Head Start
DSS STRENGTHENING FAMILIES (07/01/2021 - 06/30/2022) 371	189,600.00	164,607.49	91.67%	86.82%	Provides training and education to parents to strengthen family relationships

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
RESOURCE & REFERRAL:					
CCDF-HEALTH & SAFETY (07/01/21 - 06/30/22) 411	4,702.00	4,105.52	91.67%	87.31%	Training and supplies for child care providers
R & R GENERAL (07/01/21 - 06/30/22) 401	260,540.00	209,908.20	91.67%	80.57%	Provide resources and referrals regarding child care and related issues
EMERGENCY CHILD CARE BRIDGE PROGRAM (07/01/21 - 06/30/23) 407	394,276.00	119,940.30	45.83%	30.42%	Provide subsidized child care for eligible foster children
CHILD CARE INITIATIVE PROJECT (07/01/21 - 06/30/22) 424	33,509.00	26,772.80	91.67%	79.90%	Recruiting and training child care providers for infants and toddlers
ALTERNATIVE PAYMENT (07/01/20 - 06/30/22) 426/432	6,544,277.00	4,083,884.72	95.83%	62.40%	Provide subsidized child care for eligible families
**Note: Activity for this grant halted on 8/31/2021 but will remain here until the grant period ends.					
ALTERNATIVE PAYMENT (07/01/21 - 06/30/22) 426/432/429	5,377,399.00	2,532,510.38	91.67%	47.10%	Provide subsidized child care for eligible families
**Note: Because of overlapping contract periods Fund 429 was predominantly used to account for this grant temporarily.					
ALTERNATIVE PAYMENT STAGE 2 (07/01/21 - 06/30/22) 427	2,141,104.00	1,323,649.67	91.67%	61.82%	Provide subsidized child care for eligible families
ALTERNATIVE PAYMENT STAGE 3 (07/01/21 - 06/30/22) 428	1,359,008.00	1,003,565.50	91.67%	73.85%	Provide subsidized child care for eligible families
CRRSA ONE TIME ONLY PROVIDER STIPENDS (04/01/20 - 06/30/22) 440	433,833.75	431,628.75	96.30%	99.49%	Provide supplies and one-time stipend to child care providers through the Coronavirus Response and Relief Supplemental Appropriations Act
ALTERNATIVE PAYMENT AB131 ONE TIME ONLY PROVIDER STIPENDS (09/01/21 - 06/30/22) 434	453,600.00	451,080.00	90.00%	99.44%	Provide one-time stipend to Child Care Providers in accordance with AB131
ECC-BRIDGE PROGRAM-CRRSA STIPEND 1 & 2 (08/01/21 - 06/30/22) 430	22,443.75	22,443.75	90.91%	100.00%	One-time funds to provide financial relief to assist child care providers with ongoing hardships
R&R CAFE STIPEND - ONE TIME (12/01/21 - 06/30/22) 418	4,800.00	4,800.00	85.71%	100.00%	To provide incentives to parents and providers during workshops
CHILD CARE INITIATIVE PROJECT-EXPANSION CCDBG - US DEPT. OF HHS 2YR (08/01/21 - 07/31/23) 410	304,849.00	2,092.29	41.67%	0.69%	One-time ARPA funding to R&Rs to support family child care providers affected by COVID-19

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
VICTIM SERVICES:					
RSVP/CALOES (10/01/21 - 09/30/22) 500	332,174.00	197,279.22	66.67%	59.39%	Assist victims of sexual assault
VICTIM WITNESS/CALOES (10/01/21 - 09/30/22) 501	354,836.00	224,280.37	66.67%	63.21%	Assist victims of crime
SHELTER-BASED DOMESTIC VIOLENCE (10/01/20 - 09/30/22) 533	1,140,174.00	917,655.32	83.33%	80.48%	Provide shelter services for domestic violence victims
DOM. VIO. MARRIAGE LICENSE (07/01/21 - 06/30/22) 502	16,000.00	2,067.07	91.67%	12.92%	Provides shelter and services to domestic violence victims
DOMESTIC VIOLENCE RESTITUTION (07/01/21 - 06/30/22) 504	20,000.00	180.54	91.67%	0.90%	Provides shelter and services to domestic violence victims
VSC DOMESTIC VIOLENCE GENERAL FUND (07/01/21 - 06/30/22) DONATIONS ONLY 507/525	2,000.00	1,181.27	91.67%	59.06%	Assist victims of domestic violence
VICTIM SERVICES CENTER FUND (07/01/21 - 06/30/22) DONATIONS ONLY 510	2,500.00	1,955.21	91.67%	78.21%	Assist with program operations for all Victim Services clients
UNSERVED/UNDERSERVED VICTIM ADVOCACY & OUTREACH (01/01/22 - 12/31/22) 508	163,177.00	58,396.29	41.67%	35.79%	Assist unserved/underserved, primarily Hispanic, victims of crime
TRANSITIONAL HOUSING (01/01/22 - 12/31/22) 531	126,807.00	57,341.32	41.67%	45.22%	Provide long-term shelter services for domestic violence and human trafficking victims
YOUTH AND SPECIALIZED SERVICES:					
MENTAL HEALTH FULL SERVICES (07/01/21 - 6/30/22) 607	5,000.00	3,013.50	91.67%	60.27%	Provides direct benefits for clients
CHILD ADVOCACY CENTER (07/01/21 - 6/30/22) 516	1,000.00	478.43	91.67%	47.84%	Provide child sexual assault interviews

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - EMERGENCY & OTHER SERVICES:					
E.C.I.P./LIHEAP (10/01/19 - 10/31/21) 203	Inactive	Inactive	#VALUE!	#VALUE!	Assistance for low income clients for energy bills and weatherization services
E.C.I.P./LIHEAP (11/01/20 - 12/31/22) 207	684,900.00	580,078.73	73.08%	84.70%	Assistance for low income clients for energy bills and weatherization services
E.C.I.P./LIHEAP (11/01/21 - 06/30/23) 208	523,726.00	2,559.01	35.00%	0.49%	Assistance for low income clients for energy bills and weatherization services
LIHEAP CARES (07/01/20 - 09/30/21) 234	Inactive	Inactive	#VALUE!	#VALUE!	Assistance for low income clients for energy bills impacted by COVID-19
LIHEAP ARPA (08/01/21 - 03/31/23) 270	728,183.00	281,104.93	50.00%	38.60%	Assistance for low income clients for energy bills impacted by COVID-19
FEMA (01/01/20 - 10/31/21) 205	Inactive	Inactive	#VALUE!	#VALUE!	Administration of the FEMA program
FEMA (01/01/20 - 10/31/21) 235	Inactive	Inactive	#VALUE!	#VALUE!	Administration of the FEMA program
FEMA CARES (01/27/20 - 10/31/21) 210	Inactive	Inactive	#VALUE!	#VALUE!	Housing assistance for clients impacted by COVID-19 and administration of FEMA CARES
SENIOR MEAL - MADERA COUNTY (07/01/21 - 06/30/22) 237	43,734.00	21,837.05	91.67%	49.93%	Provides lunch meal program for seniors in eastern Madera County & Ranchos
MADERA CO. SENIOR MEAL HOME DELIVERY (07/01/21 - 06/30/22) 247	220,734.00	176,396.53	91.67%	79.91%	Provides meals for seniors in eastern Madera County & Ranchos due to COVID-19 restrictions
MADERA MENTAL HEALTH PROPERTY MGMT (07/01/21 - 06/30/22) 216	50,000.00	14,482.51	91.67%	28.97%	Provides property management services for the County of Madera Behavioral Health

**COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
FISCAL EXPENDITURE REPORT
FOR THE PERIOD ENDED MAY 31, 2022**

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - HOMELESS PROGRAMS:					
SHUNAMMITE PLACE (11/01/21 - 10/31/22) 224	581,016.00	252,829.98	58.33%	43.52%	Provides permanent supportive housing for homeless people with disabilities
CITY OF MADERA - CDBG (07/01/21 - 06/30/22) 231	20,000.00	18,249.86	91.67%	91.25%	Provides funding for Fresno-Madera Continuum of Care and homeless support
CITY OF MADERA - CDBG CARES (07/01/20 - 08/31/21) 244	Inactive	Inactive	#VALUE!	#VALUE!	Provides utility and rental assistance for clients within the City of Madera jurisdiction
CITY OF MADERA - CDBG CARES ROUND 2 (07/01/21 - 06/30/22) 255	122,322.19	21,741.69	91.67%	17.77%	Provides utility and rental assistance for clients within the City of Madera jurisdiction
CITY OF MADERA - CDBG CAPITAL PROJECT FUND (07/01/21 - 12/31/22) 271	345,027.19	1,543.10	61.11%	0.45%	Provides housing, supportive services, and landlord engagement activities
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP) BEHAVIORAL HEALTH (06/01/20 - 6/30/25) 246	411,434.00	345,478.95	39.34%	83.97%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP-2) BEHAVIORAL HEALTH (12/01/2021 - 06/30/2023) 276	188,084.00	10,369.00	31.58%	5.51%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
KAISER HOUSING FOR HEALTH (11/01/2021 - 06/30/2022) 248	25,000.00	22,047.52	87.50%	88.19%	Provides rental assistance to clients
KAISER RAPID REHOUSING (12/01/2020 - 12/31/2021) 249	Inactive	Inactive	#VALUE!	#VALUE!	Provides rental assistance to clients
WESTCARE RAPID REHOUSING (03/01/2021 - 2/28/2022) 253	65,000.00	35,489.50	125.00%	54.60%	Provides rent, security deposits, utility deposits, and moving and storage costs for homeless clients
BEHAVIORAL HEALTH PATH PROGRAM (07/01/2021 - 06/30/2022) 259	39,136.00	41,473.19	91.67%	105.97%	Provides rental assistance to clients
EMERGENCY RENTAL ASSISTANCE PROGRAM MADERA COUNTY (05/17/21 - 12/31/21) 261	61,745.00	6,727.53	171.43%	10.90%	Provides promotion, advertising, and outreach activities to deliver information and technical assistance for rental program related to Covid 19
EMERGENCY SOLUTIONS GRANT (01/01/21 - 06/30/22) 268	110,000.00	76,200.98	94.44%	69.27%	Provides funds for hotel emergency housing, rapid rehousing, homeless prevention, HMIS and outreach
ESG CARES (11/17/21 - 07/31/22) 275	682,324.00	227,385.08	81.25%	33.33%	Provides emergency shelter and rapid rehousing to homeless
HOMELESS OUTREACH CCP AB109 (07/01/21 - 06/30/22) 272	231,000.00	226,283.13	91.67%	97.96%	Provides outreach workers to offer case management and resources to homeless or at-risk

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.
Consolidated Balance Sheet by Object April 30, 2022

	<u>This Year</u>
Assets	
1113- CASH IN WESTAMERICA PAYROLL CK	4,796.21
1115- CASH IN WESTAMERICA MENTAL HEALTH	1,957.01
1116- CASH IN WESTAMERICA HEAD START MONEY MARKET	2,515.07
1117- CASH IN WESTAMERICA ACCTS PAYABLE CHECKING	106,301.52
1122- SAVINGS - WESTAMERICA	1,722,953.98
1130- PETTY CASH	810.00
1310- GRANTS RECEIVABLE	3,642,016.55
1320- ACCOUNTS RECEIVABLE	1,977.21
1322- A/R INTERSTATE ASSOC. - CHURCH OF GOD	195.16
1327- A/R-OTHER	0.00
1328- EMPLOYEE & TRAVEL ADVANCES	146.67
1329- ADVANCE CLEARING	9,823.13
1410- PREPAID EXPENSES	41,569.54
1420- SECURITY DEPOSITS	38,566.04
1421- WORKERS' COMP DEPOSIT	74,733.94
1450- INVENTORY	14,057.27
1512- EQUIPMENT	1,346,884.88
1513- VEHICLES	1,000,268.86
1514- BUILDINGS	4,364,110.45
1515- LAND IMPROVEMENTS	190,835.13
1516- BUILDING IMPROVEMENTS	297,449.87
1519- LAND	59,005.00
1522- ACC DEPR - EQUIPMENT	(986,989.00)
1523- ACC DEPR - VEHICLES	(796,555.67)
1524- ACC DEPR - BUILDINGS	(3,484,836.00)
1525- ACC DEPR - LAND IMPROVE.	(138,958.91)
1526- ACC DEPR - BUILDING IMPROVE.	(79,822.71)
Total Assets	7,433,811.20
Liabilities and Net Assets	
2101- ACCOUNTS PAYABLE	948,769.53
2111- ACCOUNTS PAYABLE - MANUAL	183,406.84
2112- ACCOUNTS PAY-FUNDING SOURCE	26,703.09
2115- A/P OTHERS	772.95
2121- ACCRUED PAYROLL	592,661.39
2122- ACCRUED VACATION	1,064,687.97
2123- ACCRUED PAYROLL - MANUAL	849.40
2211- FICA PAYABLE	0.00
2212- FICA-MED PAYABLE	0.00
2213- FIT PAYABLE	0.00
2215- SIT PAYABLE	0.00
2216- SDI PAYABLE	0.00

2217- SUI PAYABLE	0.00
2218- GARNISHMENTS PAYABLE	0.00
2220- WORKER'S COMP PAYABLE	74,545.55
2231- RETIREMENT PAYABLE-ER CONTRIB	737,079.55
2233- W/H RETIREMENT-ER403B BENEFIT	0.00
2244- KAISER MID20	(1,179.84)
2245- KAISER HIGH15	(2,866.16)
2248- KAISER LOW30	(1,106.18)
2252- SELF INSURANCE - LIFE & ADD	1,460.42
2253- VISION INSURANCE PAYABLE	(0.49)
2254- SELF INSURANCE - DENTAL	71,463.12
2255- UNION DUES & FEE PAYMENTS	0.00
2258- TELEMEDICINE	(20.00)
2260- MADERA RHS PARENT GROUPS	552.34
2262- FRESNO MHS PARENT GROUPS	2,130.16
2264- MCAC EMP FUND-UNIFICATION	64.15
2265- FRESNO - EDS - FUNDS	1,854.17
2266- R & R PROGRAM	6,290.02
2410- DEFERRED GRANT REVENUE	1,428,497.17
2415- RESERVE ACCOUNT	39,974.00
2420- OTHER DEFERRED REVENUE	10,206.17
Total Liabilities	<u>5,186,795.32</u>
3000- NET ASSETS W/O DONOR RESTRICTIONS	399,998.20
3050- NET ASSETS - BOARD DESIGNATED	560,000.00
3100- NET ASSETS - RESTRICTED FIXED ASSETS	1,679,570.49
Change in Net Assets	<u>(392,552.81)</u>
Total Net Assets	<u>2,247,015.88</u>
Total Liabilities and Net Assets	<u>7,433,811.20</u>

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COMMUNITY ACTION PARTERSHIP OF MADERA COUNTY, INC. Consolidated Revenue and Expense April 30, 2022

Year-To-Date

Revenues

4110- GRANT INCOME-FEDERAL	19,574,316.63
4120- GRANT INCOME-STATE	5,117,127.46
4130- GRANT INCOME-AREA	270,348.45
4210- DONATIONS	63,719.87
4220- IN KIND CONTRIBUTIONS	1,630,575.00
4315- CHILD CRE REVENUE-STATE	0.00
4320- INTEREST INCOME	1,431.30
4330- SALE OF ASSETS	3,000.00
4350- RENTAL INCOME	41,090.99
4370- MERCHANDISE SALES	535.25
4390- MISCELLANEOUS INCOME	22,166.88
4900- INDIRECT COST REIMBURSEMENT	1,940,417.81
Total Revenues	28,664,729.64

Expenses

5010- SALARIES & WAGES	10,550,598.92
5012- DIRECTOR'S SALARY	144,540.29
5020- ACCRUED VACATION PAY	620,675.76
5112- HEALTH INSURANCE	1,021,652.63
5114- WORKER'S COMPENSATION	255,463.19
5116- PENSION	583,724.46
5122- FICA	851,024.47
5124- SUI	119,502.55
5125- DIRECTOR'S FRINGE	74,240.24
5130- ACCRUED VACATION FRINGE	37,676.25
6110- OFFICE SUPPLIES	91,272.21
6112- DATA PROCESSING SUPPLIES	397,595.56
6121- FOOD	257,544.85
6122- KITCHEN SUPPLIES	50,029.82
6130- PROGRAM SUPPLIES	979,242.37
6132- MEDICAL & DENTAL SUPPLIES	51,848.80
6134- INSTRUCTIONAL SUPPLIES	39,870.65
6140- CUSTODIAL SUPPLIES	84,965.15
6142- LINEN/LAUNDRY	0.00
6143- FURNISHINGS	51,960.46
6150- UNIFORM RENTAL/PURCHASE	750.00
6160- RESALE ITEMS	591.72
6170- POSTAGE & SHIPPING	22,323.26
6180- EQUIPMENT RENTAL	122,318.92
6181- EQUIPMENT MAINTENANCE	53,667.10
6210- CAPITAL EXPENDITURES > 50	378.87
6216- CAPITAL EXPENDITURES > \$1000	28,784.38
6221- EQUIPMENT OVER > \$5000	289,604.92
6310- PRINTING & PUBLICATIONS	16,566.61

6312- ADVERTISING & PROMOTION	6,486.72
6320- TELEPHONE	356,561.69
6410- RENT	980,027.26
6420- UTILITIES/ DISPOSAL	360,435.79
6432- BUILDING REPAIRS/ MAINTENANCE	321,570.33
6433- GROUNDS MAINTENANCE	81,859.32
6436- PEST CONTROL	22,003.25
6437- BURGLAR & FIRE ALARM	23,034.06
6440- PROPERTY INSURANCE	52,968.62
6510- AUDIT	45,000.00
6520- CONSULTANTS	50,141.79
6522- CONSULTANT EXPENSES	5,205.57
6524- CONTRACTS	527,901.48
6530- LEGAL	129,365.94
6540- CUSTODIAL SERVICES	91,098.48
6555- MEDICAL SCREENING/DEAT/STAFF	4,415.00
6610- GAS & OIL	31,798.11
6620- VEHICLE INSURANCE	66,607.56
6630- VEHICLE LICENSE & FEES	430.00
6640- VEHICLE REPAIR & MAINTENANCE	57,306.12
6712- STAFF TRAVEL-LOCAL	15,438.43
6714- STAFF TRAVEL-OUT OF AREA	2,325.35
6722- PER DIEM - STAFF	503.00
6730- VOLUNTEER TRAVEL	142.74
6742- TRAINING - STAFF	115,821.24
6745- TRAINING - PARTICIPANT/CLIENTS	1,898.00
6810- BANK CHARGES	5,088.87
6832- LIABILITY INSURANCE	31,740.81
6834- STUDENT ACTIVITY INSURANCE	5,253.02
6840- PROPERTY TAXES	526.85
6850- FEES & LICENSES	54,648.93
6851- CPR FEES	3,689.75
6852- FINGERPRINT	1,893.00
6875- EMPLOYEE HEALTH & WELFARE COSTS	33,580.56
7111- PARENT MILEAGE	258.83
7112- PARENT INVOLVEMENT	451.48
7114- PC ALLOWANCE	4,895.00
7116- POLICY COUNCIL FOOD ALLOWANCE	856.70
7210- TRANSPORTATION VOUCHERS	672.35
7224- CLIENT RENT	204,202.71
7226- CLIENT LODGING/SHELTER	349,244.44
7230- CLIENT FOOD	434.92
7234- FOOD - INDIVIDUAL	16.36
7240- DIRECT BENEFITS	4,619,220.53
7245- DIRECT BENEFITS - STATE	0.00
7250- FURNACE REPAIRS/REPLACEMENT	20,854.27
8110- IN KIND SALARIES	1,162,335.28
8120- IN KIND RENT	465,060.77
8130- IN KIND - OTHER	3,168.00
9010- INDIRECT COST ALLOCATION	1,940,428.76
Total Expenses	<u>29,057,282.45</u>
Excess Revenue Over (Under) Expenditures	<u>(392,552.81)</u>

**LIHEAP 21B-5019 - Fund 207
November 1, 2020 to April 30, 2022**

	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual April 30, 2022</u>	<u>YTD Budget April 30, 2022</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
207 0 HOME ENERGY ASSIST. PROG.								
<u>Revenues</u>								
4110- GRANT INCOME-FEDERAL	684,900.00	0.00	539,621.08	407,634.00	(0.79)	0.00	539,621.08	145,278.92
Total Revenues	684,900.00	0.00	539,621.08	407,634.00	(0.79)	0.00	539,621.08	145,278.92
<u>Expenses</u>								
5010- SALARIES & WAGES	155,029.00	0.00	147,438.26	106,857.00	0.95	0.00	147,438.26	7,590.74
5020- ACCRUED VACATION PAY	0.00	0.00	8,800.96	0.00	0.00	0.00	8,800.96	(8,800.96)
5112- HEALTH INSURANCE	19,459.00	0.00	18,434.54	13,156.00	0.95	0.00	18,434.54	1,024.46
5114- WORKER'S COMPENSATION	818.00	0.00	663.23	581.00	0.81	0.00	663.23	154.77
5116- PENSION	8,479.00	0.00	7,826.67	5,592.00	0.92	0.00	7,826.67	652.33
5122- FICA	12,320.00	0.00	11,774.41	8,353.00	0.96	0.00	11,774.41	545.59
5124- SUI	1,717.00	0.00	769.57	1,108.00	0.45	0.00	769.57	947.43
5130- ACCRUED VACATION FICA	0.00	0.00	134.65	0.00	0.00	0.00	134.65	(134.65)
6110- OFFICE SUPPLIES	4,000.00	0.00	7,106.07	2,500.00	1.78	0.00	7,106.07	(3,106.07)
6112- DATA PROCESSING SUPPLIES	15,300.00	0.00	15,385.62	15,264.00	1.01	250.14	15,635.76	(335.76)
6130- PROGRAM SUPPLIES	150.00	0.00	99.44	10.00	0.66	0.00	99.44	50.56
6142- LINEN/LAUNDRY	5.00	0.00	0.00	5.00	0.00	0.00	0.00	5.00
6170- POSTAGE & SHIPPING	2,800.00	0.00	5,249.46	1,200.00	1.87	0.00	5,249.46	(2,449.46)
6180- EQUIPMENT RENTAL	3,581.00	0.00	6,518.19	1,500.00	1.82	0.00	6,518.19	(2,937.19)
6181- EQUIPMENT MAINTENANCE	3,005.00	0.00	781.02	1,800.00	0.26	0.00	781.02	2,223.98
6310- PRINTING & PUBLICATIONS	10.00	0.00	81.18	25.00	8.12	0.00	81.18	(71.18)
6312- ADVERTISING & PROMOTION	2,096.00	0.00	105.00	2,990.00	0.05	0.00	105.00	1,991.00
6320- TELEPHONE	8,000.00	0.00	4,270.30	8,200.00	0.53	0.00	4,270.30	3,729.70
6410- RENT	16,000.00	0.00	14,437.62	16,900.00	0.90	0.00	14,437.62	1,562.38
6420- UTILITIES/ DISPOSAL	2,000.00	0.00	2,224.46	3,566.00	1.11	0.00	2,224.46	(224.46)
6432- BUILDING REPAIRS/ MAINTENANCE	20.00	0.00	678.61	20.00	33.93	0.00	678.61	(658.61)
6440- PROPERTY INSURANCE	840.00	0.00	990.16	575.00	1.18	0.00	990.16	(150.16)
6520- CONSULTANTS	800.00	0.00	0.00	0.00	0.00	0.00	0.00	800.00
6524- CONTRACTS	377,007.00	0.00	229,637.55	180,864.00	0.61	0.00	229,637.55	147,369.45
6530- LEGAL	100.00	0.00	0.00	88.00	0.00	0.00	0.00	100.00
6555- MEDICAL SCREENING/DEAT/STAFF	260.00	0.00	255.50	0.00	0.98	0.00	255.50	4.50
6610- GAS & OIL	30.00	0.00	80.84	30.00	2.69	0.00	80.84	(50.84)
6640- VEHICLE REPAIR & MAINTENANCE	10.00	0.00	0.00	10.00	0.00	0.00	0.00	10.00
6712- STAFF TRAVEL-LOCAL	125.00	0.00	17.92	125.00	0.14	0.00	17.92	107.08

**LIHEAP 21B-5019 - Fund 207
November 1, 2020 to April 30, 2022**

	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual April 30, 2022</u>	<u>YTD Budget April 30, 2022</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
207 0 HOME ENERGY ASSIST. PROG.								
6742- TRAINING - STAFF	428.00	0.00	0.00	428.00	0.00	0.00	0.00	428.00
6810- BANK CHARGES	25.00	0.00	25.00	0.00	1.00	0.00	25.00	0.00
6820- INTEREST EXPENSE	1.00	0.00	0.00	1.00	0.00	0.00	0.00	1.00
6840- PROPERTY TAXES	30.00	0.00	76.23	10.00	2.54	0.00	76.23	(46.23)
6850- FEES & LICENSES	540.00	0.00	1,379.53	150.00	2.55	0.00	1,379.53	(839.53)
6852- FINGERPRINT	0.00	0.00	17.75	0.00	0.00	0.00	17.75	(17.75)
6875- EMPLOYEE HEALTH & WELFARE	150.00	0.00	137.00	60.00	0.91	(0.22)	136.78	13.22
7240- DIRECT BENEFITS	8,000.00	0.00	8,386.00	6,000.00	1.05	0.00	8,386.00	(386.00)
7250- FURNACE REPAIRS/REPLACEMENT	16,000.00	0.00	20,289.25	10,000.00	1.27	0.00	20,289.25	(4,289.25)
9010- INDIRECT COST ALLOCATION	25,765.00	0.00	25,549.09	19,666.00	0.99	0.00	25,549.09	215.91
Total Expenses	684,900.00	0.00	539,621.08	407,634.00	0.79	249.92	539,871.00	145,029.00
Excess Revenue Over (Under) Expenditures	0.00	0.00	0.00	0.00	0.00	(249.92)	(249.92)	249.92
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	0.00	0.00	0.00	0.00	(249.92)	(249.92)	249.92

**LIHEAP ARPA 21V-5568 - Fund 270
August 1, 2021 to April 30, 2022**

270 0 AMERICAN RESCUE PLAN ACT (ARPA)	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
6712- STAFF TRAVEL-LOCAL	250.00	7.02	7.02	0.00	0.03	0.00	7.02	242.98
6742- TRAINING - STAFF	3,170.00	0.00	0.00	0.00	0.00	0.00	0.00	3,170.00
6820- INTEREST EXPENSE	1.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
6840- PROPERTY TAXES	15.00	0.00	0.00	0.00	0.00	0.00	0.00	15.00
6850- FEES & LICENSES	1,200.00	0.00	177.69	0.00	0.15	0.00	177.69	1,022.31
6852- FINGERPRINT	260.00	0.00	0.75	0.00	0.00	0.00	0.75	259.25
6875- EMPLOYEE HEALTH & WELFARE	200.00	0.00	30.82	0.00	0.15	6.43	37.25	162.75
7240- DIRECT BENEFITS	100,000.00	3,661.00	27,905.00	0.00	0.28	0.00	27,905.00	72,095.00
7250- FURNACE REPAIRS/REPLACEMENT	189,000.00	0.00	0.00	0.00	0.00	0.00	0.00	189,000.00
9010- INDIRECT COST ALLOCATION	34,798.00	6,539.23	18,991.29	0.00	0.55	0.00	18,991.29	15,806.71
Total Expenses	728,183.00	82,059.81	255,591.73	0.00	0.35	1,710.99	257,302.72	470,880.28
Excess Revenue Over (Under) Expenditures	0.00	0.00	0.00	0.00	0.00	(1,710.99)	(1,710.99)	1,710.99
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	0.00	0.00	0.00	0.00	(1,710.99)	(1,710.99)	1,710.99

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 11/01/2021 to 4/30/2022

224 0 HUD SHUNAMMITE PLACE	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	581,016.00	44,106.86	219,808.09	290,508.00	(0.38)	0.00	219,808.09	361,207.91
4220- IN KIND CONTRIBUTIONS	0.00	892.50	5,564.75	0.00	0.00	0.00	5,564.75	(5,564.75)
4350- RENTAL INCOME	0.00	3,752.84	20,363.39	0.00	0.00	0.00	20,363.39	(20,363.39)
Total Revenues	581,016.00	48,752.20	245,736.23	290,508.00	(0.42)	0.00	245,736.23	335,279.77
Expenses								
5010- SALARIES & WAGES	173,445.00	17,094.57	68,004.85	86,730.00	0.39	0.00	68,004.85	105,440.15
5012- DIRECTOR'S SALARY	0.00	702.74	2,810.97	0.00	0.00	0.00	2,810.97	(2,810.97)
5020- ACCRUED VACATION PAY	0.00	794.36	3,216.38	0.00	0.00	0.00	3,216.38	(3,216.38)
5112- HEALTH INSURANCE	24,035.00	1,791.42	10,646.48	12,012.00	0.44	0.00	10,646.48	13,388.52
5114- WORKER'S COMPENSATION	6,383.00	821.99	2,935.88	3,192.00	0.46	0.00	2,935.88	3,447.12
5116- PENSION	6,938.00	623.06	2,620.88	3,468.00	0.38	0.00	2,620.88	4,317.12
5122- FICA	13,268.00	1,331.03	5,387.78	6,636.00	0.41	0.00	5,387.78	7,880.22
5124- SUI	1,564.00	0.00	1,196.93	780.00	0.77	0.00	1,196.93	367.07
5125- DIRECTOR'S FRINGE	0.00	337.18	1,354.71	0.00	0.00	0.00	1,354.71	(1,354.71)
5130- ACCRUED VACATION FICA	0.00	37.43	56.91	0.00	0.00	0.00	56.91	(56.91)
6110- OFFICE SUPPLIES	2,338.00	25.95	221.16	1,170.00	0.09	0.00	221.16	2,116.84
6112- DATA PROCESSING SUPPLIES	7,215.00	11.04	1,781.88	3,606.00	0.25	724.54	2,506.42	4,708.58
6122- KITCHEN SUPPLIES	0.00	973.06	1,117.25	0.00	0.00	0.00	1,117.25	(1,117.25)
6130- PROGRAM SUPPLIES	8,091.00	1,159.18	3,481.49	4,044.00	0.43	0.00	3,481.49	4,609.51
6132- MEDICAL & DENTAL SUPPLIES	200.00	224.00	224.00	102.00	1.12	0.00	224.00	(24.00)
6140- CUSTODIAL SUPPLIES	2,500.00	0.00	741.87	1,248.00	0.30	0.00	741.87	1,758.13
6143- FURNISHINGS	14,500.00	892.18	4,411.20	7,248.00	0.30	0.00	4,411.20	10,088.80
6170- POSTAGE & SHIPPING	115.00	0.00	0.00	54.00	0.00	0.00	0.00	115.00
6180- EQUIPMENT RENTAL	870.00	59.33	362.60	438.00	0.42	0.00	362.60	507.40
6181- EQUIPMENT MAINTENANCE	910.00	348.63	1,190.48	456.00	1.31	0.00	1,190.48	(280.48)
6310- PRINTING & PUBLICATIONS	150.00	0.00	0.00	78.00	0.00	0.00	0.00	150.00
6320- TELEPHONE	4,975.00	555.20	2,712.05	2,490.00	0.55	0.00	2,712.05	2,262.95
6410- RENT	219,840.00	15,513.00	90,155.00	109,920.00	0.41	0.00	90,155.00	129,685.00
6420- UTILITIES/ DISPOSAL	30,495.00	775.11	7,191.58	15,246.00	0.24	0.00	7,191.58	23,303.42
6432- BUILDING REPAIRS/ MAINTENANCE	6,540.00	616.00	3,238.20	3,270.00	0.50	0.00	3,238.20	3,301.80
6433- GROUNDS MAINTENANCE	2,420.00	160.00	960.00	1,212.00	0.40	0.00	960.00	1,460.00
6440- PROPERTY INSURANCE	1,200.00	200.25	1,076.50	600.00	0.90	0.00	1,076.50	123.50
6530- LEGAL	6,945.00	0.00	3,714.15	3,474.00	0.53	0.00	3,714.15	3,230.85
6540- CUSTODIAL SERVICES	8,400.00	0.00	2,920.00	4,200.00	0.35	0.00	2,920.00	5,480.00
6562- MEDICAL EXAM	500.00	0.00	0.00	252.00	0.00	0.00	0.00	500.00
6564- MEDICAL FOLLOW-UP	550.00	0.00	0.00	276.00	0.00	0.00	0.00	550.00
6566- DENTAL EXAM	650.00	0.00	0.00	324.00	0.00	0.00	0.00	650.00
6568- DENTAL FOLLOW-UP	550.00	0.00	0.00	276.00	0.00	0.00	0.00	550.00
6610- GAS & OIL	1,755.00	112.23	481.36	876.00	0.27	0.00	481.36	1,273.64
6620- VEHICLE INSURANCE	1,935.00	0.00	1,594.76	972.00	0.82	0.00	1,594.76	340.24
6630- VEHICLE LICENSE & FEES	150.00	0.00	0.00	78.00	0.00	0.00	0.00	150.00
6640- VEHICLE REPAIR & MAINTENANCE	720.00	0.00	84.00	360.00	0.12	0.00	84.00	636.00
6712- STAFF TRAVEL-LOCAL	450.00	33.93	241.62	228.00	0.54	0.00	241.62	208.38

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 11/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
224 0 HUD SHUNAMMITE PLACE								
6742- TRAINING - STAFF	1,500.00	0.00	0.00	750.00	0.00	0.00	0.00	1,500.00
6745- TRAINING - PARTICIPANT/CLIENTS	47.00	0.00	0.00	24.00	0.00	0.00	0.00	47.00
6832- LIABILITY INSURANCE	18.00	1.35	8.10	12.00	0.45	0.00	8.10	9.90
6850- FEES & LICENSES	600.00	0.00	101.52	300.00	0.17	0.00	101.52	498.48
6875- EMPLOYEE HEALTH & WELFARE	69.00	0.00	50.22	36.00	0.73	6.58	56.80	12.20
7210- TRANSPORTATION VOUCHERS	200.00	0.00	74.00	102.00	0.37	0.00	74.00	126.00
7224- CLIENT RENT	0.00	0.00	1,968.00	0.00	0.00	0.00	1,968.00	(1,968.00)
7230- CLIENT FOOD	350.00	25.00	73.70	174.00	0.21	0.00	73.70	276.30
8110- IN KIND SALARIES	0.00	892.50	4,308.75	0.00	0.00	0.00	4,308.75	(4,308.75)
8130- IN KIND - OTHER	0.00	0.00	1,256.00	0.00	0.00	0.00	1,256.00	(1,256.00)
9010- INDIRECT COST ALLOCATION	27,635.00	2,640.48	11,763.02	13,818.00	0.43	0.00	11,763.02	15,871.98
Total Expenses	<u>581,016.00</u>	<u>48,752.20</u>	<u>245,736.23</u>	<u>290,532.00</u>	<u>0.42</u>	<u>731.12</u>	<u>246,467.35</u>	<u>334,548.65</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(24.00)</u>	<u>0.00</u>	<u>(731.12)</u>	<u>(731.12)</u>	<u>731.12</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(24.00)</u>	<u>0.00</u>	<u>(731.12)</u>	<u>(731.12)</u>	<u>731.12</u>

**Victims Services-Domestic Violence Program
October 1, 2020 to April 30, 2022**

	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual April 30, 2022</u>	<u>YTD Budget April 30, 2022</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
533 0 SHELTER BASED DV SERVICES								
<u>Revenues</u>								
4110- GRANT INCOME-FEDERAL	647,857.00	36,315.45	569,601.30	0.00	(0.88)	0.00	569,601.30	78,255.70
4120- GRANT INCOME-STATE	492,317.00	16,000.00	315,823.00	0.00	(0.64)	0.00	315,823.00	176,494.00
4220- IN KIND CONTRIBUTIONS	0.00	0.00	35,856.00	0.00	0.00	0.00	35,856.00	(35,856.00)
Total Revenues	1,140,174.00	52,315.45	921,280.30	0.00	(0.81)	0.00	921,280.30	218,893.70
<u>Expenses</u>								
5010- SALARIES & WAGES	707,164.00	32,888.15	516,702.91	0.00	0.73	0.00	516,702.91	190,461.09
5020- ACCRUED VACATION PAY	0.00	1,828.23	24,340.62	0.00	0.00	0.00	24,340.62	(24,340.62)
5112- HEALTH INSURANCE	60,788.00	1,503.18	38,606.15	0.00	0.64	0.00	38,606.15	22,181.85
5114- WORKER'S COMPENSATION	14,585.00	676.60	12,100.52	0.00	0.83	0.00	12,100.52	2,484.48
5116- PENSION	30,900.00	1,891.45	26,910.95	0.00	0.87	0.00	26,910.95	3,989.05
5122- FICA	54,487.00	2,611.06	41,494.28	0.00	0.76	0.00	41,494.28	12,992.72
5124- SUI	7,824.00	428.38	7,585.72	0.00	0.97	0.00	7,585.72	238.28
5130- ACCRUED VACATION FICA	0.00	73.10	97.21	0.00	0.00	0.00	97.21	(97.21)
6110- OFFICE SUPPLIES	3,120.00	0.00	2,475.54	0.00	0.79	40.15	2,515.69	604.31
6112- DATA PROCESSING SUPPLIES	1,980.00	290.22	9,612.09	0.00	4.85	193.35	9,805.44	(7,825.44)
6121- FOOD	0.00	0.00	296.02	0.00	0.00	0.00	296.02	(296.02)
6122- KITCHEN SUPPLIES	0.00	0.00	0.00	0.00	0.00	150.00	150.00	(150.00)
6130- PROGRAM SUPPLIES	10,437.00	210.19	7,070.43	0.00	0.68	20.00	7,090.43	3,346.57
6132- MEDICAL & DENTAL SUPPLIES	0.00	0.00	148.18	0.00	0.00	0.00	148.18	(148.18)
6140- CUSTODIAL SUPPLIES	720.00	0.00	530.84	0.00	0.74	0.00	530.84	189.16
6143- FURNISHINGS	0.00	0.00	59.26	0.00	0.00	0.00	59.26	(59.26)
6170- POSTAGE & SHIPPING	540.00	0.00	186.42	0.00	0.35	0.00	186.42	353.58
6180- EQUIPMENT RENTAL	2,400.00	191.14	2,570.55	0.00	1.07	0.00	2,570.55	(170.55)
6181- EQUIPMENT MAINTENANCE	720.00	7.29	187.04	0.00	0.26	0.00	187.04	532.96
6310- PRINTING & PUBLICATIONS	319.00	0.00	236.15	0.00	0.74	0.00	236.15	82.85
6312- ADVERTISING & PROMOTION	960.00	15.80	1,231.89	0.00	1.28	0.00	1,231.89	(271.89)
6320- TELEPHONE	18,840.00	1,103.52	19,396.64	0.00	1.03	0.00	19,396.64	(556.64)
6410- RENT	28,310.00	1,166.35	21,886.21	0.00	0.77	0.00	21,886.21	6,423.79
6420- UTILITIES/ DISPOSAL	25,080.00	540.60	24,040.42	0.00	0.96	0.00	24,040.42	1,039.58
6432- BUILDING REPAIRS/ MAINTENANCE	4,800.00	215.39	4,227.66	0.00	0.88	0.00	4,227.66	572.34
6433- GROUNDS MAINTENANCE	8,280.00	350.00	8,425.00	0.00	1.02	0.00	8,425.00	(145.00)
6436- PEST CONTROL	3,000.00	145.00	2,377.00	0.00	0.79	0.00	2,377.00	623.00
6437- BURGLAR & FIRE ALARM	3,960.00	232.77	3,071.65	0.00	0.78	0.00	3,071.65	888.35

**Victims Services-Domestic Violence Program
October 1, 2020 to April 30, 2022**

	<u>Grant Budget</u>	<u>Current Month Actual</u>	<u>YTD Actual April 30, 2022</u>	<u>YTD Budget April 30, 2022</u>	<u>% Spent</u>	<u>YTD Encumbrance</u>	<u>Actual Plus Encumbrance</u>	<u>Budget Balance</u>
533 0 SHELTER BASED DV SERVICES								
6440- PROPERTY INSURANCE	5,280.00	231.54	4,480.14	0.00	0.85	0.00	4,480.14	799.86
6520- CONSULTANTS	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00
6530- LEGAL	0.00	0.00	700.00	0.00	0.00	0.00	700.00	(700.00)
6540- CUSTODIAL SERVICES	5,400.00	261.14	6,011.82	0.00	1.11	0.00	6,011.82	(611.82)
6555- MEDICAL SCREENING/DEAT/STAFF	0.00	0.00	120.00	0.00	0.00	0.00	120.00	(120.00)
6610- GAS & OIL	2,400.00	410.00	3,922.11	0.00	1.63	0.00	3,922.11	(1,522.11)
6620- VEHICLE INSURANCE	5,160.00	227.01	4,149.74	0.00	0.80	0.00	4,149.74	1,010.26
6640- VEHICLE REPAIR & MAINTENANCE	1,320.00	195.23	2,189.97	0.00	1.66	0.00	2,189.97	(869.97)
6712- STAFF TRAVEL-LOCAL	290.00	0.00	0.00	0.00	0.00	0.00	0.00	290.00
6742- TRAINING - STAFF	0.00	0.00	453.24	0.00	0.00	0.00	453.24	(453.24)
6830- INSURANCE & BONDING	720.00	0.00	0.00	0.00	0.00	0.00	0.00	720.00
6832- LIABILITY INSURANCE	972.00	76.50	1,563.20	0.00	1.61	0.00	1,563.20	(591.20)
6840- PROPERTY TAXES	876.00	0.00	925.62	0.00	1.06	0.00	925.62	(49.62)
6850- FEES & LICENSES	1,920.00	0.00	1,508.77	0.00	0.79	0.00	1,508.77	411.23
6852- FINGERPRINT	0.00	0.00	58.75	0.00	0.00	0.00	58.75	(58.75)
6875- EMPLOYEE HEALTH & WELFARE	0.00	0.00	648.51	0.00	0.00	16.21	664.72	(664.72)
7226- CLIENT LODGING/SHELTER	25,720.00	0.00	8,414.40	0.00	0.33	0.00	8,414.40	17,305.60
7230- CLIENT FOOD	0.00	0.00	469.23	0.00	0.00	0.00	469.23	(469.23)
7240- DIRECT BENEFITS	800.00	0.00	89.68	0.00	0.11	0.00	89.68	710.32
8120- IN KIND RENT	0.00	0.00	34,530.00	0.00	0.00	0.00	34,530.00	(34,530.00)
8130- IN KIND - OTHER	0.00	0.00	1,326.00	0.00	0.00	0.00	1,326.00	(1,326.00)
9010- INDIRECT COST ALLOCATION	95,102.00	4,363.62	73,852.99	0.00	0.78	0.00	73,852.99	21,249.01
Total Expenses	1,140,174.00	52,133.46	921,281.52	0.00	0.81	419.71	921,701.23	218,472.77
Excess Revenue Over (Under) Expenditures	0.00	181.99	(1.22)	0.00	0.00	(419.71)	(420.93)	420.93
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	181.99	(1.22)	0.00	0.00	(419.71)	(420.93)	420.93

**Fiscal Year July 21- June 22
April 30, 2022**

427 ALT. PYMT. PROG. STG 2 - FEDERAL	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD		YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
				Budget April 30, 2022	% Spent			
Revenues								
4110- GRANT INCOME-FEDERAL	560,258.00	32,605.89	147,939.00	0.00	(0.26)	0.00	147,939.00	412,319.00
4120- GRANT INCOME-STATE	1,580,846.00	92,801.38	1,165,741.48	0.00	(0.74)	0.00	1,165,741.48	415,104.52
Total Revenues	2,141,104.00	125,407.27	1,313,680.48	0.00	(0.61)	0.00	1,313,680.48	827,423.52
EXPENSES								
5010- SALARIES & WAGES	130,585.00	8,473.06	83,897.11	0.00	0.64	0.00	83,897.11	46,687.89
5020- ACCRUED VACATION PAY	3,330.00	445.81	4,075.90	0.00	1.22	0.00	4,075.90	(745.90)
Total Salaries	133,915.00	8,918.87	87,973.01	0.00	0.66	0.00	87,973.01	45,941.99
5112- HEALTH INSURANCE	10,046.00	516.77	7,193.55	0.00	0.72	0.00	7,193.55	2,852.45
5114- WORKER'S COMPENSATION	743.00	31.26	359.12	0.00	0.48	0.00	359.12	383.88
5116- PENSION	3,190.00	414.33	4,211.10	0.00	1.32	0.00	4,211.10	(1,021.10)
5122- FICA	8,110.00	650.69	6,742.80	0.00	0.83	0.00	6,742.80	1,367.20
5124- SUI	1,164.00	5.16	814.20	0.00	0.70	0.00	814.20	349.80
5130- ACCRUED VACATION FICA	121.00	29.91	130.08	0.00	1.08	0.00	130.08	(9.08)
Fringe Benefits	23,374.00	1,648.12	19,450.85	0.00	0.83	0.00	19,450.85	3,923.15
6110- OFFICE SUPPLIES	1,850.00	0.00	740.54	0.00	0.40	0.00	740.54	1,109.46
6112- DATA PROCESSING SUPPLIES	2,333.00	180.99	6,141.65	0.00	2.63	0.00	6,141.65	(3,808.65)
6130- PROGRAM SUPPLIES	1,000.00	43.31	342.32	0.00	0.34	0.00	342.32	657.68
6143- FURNISHINGS	3,305.00	0.00	2,580.28	0.00	0.78	0.00	2,580.28	724.72
6170- POSTAGE & SHIPPING	1,250.00	0.00	2,155.94	0.00	1.72	0.00	2,155.94	(905.94)
Supplies	9,738.00	224.30	11,960.73	0.00	1.23	0.00	11,960.73	(2,222.73)
6180- EQUIPMENT RENTAL	1,375.00	134.15	1,908.14	0.00	1.39	0.00	1,908.14	(533.14)
6181- EQUIPMENT MAINTENANCE	825.00	59.31	427.75	0.00	0.52	0.00	427.75	397.25
6310- PRINTING & PUBLICATIONS	480.00	0.00	46.28	0.00	0.10	0.00	46.28	433.72
6312- ADVERTISING & PROMOTION	500.00	0.00	45.00	0.00	0.09	0.00	45.00	455.00
6320- TELEPHONE	1,550.00	73.15	1,124.41	0.00	0.73	0.00	1,124.41	425.59
6410- RENT	17,950.00	2,257.63	22,656.73	0.00	1.26	0.00	22,656.73	(4,706.73)
6420- UTILITIES/ DISPOSAL	1,955.00	317.55	3,472.86	0.00	1.78	0.00	3,472.86	(1,517.86)
6432- BUILDING REPAIRS/ MAINTENANCE	750.00	0.00	119.32	0.00	0.16	0.00	119.32	630.68
6440- PROPERTY INSURANCE	225.00	43.49	427.97	0.00	1.90	0.00	427.97	(202.97)
6520- CONSULTANTS	417.00	0.00	0.00	0.00	0.00	416.10	416.10	0.90
6530- LEGAL	1,000.00	0.00	464.60	0.00	0.46	0.00	464.60	535.40
6555- MEDICAL SCREENING/DEAT/STAFF	200.00	0.00	0.00	0.00	0.00	0.00	0.00	200.00
6610- GAS & OIL	20.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00
6620- VEHICLE INSURANCE	150.00	18.84	181.99	0.00	1.21	0.00	181.99	(31.99)
6640- VEHICLE REPAIR & MAINTENANCE	25.00	0.00	1.52	0.00	0.06	0.00	1.52	23.48
6712- STAFF TRAVEL-LOCAL	125.00	0.00	0.00	0.00	0.00	0.00	0.00	125.00
6742- TRAINING - STAFF	225.00	11.48	185.38	0.00	0.82	0.00	185.38	39.62
6840- PROPERTY TAXES	50.00	0.00	22.06	0.00	0.44	0.00	22.06	27.94
6850- FEES & LICENSES	1,000.00	0.00	131.75	0.00	0.13	0.00	131.75	868.25
6852- FINGERPRINT	75.00	0.00	0.00	0.00	0.00	0.00	0.00	75.00
6875- EMPLOYEE HEALTH & WELFARE	180.00	0.00	188.24	0.00	1.05	7.16	195.40	(15.40)
Total Other & Services	29,077.00	2,915.60	31,404.00	0.00	1.08	423.26	31,827.26	(2,750.26)
Equipment & Bldg Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Depreciation Expense	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	1,766,411.00	101,240.19	1,053,318.17	0.00	0.60	0.00	1,053,318.17	713,092.83
Direct Benefits	1,766,411.00	101,240.19	1,053,318.17	0.00	0.60	0.00	1,053,318.17	713,092.83
9010- INDIRECT COST ALLOCATION	178,589.00	10,460.19	109,573.72	0.00	0.61	0.00	109,573.72	69,015.28
TOTAL EXPENSES	2,141,104.00	125,407.27	1,313,680.48	0.00	0.61	423.26	1,314,103.74	827,000.26
Excess Revenue Over (Under) Expenditures	0.00	0.00	0.00	0.00	0.00	(423.26)	(423.26)	423.26

**Fiscal Year July 21- June 22
April 30, 2022**

428 ALT. PYMT. PROG. STG 3 - FEDERAL	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	646,683.00	57,071.59	466,695.94	0.00	(0.72)	0.00	466,695.94	179,987.06
4120- GRANT INCOME-STATE	712,325.00	61,827.55	529,200.20	0.00	(0.74)	0.00	529,200.20	183,124.80
Total Revenues	1,359,008.00	118,899.14	995,896.14	0.00	(0.73)	0.00	995,896.14	363,111.86
EXPENSES								
5010- SALARIES & WAGES	80,182.00	6,403.51	52,077.79	0.00	0.65	0.00	52,077.79	28,104.21
5020- ACCRUED VACATION PAY	2,744.00	369.22	2,384.21	0.00	0.87	0.00	2,384.21	359.79
Total Salaries	82,926.00	6,772.73	54,462.00	0.00	0.66	0.00	54,462.00	28,464.00
5112- HEALTH INSURANCE	10,065.00	503.93	5,058.09	0.00	0.50	0.00	5,058.09	5,006.91
5114- WORKER'S COMPENSATION	382.00	24.53	247.84	0.00	0.65	0.00	247.84	134.16
5116- PENSION	2,744.00	310.10	2,657.15	0.00	0.97	0.00	2,657.15	86.85
5122- FICA	5,234.00	511.29	4,265.58	0.00	0.81	0.00	4,265.58	968.42
5124- SUI	669.00	11.48	583.70	0.00	0.87	0.00	583.70	85.30
5130- ACCRUED VACATION FICA	134.00	(1.55)	66.79	0.00	0.50	0.00	66.79	67.21
Fringe Benefits	19,228.00	1,359.78	12,879.15	0.00	0.67	0.00	12,879.15	6,348.85
6110- OFFICE SUPPLIES	445.00	0.00	344.55	0.00	0.77	0.00	344.55	100.45
6112- DATA PROCESSING SUPPLIES	2,387.00	80.51	2,511.87	0.00	1.05	0.00	2,511.87	(124.87)
6130- PROGRAM SUPPLIES	650.00	20.52	26.18	0.00	0.04	0.00	26.18	623.82
6143- FURNISHINGS	1,159.00	0.00	1,109.03	0.00	0.96	0.00	1,109.03	49.97
6170- POSTAGE & SHIPPING	650.00	0.00	670.87	0.00	1.03	0.00	670.87	(20.87)
Supplies	5,291.00	101.03	4,662.50	0.00	0.88	0.00	4,662.50	628.50
6180- EQUIPMENT RENTAL	715.00	45.81	651.03	0.00	0.91	0.00	651.03	63.97
6181- EQUIPMENT MAINTENANCE	429.00	20.25	146.07	0.00	0.34	0.00	146.07	282.93
6310- PRINTING & PUBLICATIONS	250.00	0.00	21.92	0.00	0.09	0.00	21.92	228.08
6312- ADVERTISING & PROMOTION	345.00	0.00	45.00	0.00	0.13	0.00	45.00	300.00
6320- TELEPHONE	806.00	30.11	493.01	0.00	0.61	0.00	493.01	312.99
6410- RENT	9,334.00	967.55	9,710.01	0.00	1.04	0.00	9,710.01	(376.01)
6420- UTILITIES/ DISPOSAL	871.00	135.78	1,484.91	0.00	1.70	0.00	1,484.91	(613.91)
6432- BUILDING REPAIRS/ MAINTENANCE	390.00	0.00	56.64	0.00	0.15	0.00	56.64	333.36
6440- PROPERTY INSURANCE	117.00	20.08	197.55	0.00	1.69	0.00	197.55	(80.55)
6520- CONSULTANTS	198.00	0.00	0.00	0.00	0.00	197.10	197.10	0.90
6530- LEGAL	520.00	0.00	142.92	0.00	0.27	0.00	142.92	377.08
6555- MEDICAL SCREENING/DEAT/STAFF	104.00	0.00	0.00	0.00	0.00	0.00	0.00	104.00
6610- GAS & OIL	13.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
6620- VEHICLE INSURANCE	13.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
6640- VEHICLE REPAIR & MAINTENANCE	13.00	0.00	0.72	0.00	0.06	0.00	0.72	12.28
6712- STAFF TRAVEL-LOCAL	65.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00
6742- TRAINING - STAFF	117.00	5.45	87.81	0.00	0.75	0.00	87.81	29.19
6840- PROPERTY TAXES	26.00	0.00	6.83	0.00	0.26	0.00	6.83	19.17
6850- FEES & LICENSES	520.00	0.00	58.50	0.00	0.11	0.00	58.50	461.50
6852- FINGERPRINT	39.00	0.00	0.00	0.00	0.00	0.00	0.00	39.00
6875- EMPLOYEE HEALTH & WELFARE	93.00	0.00	82.42	0.00	0.89	3.18	85.60	7.40
Total Other & Services	14,978.00	1,225.03	13,185.34	0.00	0.88	200.28	13,385.62	1,592.38
Equipment & Bldg Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Depreciation Expense	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	1,121,182.00	99,523.23	827,639.74	0.00	0.74	0.00	827,639.74	293,542.26
Direct Benefits	1,121,182.00	99,523.23	827,639.74	0.00	0.74	0.00	827,639.74	293,542.26
9010- INDIRECT COST ALLOCATION	115,403.00	9,917.34	83,067.41	0.00	0.72	0.00	83,067.41	32,335.59
TOTAL EXPENSES	1,359,008.00	118,899.14	995,896.14	0.00	0.73	200.28	996,096.42	362,911.58
Excess Revenue Over (Under) Expenditures	0.00	0.00	0.00	0.00	0.00	(200.28)	(200.28)	200.28

Madera Migrant Head Start
Budget to Actual

		For the Period Ending 4/30/2022					Start Date	3/1/2022		
Preliminary							Current Mnth	2.00		
									12%	
Account	Description	Budget	Current PTD	Current Actual YTD	Previous Actual YTD	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
REVENUES										
4110	GRANT INCOME-	5,468,877	557,069.72	759,424.50	202,354.78	911,479.48	14%	32,060.02	791,484.52	4,677,392.48
4220	IN KIND CONTRIBUTIONS	441,954	12,670.14	22,726.97	10,056.83	73,659.00	5%	-	22,726.97	419,227.03
4120	GRANT INCOME-STATE	-	-	-	-	-	-	-	-	-
4390	MISCELLANEOUS	-	20,788.36	20,788.36	-	-	-	-	20,788.36	(20,788.36)
	TOTAL REVENUES	5,910,831	590,528.22	802,939.83	212,411.61	985,138.48	14%	32,060.02	834,999.85	5,075,831.15
EXPENDITURES										
5010	Salaries & Wages	3,065,387	317,260.45	397,932.35	80,671.90	510,897.83	13%	-	397,932.35	2,667,454.65
5020	Accrued Vacation Pay	179,735	18,646.31	23,065.35	4,419.04	29,955.83	13%	-	23,065.35	156,669.65
5112	Health Insurance	284,358	39,180.02	67,087.41	27,907.39	47,393.00	24%	-	67,087.41	217,270.59
5114	Worker's Compensation	106,503	9,201.28	15,007.71	5,806.43	17,750.50	14%	-	15,007.71	91,495.29
5116	Pension	186,446	15,952.86	25,647.06	9,694.20	31,074.33	14%	-	25,647.06	160,798.94
5122	FICA	263,556	23,633.91	37,642.18	14,008.27	43,926.00	14%	-	37,642.18	225,913.82
5124	SUI	33,913	773.69	1,499.20	725.51	5,652.17	4%	-	1,499.20	32,413.80
5130	Accrued Vacation Fringe	13,200	1,426.34	1,703.04	276.70	2,200.00	13%	-	1,703.04	11,496.96
6110	Office supplies	19,163	933.94	1,025.79	91.85	3,193.83	5%	3,179.62	4,205.41	14,957.59
6112	Data Processing Supplies	34,000	11,517.25	12,205.98	688.73	5,666.67	36%	760.70	12,966.68	21,033.32
6121	Food	1,500	309.67	309.67	-	250.00	21%	-	309.67	1,190.33
6122	Kitchen Supplies	751	-	-	-	125.17	0%	-	-	751.00
6130	Program Supplies	91,412	2,198.56	2,313.17	114.61	15,235.33	3%	8,367.09	10,680.26	80,731.74
6132	Medical & Dental Supplies	2,400	-	-	-	400.00	0%	-	-	2,400.00
6134	Instructional Supplies	9,000	-	-	-	1,500.00	0%	312.35	312.35	8,687.65
6140	Custodial Supplies	27,072	227.76	227.76	-	4,512.00	1%	-	227.76	26,844.24
6142	Linen / Laundry	-	-	-	-	-	-	-	-	-
6143	Furnishing	36,000	4,362.91	4,362.91	-	6,000.00	-	-	4,362.91	31,637.09
6150	Uniform Rental / Purchases	156	-	150.00	150.00	26.00	96%	-	150.00	6.00
6170	Postage & Shipping	500	84.94	84.94	-	83.33	17%	-	84.94	415.06
6221	Equipment Over > \$5,000	-	-	-	-	-	-	-	-	-
6233	Land Improvements	-	-	-	-	-	-	-	-	-
6180	Equipment Rental	22,700	1,152.13	1,207.35	55.22	3,783.33	5%	-	1,207.35	21,492.65
6181	Equipment Maintenance	12,304	1,526.23	1,526.23	-	2,050.67	12%	1,322.22	2,848.45	9,455.55
6310	Printing & Publications	4,000	220.54	1,637.94	1,417.40	666.67	41%	584.82	2,222.76	1,777.24
6312	Advertising & Promotion	-	91.63	91.63	-	-	-	-	91.63	(91.63)
6320	Telephone	62,615	21,565.53	36,334.01	14,768.48	10,435.83	58%	-	36,334.01	26,280.99
6410	Rent	172,152	14,943.12	29,596.24	14,653.12	28,692.00	17%	-	29,596.24	142,555.76
6420	Utilities / Disposal	109,957	6,598.49	8,597.56	1,999.07	18,326.17	8%	-	8,597.56	101,359.44
6432	Building Repairs / Maintenanc	60,000	18,550.35	19,821.98	1,271.63	10,000.00	33%	7,869.58	27,691.56	32,308.44
6433	Grounds Maintenance	25,200	1,450.00	2,900.00	1,450.00	4,200.00	12%	3,824.35	6,724.35	18,475.65
6436	Pest Control	2,508	189.61	531.66	342.05	418.00	21%	2,994.00	3,525.66	(1,017.66)
6437	Burglar & Fire Alarm	1,404	163.95	523.40	359.45	234.00	37%	-	523.40	880.60
6440	Property Insurance	17,160	1,455.86	3,358.34	1,902.48	2,860.00	20%	-	3,358.34	13,801.66
6521 / 6520	Consultants	25,000	-	-	-	4,166.67	0%	-	-	25,000.00
6522	Consultants Expense	125	-	-	-	20.83	0%	-	-	125.00
6524	Contracts	-	-	-	-	-	-	-	-	-
6530	Legal	8,006	875.00	875.00	-	1,334.33	11%	-	875.00	7,131.00
6540	Custodial Services	60,876	6,178.45	6,178.45	-	10,146.00	10%	-	6,178.45	54,697.55
6555	Medical Screening / DEAT / Staff	3,125	-	-	-	520.83	0%	-	-	3,125.00
6562	Medical Exam	-	-	-	-	-	-	-	-	-
6564	Medical Follow-up	-	-	-	-	-	-	-	-	-
6566	Dental Exam	-	-	-	-	-	-	-	-	-
6568	Dental Follow-up	-	-	-	-	-	-	-	-	-

Account	Description	Budget	Current	Current	Previous	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
			PTD	Actual YTD	Actual YTD					
6610	Gas & Oil	7,500	2,683.04	2,683.04	-	1,250.00	36%	-	2,683.04	4,816.96
6620	Vehicle Insurance	24,000	1,669.62	3,306.05	1,636.43	4,000.00	14%	-	3,306.05	20,693.95
6630	Vehicle License & Fees	-	-	-	-	-	-	-	-	-
6640	Vehicle Repair & Maintenan	7,200	1,790.54	2,403.12	612.58	1,200.00	33%	-	2,403.12	4,796.88
6712	Staff Travel-Local	1,008	55.89	55.89	-	168.00	6%	-	55.89	952.11
6714	Staff Travel-Out of Area	-	-	-	-	-	-	-	-	-
6722	Per Diem-Staff	-	-	-	-	-	-	-	-	-
6724	Per Diem-Parent	-	-	-	-	-	-	-	-	-
6730	Volunteer Travel	-	-	-	-	-	-	-	-	-
6742	Training - Staff	-	-	-	-	-	-	-	-	-
6746	Training - Parent	-	-	-	-	-	-	-	-	-
6748	Education Reimbursement	-	-	-	-	-	-	-	-	-
6750	Field Trips	-	-	-	-	-	-	-	-	-
6810	Bank Charges	-	-	-	-	-	-	-	-	-
6820	Interest Expense	-	-	-	-	-	-	-	-	-
6832	Liability Insurance	530	37.72	75.44	37.72	88.33	14%	-	75.44	454.56
6834	Student Activity Insurance	2,678	217.23	434.46	217.23	446.33	16%	-	434.46	2,243.54
6840	Property Taxes	-	-	-	-	-	-	-	-	-
6850	Fees & Licenses	10,000	2.00	2.00	-	1,666.67	0%	-	2.00	9,998.00
6852	Finger Printing	1,875	2.25	2.25	-	312.50	0%	-	2.25	1,872.75
6860	Depreciation Expense	-	-	-	-	-	-	-	-	-
6875	Employee Health & Welfare	8,057	2,380.85	2,380.85	-	1,342.83	30%	171.17	2,552.02	5,504.98
7110	Parent Activities	1,200	-	-	-	200.00	0%	-	-	1,200.00
7111	Parent Mileage	487	-	18.93	18.93	81.17	4%	-	18.93	468.07
7112	Parent Involvement	2,400	-	-	-	400.00	0%	-	-	2,400.00
7114	PPC Allowance	2,600	-	180.00	180.00	433.33	7%	-	180.00	2,420.00
7116	PPC Food Allowance	1,000	149.19	149.19	-	166.67	15%	-	149.19	850.81
8110	In-Kind Salaries	320,252	2,242.48	2,242.48	-	53,375.33	1%	-	2,242.48	318,009.52
8120	In-Kind Rent	120,682	10,427.66	20,484.49	10,056.83	20,113.67	17%	-	20,484.49	100,197.51
8130	In-Kind Other	1,020	-	-	-	170.00	0%	-	-	1,020.00
9010	In-Direct Cost Allocation	456,158	48,198.97	65,077.33	16,878.36	76,026.33	14%	2,674.12	67,751.45	388,406.55
Total Expenses		5,910,831	590,528.22	802,939.83	212,411.61	985,138.48	14%	32,060.02	834,999.85	5,075,831.15
Excess Revenue Over		-	-	-	-	-	-	-	-	-
Total Expenses w/o In Kind		5,468,877	577,858.08	780,212.86	202,354.78				812,272.88	4,656,604.12
In-Kind		441,954	12,670.14						14.85%	

ADMINISTRATION BUDGET LIMIT	\$653,211
YEAR-TO DATE ADMIN EXP.	\$93,927
PERCENT OF TOTAL EXPENSES	1.37%
ADMINIISTRATION LIMIT IS 9.5%	

ID Cost Calc. @ 9.1%	65,077.33
	65,077.33

July 1, 2021 to June 30, 2022

State Migrant Full-Day Program - Basic Program

Budget to Actual

For the Period Ending

4/30/2022

Start Date 7/1/2021

Current Mnth 9

82%

Account	Description	Budget	MTD	Current Actual YTD	Previous Actual YTD	YTD Budget	% Spent	Encumbered	Actual + Encumb	Budget Balance
REVENUES										
4120	GRANT INCOME-STATE	786,682	36.21	616,354.19	616,317.98	590,013	78.35%	-	616,354.19	170,327.81
4220	IN KIND CONTRIBUTIONS	-	-	-	-	-	-	-	-	-
4315	CHILD CRE REVENUE-STATE	-	-	-	-	-	-	-	-	-
4350	RENTAL INCOME	-	-	-	-	-	-	-	-	-
	TOTAL REVENUES	786,682	36.21	616,354.19	616,317.98	590,013	78.35%	-	616,354.19	170,327.81
EXPENDITURES										
5010	SALARIES & WAGES	524,195	-	409,441.87	409,441.87	393,146	78.11%	-	409,441.87	114,753.13
5020	ACCRUED VACATION PAY	32,600	-	24,846.95	24,846.95	24,450	76.22%	-	24,846.95	7,753.05
5112	HEALTH INSURANCE	56,342	-	43,946.76	43,946.76	42,257	78.00%	-	43,946.76	12,395.24
5114	WORKER'S COMPENSATION	19,434	-	15,158.52	15,158.52	14,576	78.00%	-	15,158.52	4,275.48
5116	PENSION	29,492	-	23,003.76	23,003.76	22,119	78.00%	-	23,003.76	6,488.24
5122	FICA	40,667	-	31,720.26	31,720.26	30,500	78.00%	-	31,720.26	8,946.74
5124	SUI	7,960	-	6,208.80	6,208.80	5,970	78.00%	-	6,208.80	1,751.20
5130	ACCRUED VACATION FRINGE	2,350	-	1,833.00	1,833.00	1,763	78.00%	-	1,833.00	517.00
6110	OFFICE SUPPLIES	1,268	-	1,346.31	1,346.31	951	106.18%	-	1,346.31	(78.31)
6112	DATA PROCESSING SUPPLIES	-	-	-	-	-	-	-	-	-
6121	FOOD	-	-	-	-	-	-	-	-	-
6122	KITCHEN SUPPLIES	-	-	-	-	-	-	-	-	-
6130	PROGRAM SUPPLIES	807	-	804.66	804.66	605	99.71%	-	804.66	2.34
6132	MEDICAL & DENTAL SUPPLIES	-	-	-	-	-	-	-	-	-
6134	INSTRUCTIONAL SUPPLIES	-	-	-	-	-	-	-	-	-
6140	CUSTODIAL SUPPLIES	4,500	-	4,803.10	4,803.10	3,375	106.74%	-	4,803.10	(303.10)
6170	POSTAGE & SHIPPING	-	-	-	-	-	-	-	-	-
6180	EQUIPMENT RENTAL	-	-	-	-	-	-	-	-	-
6181	EQUIPMENT MAINTENANCE	-	-	-	-	-	-	-	-	-
6221	EQUIPMENT OVER > \$5000	-	-	-	-	-	-	-	-	-
6310	PRINTING & PUBLICATIONS	-	-	-	-	-	-	-	-	-
6312	ADVERTISING & PROMOTION	-	-	-	-	-	-	-	-	-
6320	TELEPHONE	-	-	-	-	-	-	-	-	-
6410	RENT	-	-	-	-	-	-	-	-	-
6420	UTILITIES/ DISPOSAL	-	-	-	-	-	-	-	-	-
6432	BUILDING REPAIRS/ MAINTENANCE	-	-	-	-	-	-	-	-	-
6433	GROUNDS MAINTENANCE	-	-	-	-	-	-	-	-	-
6540	CUSTODIAL SERVICES	-	-	-	-	-	-	-	-	-
6610	GAS & OIL	320	-	415.82	415.82	240	129.94%	-	415.82	(95.82)
6620	VEHICLE INSURANCE	810	33.19	788.08	754.89	608	97.29%	-	788.08	21.92
6630	VEHICLE LICENSE & FEES	-	-	-	-	-	-	-	-	-
6640	VEHICLE REPAIR & MAINTENANCE	320	-	626.37	626.37	240	195.74%	-	626.37	(306.37)
6742	TRAINING - STAFF	-	-	-	-	-	-	-	-	-
6834	STUDENT ACTIVITY INSURANCE	-	-	-	-	-	-	-	-	-
6850	FEES & LICENSES	-	-	-	-	-	-	-	-	-
6852	FINGER PRINTING	-	-	-	-	-	-	-	-	-
6875	EE HEALTH & WELFARE COSTS	-	-	-	-	-	-	-	-	-
9010	INDIRECT COST ALLOCATION	65,617	3.02	51,409.93	51,406.91	49,213	78.35%	-	51,409.93	14,207.07
	Total Expenses	786,682	36.21	616,354.19	616,317.98	590,013	78.35%	-	616,354.19	170,327.81
									78.3%	

In Direct Calc. @ 9.1%
51,409.93
51,409.93 Total

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
330 0 HEAD START-FRESNO MIGRANT T&TA								
Revenues								
4110- GRANT INCOME-FEDERAL	82,690.00	7,262.12	17,813.97	0.00	(0.22)	0.00	17,813.97	64,876.03
Total Revenues	<u>82,690.00</u>	<u>7,262.12</u>	<u>17,813.97</u>	<u>0.00</u>	<u>(0.22)</u>	<u>0.00</u>	<u>17,813.97</u>	<u>64,876.03</u>
Expenses								
6121- FOOD	0.00	221.83	221.83	0.00	0.00	0.00	221.83	(221.83)
6130- PROGRAM SUPPLIES	3,080.00	0.00	0.00	0.00	0.00	0.00	0.00	3,080.00
6170- POSTAGE & SHIPPING	0.00	0.00	99.70	0.00	0.00	0.00	99.70	(99.70)
6410- RENT	3,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,000.00
6520- CONSULTANTS	15,000.00	0.00	1,800.00	0.00	0.12	0.00	1,800.00	13,200.00
6712- STAFF TRAVEL-LOCAL	25,101.00	0.00	0.00	0.00	0.00	0.00	0.00	25,101.00
6714- STAFF TRAVEL-OUT OF AREA	14,950.00	0.00	0.00	0.00	0.00	0.00	0.00	14,950.00
6722- PER DIEM - STAFF	4,462.00	0.00	0.00	0.00	0.00	0.00	0.00	4,462.00
6742- TRAINING - STAFF	10,200.00	6,418.84	11,556.74	0.00	1.13	15,421.68	26,978.42	(16,778.42)
6875- EMPLOYEE HEALTH & WELFARE	0.00	0.00	2,649.84	0.00	0.00	177.05	2,826.89	(2,826.89)
9010- INDIRECT COST ALLOCATION	6,897.00	605.73	1,485.86	0.00	0.22	0.00	1,485.86	5,411.14
Total Expenses	<u>82,690.00</u>	<u>7,246.40</u>	<u>17,813.97</u>	<u>0.00</u>	<u>0.22</u>	<u>15,598.73</u>	<u>33,412.70</u>	<u>49,277.30</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>15.72</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(15,598.73)</u>	<u>(15,598.73)</u>	<u>15,598.73</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>15.72</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(15,598.73)</u>	<u>(15,598.73)</u>	<u>15,598.73</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

331 0 HEAD START-FRESNO MIGRANT	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	4,652,471.00	371,158.06	2,348,121.80	2,192,314.00	(0.50)	0.00	2,348,121.80	2,304,349.20
4220- IN KIND CONTRIBUTIONS	645,704.00	16,141.08	336,187.95	222,458.00	(0.52)	0.00	336,187.95	309,516.05
4330- SALE OF ASSETS	0.00	0.00	2,250.00	0.00	0.00	0.00	2,250.00	(2,250.00)
Total Revenues	<u>5,298,175.00</u>	<u>387,299.14</u>	<u>2,686,559.75</u>	<u>2,414,772.00</u>	<u>(0.51)</u>	<u>0.00</u>	<u>2,686,559.75</u>	<u>2,611,615.25</u>
Expenses								
5010- SALARIES & WAGES	2,781,656.00	193,538.92	1,283,575.50	1,245,971.00	0.46	0.00	1,283,575.50	1,498,080.50
5020- ACCRUED VACATION PAY	169,703.00	12,364.71	77,287.45	75,833.00	0.46	0.00	77,287.45	92,415.55
5112- HEALTH INSURANCE	180,114.00	10,060.94	91,059.08	92,177.00	0.51	0.00	91,059.08	89,054.92
5114- WORKER'S COMPENSATION	111,323.00	4,477.99	35,505.74	49,859.00	0.32	0.00	35,505.74	75,817.26
5116- PENSION	158,842.00	10,692.30	79,708.93	70,479.00	0.50	0.00	79,708.93	79,133.07
5122- FICA	209,737.00	14,820.44	109,932.70	93,944.00	0.52	0.00	109,932.70	99,804.30
5124- SUI	41,926.00	6,437.31	11,784.73	6,044.00	0.28	0.00	11,784.73	30,141.27
5130- ACCRUED VACATION FICA	12,795.00	945.85	5,911.02	5,720.00	0.46	0.00	5,911.02	6,883.98
6110- OFFICE SUPPLIES	20,000.00	993.79	8,048.09	9,648.00	0.40	2,847.17	10,895.26	9,104.74
6112- DATA PROCESSING SUPPLIES	27,000.00	3,750.42	38,706.04	14,736.00	1.43	45.00	38,751.04	(11,751.04)
6121- FOOD	4,000.00	0.00	1,943.98	0.00	0.49	0.00	1,943.98	2,056.02
6122- KITCHEN SUPPLIES	1,050.00	2,928.95	3,043.79	0.00	2.90	0.00	3,043.79	(1,993.79)
6130- PROGRAM SUPPLIES	34,886.00	10,350.22	38,385.26	12,526.00	1.10	4,831.98	43,217.24	(8,331.24)
6132- MEDICAL & DENTAL SUPPLIES	140.00	0.00	0.00	0.00	0.00	0.00	0.00	140.00
6134- INSTRUCTIONAL SUPPLIES	4,400.00	0.00	228.91	1,412.00	0.05	0.00	228.91	4,171.09
6140- CUSTODIAL SUPPLIES	38,285.00	484.29	10,097.53	17,598.00	0.26	0.00	10,097.53	28,187.47
6170- POSTAGE & SHIPPING	1,500.00	20.81	258.20	900.00	0.17	0.00	258.20	1,241.80
6180- EQUIPMENT RENTAL	21,984.00	249.71	15,798.66	14,656.00	0.72	0.00	15,798.66	6,185.34
6181- EQUIPMENT MAINTENANCE	18,120.00	3,083.25	17,817.54	12,080.00	0.98	0.00	17,817.54	302.46
6310- PRINTING & PUBLICATIONS	7,000.00	712.20	3,114.61	7,000.00	0.44	0.00	3,114.61	3,885.39
6312- ADVERTISING & PROMOTION	250.00	0.00	0.00	250.00	0.00	0.00	0.00	250.00
6320- TELEPHONE	73,782.00	(2,310.98)	44,819.02	49,192.00	0.61	0.00	44,819.02	28,962.98
6410- RENT	77,036.00	8,391.92	67,751.52	51,357.00	0.88	0.00	67,751.52	9,284.48
6420- UTILITIES/ DISPOSAL	53,136.00	6,983.24	51,286.89	35,424.00	0.97	0.00	51,286.89	1,849.11
6432- BUILDING REPAIRS/ MAINTENANCE	57,000.00	11,166.58	40,192.82	38,016.00	0.71	41,388.37	81,581.19	(24,581.19)
6433- GROUNDS MAINTENANCE	17,940.00	2,379.85	23,607.28	11,960.00	1.32	2,307.83	25,915.11	(7,975.11)
6436- PEST CONTROL	6,600.00	4,917.45	8,659.45	4,400.00	1.31	0.00	8,659.45	(2,059.45)
6437- BURGLAR & FIRE ALARM	2,155.00	227.04	4,469.94	1,435.00	2.07	0.00	4,469.94	(2,314.94)
6440- PROPERTY INSURANCE	12,048.00	1,136.17	9,089.36	8,024.00	0.75	0.00	9,089.36	2,958.64
6520- CONSULTANTS	3,590.00	0.00	420.00	0.00	0.12	18,880.00	19,300.00	(15,710.00)
6522- CONSULTANT EXPENSES	800.00	0.00	70.51	0.00	0.09	1,120.00	1,190.51	(390.51)
6524- CONTRACTS	24,912.00	0.00	0.00	16,608.00	0.00	0.00	0.00	24,912.00
6530- LEGAL	9,000.00	0.00	0.00	6,000.00	0.00	0.00	0.00	9,000.00
6540- CUSTODIAL SERVICES	4,776.00	398.00	3,184.00	3,184.00	0.67	0.00	3,184.00	1,592.00
6555- MEDICAL SCREENING/DEAT/STAFF	1,000.00	0.00	0.00	400.00	0.00	0.00	0.00	1,000.00
6610- GAS & OIL	10,000.00	1,431.36	7,150.29	6,664.00	0.72	0.00	7,150.29	2,849.71
6620- VEHICLE INSURANCE	12,000.00	1,650.02	13,200.19	8,000.00	1.10	0.00	13,200.19	(1,200.19)
6630- VEHICLE LICENSE & FEES	0.00	0.00	430.00	0.00	0.00	0.00	430.00	(430.00)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
331 0 HEAD START-FRESNO MIGRANT								
6640- VEHICLE REPAIR & MAINTENANCE	15,000.00	6,616.38	18,129.61	10,000.00	1.21	0.00	18,129.61	(3,129.61)
6712- STAFF TRAVEL-LOCAL	3,294.00	997.01	4,053.64	1,098.00	1.23	0.00	4,053.64	(759.64)
6742- TRAINING - STAFF	0.00	0.00	1,146.66	0.00	0.00	1,200.00	2,346.66	(2,346.66)
6832- LIABILITY INSURANCE	504.00	36.36	290.88	336.00	0.58	0.00	290.88	213.12
6834- STUDENT ACTIVITY INSURANCE	1,175.00	0.00	571.41	504.00	0.49	0.00	571.41	603.59
6840- PROPERTY TAXES	5,260.00	0.00	1,365.69	5,260.00	0.26	0.00	1,365.69	3,894.31
6850- FEES & LICENSES	17,850.00	12,291.40	18,821.73	11,360.00	1.05	0.00	18,821.73	(971.73)
6851- CPR FEES	240.00	0.00	0.00	0.00	0.00	0.00	0.00	240.00
6852- FINGERPRINT	75.00	0.00	0.00	0.00	0.00	0.00	0.00	75.00
6875- EMPLOYEE HEALTH & WELFARE	8,475.00	0.00	2,659.31	8,475.00	0.31	1,524.37	4,183.68	4,291.32
7110- PARENT ACTIVITIES	700.00	0.00	0.00	224.00	0.00	0.00	0.00	700.00
7111- PARENT MILEAGE	750.00	0.00	0.00	300.00	0.00	0.00	0.00	750.00
7114- PC ALLOWANCE	0.00	0.00	750.00	0.00	0.00	0.00	750.00	(750.00)
7116- POLICY COUNCIL FOOD ALLOWANCE	600.00	0.00	0.00	400.00	0.00	0.00	0.00	600.00
8110- IN KIND SALARIES	560,230.00	1,233.33	216,925.95	193,009.00	0.39	0.00	216,925.95	343,304.05
8120- IN KIND RENT	83,944.00	14,907.75	119,262.00	28,921.00	1.42	0.00	119,262.00	(35,318.00)
8130- IN KIND - OTHER	1,530.00	0.00	0.00	528.00	0.00	0.00	0.00	1,530.00
9010- INDIRECT COST ALLOCATION	388,062.00	30,958.18	196,043.84	182,860.00	0.51	0.00	196,043.84	192,018.16
Total Expenses	<u>5,298,175.00</u>	<u>379,323.16</u>	<u>2,686,559.75</u>	<u>2,414,772.00</u>	<u>0.51</u>	<u>74,144.72</u>	<u>2,760,704.47</u>	<u>2,537,470.53</u>
Excess Revenue Over (Under) Expenditures	0.00	7,975.98	0.00	0.00	0.00	(74,144.72)	(74,144.72)	74,144.72
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	7,975.98	0.00	0.00	0.00	(74,144.72)	(74,144.72)	74,144.72

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
351 0 FRESNO COE 1-TIME FUND								
Revenues								
4120- GRANT INCOME-STATE	116,800.00	0.00	112,410.74	0.00	(0.96)	0.00	112,410.74	4,389.26
Total Revenues	<u>116,800.00</u>	<u>0.00</u>	<u>112,410.74</u>	<u>0.00</u>	<u>(0.96)</u>	<u>0.00</u>	<u>112,410.74</u>	<u>4,389.26</u>
Expenses								
6110- OFFICE SUPPLIES	15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00
6130- PROGRAM SUPPLIES	92,058.00	0.00	0.00	0.00	0.00	0.00	0.00	92,058.00
9010- INDIRECT COST ALLOCATION	9,742.00	0.00	0.00	0.00	0.00	0.00	0.00	9,742.00
Total Expenses	<u>116,800.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>116,800.00</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.00</u>	<u>112,410.74</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>112,410.74</u>	<u>(112,410.74)</u>
Beginning Net Assets - Unrestricted	0.00	56,112.32	56,112.32	0.00	0.00	0.00	56,112.32	(56,112.32)
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>56,112.32</u>	<u>168,523.06</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>168,523.06</u>	<u>(168,523.06)</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
831 0 COVID-19 CARES - FRESNO MHS								
Revenues								
4110- GRANT INCOME-FEDERAL	64,578.00	1,406.68	10,268.12	0.00	(0.16)	0.00	10,268.12	54,309.88
Total Revenues	<u>64,578.00</u>	<u>1,406.68</u>	<u>10,268.12</u>	<u>0.00</u>	<u>(0.16)</u>	<u>0.00</u>	<u>10,268.12</u>	<u>54,309.88</u>
Expenses								
6112- DATA PROCESSING SUPPLIES	0.00	0.00	0.00	0.00	0.00	10,066.71	10,066.71	(10,066.71)
6130- PROGRAM SUPPLIES	59,192.00	14.99	6,037.30	0.00	0.10	337.16	6,374.46	52,817.54
6132- MEDICAL & DENTAL SUPPLIES	0.00	0.00	0.00	0.00	0.00	836.29	836.29	(836.29)
6140- CUSTODIAL SUPPLIES	0.00	0.00	0.00	0.00	0.00	159.75	159.75	(159.75)
6432- BUILDING REPAIRS/ MAINTENANCE	0.00	1,274.34	1,274.34	0.00	0.00	0.00	1,274.34	(1,274.34)
6520- CONSULTANTS	0.00	0.00	0.00	0.00	0.00	31,012.63	31,012.63	(31,012.63)
6742- TRAINING - STAFF	0.00	0.00	2,100.00	0.00	0.00	0.00	2,100.00	(2,100.00)
6850- FEES & LICENSES	0.00	0.00	0.02	0.00	0.00	0.00	0.02	(0.02)
9010- INDIRECT COST ALLOCATION	5,386.00	117.33	856.46	0.00	0.16	0.00	856.46	4,529.54
Total Expenses	<u>64,578.00</u>	<u>1,406.66</u>	<u>10,268.12</u>	<u>0.00</u>	<u>0.16</u>	<u>42,412.54</u>	<u>52,680.66</u>	<u>11,897.34</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.02</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(42,412.54)</u>	<u>(42,412.54)</u>	<u>42,412.54</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>0.02</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(42,412.54)</u>	<u>(42,412.54)</u>	<u>42,412.54</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
838 0 COVID-19 ARP - FRESNO MHS								
Revenues								
4110- GRANT INCOME-FEDERAL	335,513.00	(1,665.21)	272,085.10	0.00	(0.81)	0.00	272,085.10	63,427.90
Total Revenues	<u>335,513.00</u>	<u>(1,665.21)</u>	<u>272,085.10</u>	<u>0.00</u>	<u>(0.81)</u>	<u>0.00</u>	<u>272,085.10</u>	<u>63,427.90</u>
Expenses								
5010- SALARIES & WAGES	229,961.00	(500.00)	186,584.99	0.00	0.81	0.00	186,584.99	43,376.01
5020- ACCRUED VACATION PAY	15,478.00	0.00	1,437.51	0.00	0.09	0.00	1,437.51	14,040.49
5112- HEALTH INSURANCE	20,511.00	0.00	17,983.71	0.00	0.88	0.00	17,983.71	2,527.29
5114- WORKER'S COMPENSATION	9,150.00	(19.17)	6,718.24	0.00	0.73	0.00	6,718.24	2,431.76
5116- PENSION	13,923.00	0.00	14,711.61	0.00	1.06	0.00	14,711.61	(788.61)
5122- FICA	18,506.00	(38.25)	14,717.20	0.00	0.80	0.00	14,717.20	3,788.80
5130- ACCRUED VACATION FICA	0.00	0.00	110.04	0.00	0.00	0.00	110.04	(110.04)
6130- PROGRAM SUPPLIES	0.00	0.00	8,096.15	0.00	0.00	0.00	8,096.15	(8,096.15)
6850- FEES & LICENSES	0.00	0.00	31.11	0.00	0.00	0.00	31.11	(31.11)
9010- INDIRECT COST ALLOCATION	27,984.00	(1,138.90)	21,694.54	0.00	0.78	0.00	21,694.54	6,289.46
Total Expenses	<u>335,513.00</u>	<u>(1,696.32)</u>	<u>272,085.10</u>	<u>0.00</u>	<u>0.81</u>	<u>0.00</u>	<u>272,085.10</u>	<u>63,427.90</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>31.11</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>31.11</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

Report Recap	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	5,135,252.00	378,161.65	2,648,288.99	2,192,314.00	(0.52)	0.00	2,648,288.99	2,486,963.01
4120- GRANT INCOME-STATE	116,800.00	0.00	112,410.74	0.00	(0.96)	0.00	112,410.74	4,389.26
4220- IN KIND CONTRIBUTIONS	645,704.00	16,141.08	336,187.95	222,458.00	(0.52)	0.00	336,187.95	309,516.05
4330- SALE OF ASSETS	0.00	0.00	2,250.00	0.00	0.00	0.00	2,250.00	(2,250.00)
Total Revenues	<u>5,897,756.00</u>	<u>394,302.73</u>	<u>3,099,137.68</u>	<u>2,414,772.00</u>	<u>(0.53)</u>	<u>0.00</u>	<u>3,099,137.68</u>	<u>2,798,618.32</u>
Expenses								
5010- SALARIES & WAGES	3,011,617.00	193,038.92	1,470,160.49	1,245,971.00	0.49	0.00	1,470,160.49	1,541,456.51
5020- ACCRUED VACATION PAY	185,181.00	12,364.71	78,724.96	75,833.00	0.43	0.00	78,724.96	106,456.04
5112- HEALTH INSURANCE	200,625.00	10,060.94	109,042.79	92,177.00	0.54	0.00	109,042.79	91,582.21
5114- WORKER'S COMPENSATION	120,473.00	4,458.82	42,223.98	49,859.00	0.35	0.00	42,223.98	78,249.02
5116- PENSION	172,765.00	10,692.30	94,420.54	70,479.00	0.55	0.00	94,420.54	78,344.46
5122- FICA	228,243.00	14,782.19	124,649.90	93,944.00	0.55	0.00	124,649.90	103,593.10
5124- SUI	41,926.00	6,437.31	11,784.73	6,044.00	0.28	0.00	11,784.73	30,141.27
5130- ACCRUED VACATION FICA	12,795.00	945.85	6,021.06	5,720.00	0.47	0.00	6,021.06	6,773.94
6110- OFFICE SUPPLIES	35,000.00	993.79	8,048.09	9,648.00	0.23	2,847.17	10,895.26	24,104.74
6112- DATA PROCESSING SUPPLIES	27,000.00	3,750.42	38,706.04	14,736.00	1.43	10,111.71	48,817.75	(21,817.75)
6121- FOOD	4,000.00	221.83	2,165.81	0.00	0.54	0.00	2,165.81	1,834.19
6122- KITCHEN SUPPLIES	1,050.00	2,928.95	3,043.79	0.00	2.90	0.00	3,043.79	(1,993.79)
6130- PROGRAM SUPPLIES	189,216.00	10,365.21	52,518.71	12,526.00	0.28	5,169.14	57,687.85	131,528.15
6132- MEDICAL & DENTAL SUPPLIES	140.00	0.00	0.00	0.00	0.00	836.29	836.29	(696.29)
6134- INSTRUCTIONAL SUPPLIES	4,400.00	0.00	228.91	1,412.00	0.05	0.00	228.91	4,171.09
6140- CUSTODIAL SUPPLIES	38,285.00	484.29	10,097.53	17,598.00	0.26	159.75	10,257.28	28,027.72
6170- POSTAGE & SHIPPING	1,500.00	20.81	357.90	900.00	0.24	0.00	357.90	1,142.10
6180- EQUIPMENT RENTAL	21,984.00	249.71	15,798.66	14,656.00	0.72	0.00	15,798.66	6,185.34
6181- EQUIPMENT MAINTENANCE	18,120.00	3,083.25	17,817.54	12,080.00	0.98	0.00	17,817.54	302.46
6310- PRINTING & PUBLICATIONS	7,000.00	712.20	3,114.61	7,000.00	0.44	0.00	3,114.61	3,885.39
6312- ADVERTISING & PROMOTION	250.00	0.00	0.00	250.00	0.00	0.00	0.00	250.00
6320- TELEPHONE	73,782.00	(2,310.98)	44,819.02	49,192.00	0.61	0.00	44,819.02	28,962.98
6410- RENT	80,036.00	8,391.92	67,751.52	51,357.00	0.85	0.00	67,751.52	12,284.48
6420- UTILITIES/ DISPOSAL	53,136.00	6,983.24	51,286.89	35,424.00	0.97	0.00	51,286.89	1,849.11
6432- BUILDING REPAIRS/ MAINTENANCE	57,000.00	12,440.92	41,467.16	38,016.00	0.73	41,388.37	82,855.53	(25,855.53)
6433- GROUNDS MAINTENANCE	17,940.00	2,379.85	23,607.28	11,960.00	1.32	2,307.83	25,915.11	(7,975.11)
6436- PEST CONTROL	6,600.00	4,917.45	8,659.45	4,400.00	1.31	0.00	8,659.45	(2,059.45)
6437- BURGLAR & FIRE ALARM	2,155.00	227.04	4,469.94	1,435.00	2.07	0.00	4,469.94	(2,314.94)
6440- PROPERTY INSURANCE	12,048.00	1,136.17	9,089.36	8,024.00	0.75	0.00	9,089.36	2,958.64
6520- CONSULTANTS	18,590.00	0.00	2,220.00	0.00	0.12	49,892.63	52,112.63	(33,522.63)
6522- CONSULTANT EXPENSES	800.00	0.00	70.51	0.00	0.09	1,120.00	1,190.51	(390.51)
6524- CONTRACTS	24,912.00	0.00	0.00	16,608.00	0.00	0.00	0.00	24,912.00
6530- LEGAL	9,000.00	0.00	0.00	6,000.00	0.00	0.00	0.00	9,000.00
6540- CUSTODIAL SERVICES	4,776.00	398.00	3,184.00	3,184.00	0.67	0.00	3,184.00	1,592.00
6555- MEDICAL SCREENING/DEAT/STAFF	1,000.00	0.00	0.00	400.00	0.00	0.00	0.00	1,000.00
6610- GAS & OIL	10,000.00	1,431.36	7,150.29	6,664.00	0.72	0.00	7,150.29	2,849.71
6620- VEHICLE INSURANCE	12,000.00	1,650.02	13,200.19	8,000.00	1.10	0.00	13,200.19	(1,200.19)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 9/01/2021 to 4/30/2022

Report Recap	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
6630- VEHICLE LICENSE & FEES	0.00	0.00	430.00	0.00	0.00	0.00	430.00	(430.00)
6640- VEHICLE REPAIR & MAINTENANCE	15,000.00	6,616.38	18,129.61	10,000.00	1.21	0.00	18,129.61	(3,129.61)
6712- STAFF TRAVEL-LOCAL	28,395.00	997.01	4,053.64	1,098.00	0.14	0.00	4,053.64	24,341.36
6714- STAFF TRAVEL-OUT OF AREA	14,950.00	0.00	0.00	0.00	0.00	0.00	0.00	14,950.00
6722- PER DIEM - STAFF	4,462.00	0.00	0.00	0.00	0.00	0.00	0.00	4,462.00
6742- TRAINING - STAFF	10,200.00	6,418.84	14,803.40	0.00	1.45	16,621.68	31,425.08	(21,225.08)
6832- LIABILITY INSURANCE	504.00	36.36	290.88	336.00	0.58	0.00	290.88	213.12
6834- STUDENT ACTIVITY INSURANCE	1,175.00	0.00	571.41	504.00	0.49	0.00	571.41	603.59
6840- PROPERTY TAXES	5,260.00	0.00	1,365.69	5,260.00	0.26	0.00	1,365.69	3,894.31
6850- FEES & LICENSES	17,850.00	12,291.40	18,852.86	11,360.00	1.06	0.00	18,852.86	(1,002.86)
6851- CPR FEES	240.00	0.00	0.00	0.00	0.00	0.00	0.00	240.00
6852- FINGERPRINT	75.00	0.00	0.00	0.00	0.00	0.00	0.00	75.00
6875- EMPLOYEE HEALTH & WELFARE	8,475.00	0.00	5,309.15	8,475.00	0.63	1,701.42	7,010.57	1,464.43
7110- PARENT ACTIVITIES	700.00	0.00	0.00	224.00	0.00	0.00	0.00	700.00
7111- PARENT MILEAGE	750.00	0.00	0.00	300.00	0.00	0.00	0.00	750.00
7114- PC ALLOWANCE	0.00	0.00	750.00	0.00	0.00	0.00	750.00	(750.00)
7116- POLICY COUNCIL FOOD ALLOWANCE	600.00	0.00	0.00	400.00	0.00	0.00	0.00	600.00
8110- IN KIND SALARIES	560,230.00	1,233.33	216,925.95	193,009.00	0.39	0.00	216,925.95	343,304.05
8120- IN KIND RENT	83,944.00	14,907.75	119,262.00	28,921.00	1.42	0.00	119,262.00	(35,318.00)
8130- IN KIND - OTHER	1,530.00	0.00	0.00	528.00	0.00	0.00	0.00	1,530.00
9010- INDIRECT COST ALLOCATION	438,071.00	30,542.34	220,080.70	182,860.00	0.50	0.00	220,080.70	217,990.30
Total Expenses	5,897,756.00	386,279.90	2,986,726.94	2,414,772.00	0.51	132,155.99	3,118,882.93	2,778,873.07
Excess Revenue Over (Under) Expenditures	0.00	8,022.83	112,410.74	0.00	0.00	(132,155.99)	(19,745.25)	19,745.25
Beginning Net Assets - Unrestricted	0.00	56,112.32	56,112.32	0.00	0.00	0.00	56,112.32	(56,112.32)
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	64,135.15	168,523.06	0.00	0.00	(132,155.99)	36,367.07	(36,367.07)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
309 0 EARLY HEAD START T&TA								
Revenues								
4110- GRANT INCOME-FEDERAL	13,373.00	0.00	13,373.00	0.00	(1.00)	0.00	13,373.00	0.00
Total Revenues	<u>13,373.00</u>	<u>0.00</u>	<u>13,373.00</u>	<u>0.00</u>	<u>(1.00)</u>	<u>0.00</u>	<u>13,373.00</u>	<u>0.00</u>
Expenses								
6110- OFFICE SUPPLIES	478.00	0.00	0.00	0.00	0.00	0.00	0.00	478.00
6130- PROGRAM SUPPLIES	0.00	0.00	4,126.00	0.00	0.00	0.00	4,126.00	(4,126.00)
6714- STAFF TRAVEL-OUT OF AREA	5,050.00	0.00	0.00	0.00	0.00	0.00	0.00	5,050.00
6722- PER DIEM - STAFF	1,020.00	0.00	0.00	0.00	0.00	0.00	0.00	1,020.00
6742- TRAINING - STAFF	3,710.00	0.00	8,132.00	0.00	2.19	0.00	8,132.00	(4,422.00)
6850- FEES & LICENSES	2,000.00	0.00	0.00	0.00	0.00	0.00	0.00	2,000.00
9010- INDIRECT COST ALLOCATION	1,115.00	0.00	1,115.00	0.00	1.00	0.00	1,115.00	0.00
Total Expenses	<u>13,373.00</u>	<u>0.00</u>	<u>13,373.00</u>	<u>0.00</u>	<u>1.00</u>	<u>0.00</u>	<u>13,373.00</u>	<u>0.00</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
310 0 HEAD START-MADERA REG. T&TA								
Revenues								
4110- GRANT INCOME-FEDERAL	46,025.00	3,174.79	46,025.00	0.00	(1.00)	0.00	46,025.00	0.00
Total Revenues	<u>46,025.00</u>	<u>3,174.79</u>	<u>46,025.00</u>	<u>0.00</u>	<u>(1.00)</u>	<u>0.00</u>	<u>46,025.00</u>	<u>0.00</u>
Expenses								
6121- FOOD	0.00	0.00	2,634.96	0.00	0.00	0.00	2,634.96	(2,634.96)
6130- PROGRAM SUPPLIES	2,071.00	0.00	16,624.52	0.00	8.03	0.00	16,624.52	(14,553.52)
6310- PRINTING & PUBLICATIONS	2,443.00	0.00	0.00	0.00	0.00	0.00	0.00	2,443.00
6410- RENT	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00
6714- STAFF TRAVEL-OUT OF AREA	5,100.00	0.00	0.00	0.00	0.00	0.00	0.00	5,100.00
6722- PER DIEM - STAFF	2,202.00	0.00	0.00	0.00	0.00	0.00	0.00	2,202.00
6742- TRAINING - STAFF	23,095.00	5,209.13	25,225.67	0.00	1.09	0.00	25,225.67	(2,130.67)
6850- FEES & LICENSES	6,275.00	0.00	0.00	0.00	0.00	0.00	0.00	6,275.00
9010- INDIRECT COST ALLOCATION	3,839.00	264.81	3,839.00	0.00	1.00	0.00	3,839.00	0.00
Total Expenses	<u>46,025.00</u>	<u>5,473.94</u>	<u>48,324.15</u>	<u>0.00</u>	<u>1.05</u>	<u>0.00</u>	<u>48,324.15</u>	<u>(2,299.15)</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>(2,299.15)</u>	<u>(2,299.15)</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(2,299.15)</u>	<u>2,299.15</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>(2,299.15)</u>	<u>(2,299.15)</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(2,299.15)</u>	<u>2,299.15</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

311 0 HEAD START-MADERA REGIONAL	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	4,110,180.00	412,450.91	3,211,494.94	3,732,210.10	(0.78)	0.00	3,211,494.94	898,685.06
4220- IN KIND CONTRIBUTIONS	<u>1,039,051.00</u>	<u>102,416.22</u>	<u>691,366.18</u>	<u>936,328.00</u>	<u>(0.67)</u>	<u>0.00</u>	<u>691,366.18</u>	<u>347,684.82</u>
Total Revenues	<u>5,149,231.00</u>	<u>514,867.13</u>	<u>3,902,861.12</u>	<u>4,668,538.10</u>	<u>(0.76)</u>	<u>0.00</u>	<u>3,902,861.12</u>	<u>1,246,369.88</u>
Expenses								
5010- SALARIES & WAGES	2,214,386.00	207,776.04	1,635,404.44	2,010,584.58	0.74	0.00	1,635,404.44	578,981.56
5020- ACCRUED VACATION PAY	150,147.00	13,140.84	92,403.40	136,308.00	0.62	0.00	92,403.40	57,743.60
5112- HEALTH INSURANCE	278,976.00	15,874.26	165,575.91	251,875.77	0.59	0.00	165,575.91	113,400.09
5114- WORKER'S COMPENSATION	87,529.00	6,715.17	50,785.21	79,473.00	0.58	0.00	50,785.21	36,743.79
5116- PENSION	139,381.00	10,052.67	85,503.82	126,557.00	0.61	0.00	85,503.82	53,877.18
5122- FICA	165,643.00	17,353.72	131,916.33	150,399.00	0.80	0.00	131,916.33	33,726.67
5124- SUI	32,508.00	1,085.29	22,003.12	29,513.00	0.68	0.00	22,003.12	10,504.88
5130- ACCRUED VACATION FICA	11,231.00	1,005.19	7,071.10	10,201.00	0.63	0.00	7,071.10	4,159.90
6110- OFFICE SUPPLIES	30,070.00	35.02	10,949.23	27,359.00	0.36	1,906.59	12,855.82	17,214.18
6112- DATA PROCESSING SUPPLIES	50,000.00	3,122.62	51,279.12	45,245.00	1.03	2,436.01	53,715.13	(3,715.13)
6121- FOOD	4,000.00	0.00	8,824.95	2,600.00	2.21	0.00	8,824.95	(4,824.95)
6122- KITCHEN SUPPLIES	1,000.00	0.00	2,065.42	1,000.00	2.07	(48.71)	2,016.71	(1,016.71)
6130- PROGRAM SUPPLIES	52,003.00	27,433.44	101,935.01	47,130.00	1.96	14,088.57	116,023.58	(64,020.58)
6132- MEDICAL & DENTAL SUPPLIES	7,195.00	0.00	2,688.33	6,476.00	0.37	192.61	2,880.94	4,314.06
6134- INSTRUCTIONAL SUPPLIES	22,200.00	2,132.11	6,648.25	20,013.00	0.30	12,926.06	19,574.31	2,625.69
6140- CUSTODIAL SUPPLIES	20,200.00	277.76	18,950.28	18,180.00	0.94	0.00	18,950.28	1,249.72
6142- LINEN/LAUNDRY	1,200.00	0.00	0.00	1,080.00	0.00	0.00	0.00	1,200.00
6143- FURNISHINGS	0.00	96.34	(5,833.70)	0.00	0.00	96.34	(5,737.36)	5,737.36
6150- UNIFORM RENTAL/PURCHASE	300.00	0.00	222.00	300.00	0.74	0.00	222.00	78.00
6170- POSTAGE & SHIPPING	900.00	0.00	601.21	825.00	0.67	0.00	601.21	298.79
6180- EQUIPMENT RENTAL	31,200.00	714.29	14,615.01	28,405.00	0.47	0.00	14,615.01	16,584.99
6181- EQUIPMENT MAINTENANCE	13,700.00	1,511.67	10,829.44	12,350.00	0.79	1,770.37	12,599.81	1,100.19
6221- EQUIPMENT OVER > \$5000	0.00	15,866.99	15,866.99	0.00	0.00	22,167.33	38,034.32	(38,034.32)
6310- PRINTING & PUBLICATIONS	5,500.00	190.81	4,565.37	5,500.00	0.83	521.03	5,086.40	413.60
6312- ADVERTISING & PROMOTION	1,000.00	88.04	150.04	1,000.00	0.15	0.00	150.04	849.96
6320- TELEPHONE	48,000.00	(8,922.03)	91,308.42	44,000.00	1.90	0.00	91,308.42	(43,308.42)
6410- RENT	113,786.00	14,870.50	155,528.01	104,104.00	1.37	0.00	155,528.01	(41,742.01)
6420- UTILITIES/ DISPOSAL	76,404.00	7,210.59	65,713.31	70,037.00	0.86	0.00	65,713.31	10,690.69
6432- BUILDING REPAIRS/ MAINTENANCE	45,000.00	3,219.84	42,896.70	41,250.00	0.95	34,621.28	77,517.98	(32,517.98)
6433- GROUNDS MAINTENANCE	21,652.00	3,300.96	18,777.01	19,846.75	0.87	0.00	18,777.01	2,874.99
6436- PEST CONTROL	5,292.00	590.61	4,583.68	4,851.00	0.87	0.00	4,583.68	708.32
6437- BURGLAR & FIRE ALARM	1,630.00	119.47	2,843.49	1,598.00	1.74	0.00	2,843.49	(1,213.49)
6440- PROPERTY INSURANCE	7,772.00	884.18	7,419.21	5,169.00	0.95	0.00	7,419.21	352.79
6520- CONSULTANTS	0.00	3,477.50	3,477.50	0.00	0.00	0.00	3,477.50	(3,477.50)
6522- CONSULTANT EXPENSES	0.00	480.89	946.72	0.00	0.00	0.00	946.72	(946.72)
6524- CONTRACTS	41,930.00	0.00	36,740.49	34,359.00	0.88	4,330.00	41,070.49	859.51
6530- LEGAL	0.00	0.00	2,143.75	2,134.00	0.00	0.00	2,143.75	(2,143.75)
6540- CUSTODIAL SERVICES	0.00	3,081.75	17,131.08	0.00	0.00	1,440.00	18,571.08	(18,571.08)
6555- MEDICAL SCREENING/DEAT/STAFF	1,500.00	430.00	3,550.00	1,400.00	2.37	0.00	3,550.00	(2,050.00)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
311 0 HEAD START-MADERA REGIONAL								
6610- GAS & OIL	2,100.00	653.87	6,917.70	1,925.00	3.29	0.00	6,917.70	(4,817.70)
6620- VEHICLE INSURANCE	13,992.00	1,388.30	14,897.42	12,826.00	1.06	0.00	14,897.42	(905.42)
6640- VEHICLE REPAIR & MAINTENANCE	6,000.00	2,872.42	13,252.62	5,500.00	2.21	0.00	13,252.62	(7,252.62)
6712- STAFF TRAVEL-LOCAL	4,300.00	202.10	3,023.57	3,870.00	0.70	0.00	3,023.57	1,276.43
6714- STAFF TRAVEL-OUT OF AREA	9,500.00	0.00	0.00	9,500.00	0.00	0.00	0.00	9,500.00
6722- PER DIEM - STAFF	100.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
6742- TRAINING - STAFF	10,000.00	0.00	897.49	10,000.00	0.09	5,147.00	6,044.49	3,955.51
6750- FIELD TRIPS	2,800.00	0.00	0.00	2,800.00	0.00	0.00	0.00	2,800.00
6832- LIABILITY INSURANCE	840.00	26.93	295.44	770.00	0.35	0.00	295.44	544.56
6834- STUDENT ACTIVITY INSURANCE	2,010.00	0.00	1,242.95	1,809.00	0.62	0.00	1,242.95	767.05
6840- PROPERTY TAXES	0.00	0.00	2.23	0.00	0.00	0.00	2.23	(2.23)
6850- FEES & LICENSES	5,374.00	1,499.00	7,285.82	4,927.00	1.36	0.00	7,285.82	(1,911.82)
6852- FINGERPRINT	1,500.00	148.75	1,266.50	1,500.00	0.84	0.00	1,266.50	233.50
6875- EMPLOYEE HEALTH & WELFARE COSTS	12,000.00	2,256.11	6,069.95	12,000.00	0.51	4,230.37	10,300.32	1,699.68
7111- PARENT MILEAGE	1,200.00	0.00	41.20	1,080.00	0.03	0.00	41.20	1,158.80
7112- PARENT INVOLVEMENT	8,100.00	0.00	0.00	7,290.00	0.00	0.00	0.00	8,100.00
7114- PC ALLOWANCE	3,300.00	150.00	1,675.98	2,970.00	0.51	0.00	1,675.98	1,624.02
7116- POLICY COUNCIL FOOD ALLOWANCE	1,000.00	0.00	0.00	917.00	0.00	0.00	0.00	1,000.00
8110- IN KIND SALARIES	85,394.00	82,589.67	472,122.13	76,951.00	5.53	0.00	472,122.13	(386,728.13)
8120- IN KIND RENT	318,251.00	19,826.55	218,092.05	286,788.00	0.69	0.00	218,092.05	100,158.95
8130- IN KIND - OTHER	635,406.00	0.00	1,152.00	572,589.00	0.00	0.00	1,152.00	634,254.00
9010- INDIRECT COST ALLOCATION	342,829.00	33,078.95	266,546.42	311,303.00	0.78	0.00	266,546.42	76,282.58
Total Expenses	<u>5,149,231.00</u>	<u>497,909.18</u>	<u>3,902,861.12</u>	<u>4,668,538.10</u>	<u>0.76</u>	<u>105,824.85</u>	<u>4,008,685.97</u>	<u>1,140,545.03</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>16,957.95</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(105,824.85)</u>	<u>(105,824.85)</u>	<u>105,824.85</u>
Beginning Net Assets - Unrestricted	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Board Designated	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Ending Net Assets	<u>0.00</u>	<u>16,957.95</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(105,824.85)</u>	<u>(105,824.85)</u>	<u>105,824.85</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

312 0 EARLY HEAD START - MADERA	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	608,451.00	51,870.27	535,200.04	0.00	(0.88)	0.00	535,200.04	73,250.96
4220- IN KIND CONTRIBUTIONS	155,456.00	4,147.52	84,839.07	0.00	(0.55)	0.00	84,839.07	70,616.93
Total Revenues	<u>763,907.00</u>	<u>56,017.79</u>	<u>620,039.11</u>	<u>0.00</u>	<u>(0.81)</u>	<u>0.00</u>	<u>620,039.11</u>	<u>143,867.89</u>
Expenses								
5010- SALARIES & WAGES	278,788.00	29,795.99	277,915.90	0.00	1.00	0.00	277,915.90	872.10
5020- ACCRUED VACATION PAY	15,523.00	2,249.65	18,106.35	0.00	1.17	0.00	18,106.35	(2,583.35)
5112- HEALTH INSURANCE	14,253.00	2,172.68	25,691.04	0.00	1.80	0.00	25,691.04	(11,438.04)
5114- WORKER'S COMPENSATION	3,088.00	294.82	2,445.88	0.00	0.79	0.00	2,445.88	642.12
5116- PENSION	16,716.00	1,964.70	17,675.70	0.00	1.06	0.00	17,675.70	(959.70)
5122- FICA	21,838.00	2,525.73	22,097.56	0.00	1.01	0.00	22,097.56	(259.56)
5124- SUI	5,862.00	52.95	2,599.51	0.00	0.44	0.00	2,599.51	3,262.49
5130- ACCRUED VACATION FRINGE	0.00	172.08	1,385.09	0.00	0.00	0.00	1,385.09	(1,385.09)
6110- OFFICE SUPPLIES	10,500.00	1.82	1,883.19	0.00	0.18	1,267.02	3,150.21	7,349.79
6112- DATA PROCESSING SUPPLIES	5,000.00	226.86	5,387.04	0.00	1.08	1,901.82	7,288.86	(2,288.86)
6121- FOOD	0.00	0.00	42.57	0.00	0.00	0.00	42.57	(42.57)
6122- KITCHEN SUPPLIES	1,776.00	0.00	0.00	0.00	0.00	0.00	0.00	1,776.00
6130- PROGRAM SUPPLIES	28,406.00	337.09	7,087.97	0.00	0.25	13.42	7,101.39	21,304.61
6132- MEDICAL & DENTAL SUPPLIES	8,400.00	0.00	1,402.07	0.00	0.17	2,847.65	4,249.72	4,150.28
6134- INSTRUCTIONAL SUPPLIES	4,200.00	0.00	4,179.77	0.00	1.00	0.00	4,179.77	20.23
6140- CUSTODIAL SUPPLIES	2,400.00	0.00	442.79	0.00	0.18	0.00	442.79	1,957.21
6143- FURNISHINGS	0.00	0.00	2,128.20	0.00	0.00	0.00	2,128.20	(2,128.20)
6170- POSTAGE & SHIPPING	300.00	0.00	0.06	0.00	0.00	0.00	0.06	299.94
6180- EQUIPMENT RENTAL	3,240.00	0.00	2,875.64	0.00	0.89	0.00	2,875.64	364.36
6181- EQUIPMENT MAINTENANCE	6,600.00	1.92	188.71	0.00	0.03	0.00	188.71	6,411.29
6310- PRINTING & PUBLICATIONS	840.00	0.00	216.99	0.00	0.26	0.00	216.99	623.01
6312- ADVERTISING & PROMOTION	0.00	0.00	62.00	0.00	0.00	0.00	62.00	(62.00)
6320- TELEPHONE	26,400.00	1,474.08	19,804.40	0.00	0.75	0.00	19,804.40	6,595.60
6410- RENT	56,220.00	4,511.36	47,437.22	0.00	0.84	0.00	47,437.22	8,782.78
6420- UTILITIES/ DISPOSAL	9,600.00	289.62	10,631.51	0.00	1.11	0.00	10,631.51	(1,031.51)
6432- BUILDING REPAIRS/ MAINTENANCE	900.00	0.00	2,726.57	0.00	3.03	1,183.18	3,909.75	(3,009.75)
6433- GROUNDS MAINTENANCE	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	1,200.00
6436- PEST CONTROL	600.00	112.50	787.10	0.00	1.31	0.00	787.10	(187.10)
6437- BURGLAR & FIRE ALARM	216.00	0.00	154.58	0.00	0.72	0.00	154.58	61.42
6440- PROPERTY INSURANCE	2,880.00	192.63	2,397.76	0.00	0.83	0.00	2,397.76	482.24
6520- CONSULTANTS	0.00	0.00	325.00	0.00	0.00	2,000.00	2,325.00	(2,325.00)
6522- CONSULTANT EXPENSES	0.00	0.00	12.32	0.00	0.00	0.00	12.32	(12.32)
6524- CONTRACTS	10,168.00	0.00	0.00	0.00	0.00	0.00	0.00	10,168.00
6530- LEGAL	500.00	0.00	0.00	0.00	0.00	0.00	0.00	500.00
6540- CUSTODIAL SERVICES	0.00	103.50	1,162.53	0.00	0.00	0.00	1,162.53	(1,162.53)
6610- GAS & OIL	420.00	55.05	347.41	0.00	0.83	0.00	347.41	72.59
6620- VEHICLE INSURANCE	1,740.00	188.44	1,976.43	0.00	1.14	0.00	1,976.43	(236.43)
6640- VEHICLE REPAIR & MAINTENANCE	1,500.00	573.74	4,821.40	0.00	3.21	0.00	4,821.40	(3,321.40)
6712- STAFF TRAVEL-LOCAL	1,218.00	0.00	0.00	0.00	0.00	0.00	0.00	1,218.00

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
312 0 EARLY HEAD START - MADERA								
6714- STAFF TRAVEL-OUT OF AREA	3,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,000.00
6742- TRAINING - STAFF	6,000.00	0.00	3,119.05	0.00	0.52	0.00	3,119.05	2,880.95
6748- EDUCATION REIMBURSEMENT	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00
6750- FIELD TRIPS	1,260.00	0.00	0.00	0.00	0.00	0.00	0.00	1,260.00
6834- STUDENT ACTIVITY INSURANCE	732.00	35.09	418.58	0.00	0.57	0.00	418.58	313.42
6840- PROPERTY TAXES	0.00	0.00	0.07	0.00	0.00	0.00	0.07	(0.07)
6850- FEES & LICENSES	1,200.00	0.00	255.58	0.00	0.21	0.00	255.58	944.42
6875- EMPLOYEE HEALTH & WELFARE	0.00	0.00	217.62	0.00	0.00	9.84	227.46	(227.46)
7111- PARENT MILEAGE	56.00	0.00	0.00	0.00	0.00	0.00	0.00	56.00
7112- PARENT INVOLVEMENT	3,060.00	0.00	0.00	0.00	0.00	0.00	0.00	3,060.00
7114- PC ALLOWANCE	100.00	30.00	150.00	0.00	1.50	0.00	150.00	(50.00)
8110- IN KIND SALARIES	154,356.00	4,147.52	84,839.07	0.00	0.55	0.00	84,839.07	69,516.93
8130- IN KIND - OTHER	1,100.00	0.00	0.00	0.00	0.00	0.00	0.00	1,100.00
9010- INDIRECT COST ALLOCATION	50,751.00	4,326.48	44,640.88	0.00	0.88	0.00	44,640.88	6,110.12
Total Expenses	<u>763,907.00</u>	<u>55,836.30</u>	<u>620,039.11</u>	<u>0.00</u>	<u>0.81</u>	<u>9,222.93</u>	<u>629,262.04</u>	<u>134,644.96</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>181.49</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(9,222.93)</u>	<u>(9,222.93)</u>	<u>9,222.93</u>
Beginning Net Assets - Unrestricted	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Board Designated	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Ending Net Assets	<u>0.00</u>	<u>181.49</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(9,222.93)</u>	<u>(9,222.93)</u>	<u>9,222.93</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
319 0 MADERA STATE CSPP/RHS LAYERED								
Revenues								
4120- GRANT INCOME-STATE	761,724.00	0.00	641,503.00	0.00	(0.84)	0.00	641,503.00	120,221.00
Total Revenues	<u>761,724.00</u>	<u>0.00</u>	<u>641,503.00</u>	<u>0.00</u>	<u>(0.84)</u>	<u>0.00</u>	<u>641,503.00</u>	<u>120,221.00</u>
Expenses								
5010- SALARIES & WAGES	556,370.00	0.00	436,119.58	0.00	0.78	0.00	436,119.58	120,250.42
5020- ACCRUED VACATION PAY	0.00	0.00	26,960.94	0.00	0.00	0.00	26,960.94	(26,960.94)
5112- HEALTH INSURANCE	58,979.00	0.00	46,857.44	0.00	0.79	0.00	46,857.44	12,121.56
5114- WORKER'S COMPENSATION	18,310.00	0.00	12,904.70	0.00	0.70	0.00	12,904.70	5,405.30
5116- PENSION	21,121.00	0.00	23,201.61	0.00	1.10	0.00	23,201.61	(2,080.61)
5122- FICA	36,997.00	0.00	34,219.46	0.00	0.92	0.00	34,219.46	2,777.54
5124- SUI	6,413.00	0.00	5,668.88	0.00	0.88	0.00	5,668.88	744.12
5130- ACCRUED VACATION FICA	0.00	0.00	2,062.39	0.00	0.00	0.00	2,062.39	(2,062.39)
9010- INDIRECT COST ALLOCATION	63,534.00	0.00	53,508.00	0.00	0.84	0.00	53,508.00	10,026.00
Total Expenses	<u>761,724.00</u>	<u>0.00</u>	<u>641,503.00</u>	<u>0.00</u>	<u>0.84</u>	<u>0.00</u>	<u>641,503.00</u>	<u>120,221.00</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
356 0 REGIONAL QRIS FIRST5 CSPP								
Revenues								
4110- GRANT INCOME-FEDERAL	36,500.00	0.00	36,500.00	0.00	(1.00)	0.00	36,500.00	0.00
Total Revenues	<u>36,500.00</u>	<u>0.00</u>	<u>36,500.00</u>	<u>0.00</u>	<u>(1.00)</u>	<u>0.00</u>	<u>36,500.00</u>	<u>0.00</u>
Expenses								
6130- PROGRAM SUPPLIES	33,456.00	0.00	0.00	0.00	0.00	0.00	0.00	33,456.00
9010- INDIRECT COST ALLOCATION	3,044.00	0.00	0.00	0.00	0.00	0.00	0.00	3,044.00
Total Expenses	<u>36,500.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>36,500.00</u>
Excess Revenue Over (Under) Expenditures	0.00	0.00	36,500.00	0.00	0.00	0.00	36,500.00	(36,500.00)
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	0.00	36,500.00	0.00	0.00	0.00	36,500.00	(36,500.00)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

380 0 MADERA REGIONAL HS BLENDED	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	0.00	141,337.30	461,565.60	0.00	0.00	0.00	461,565.60	(461,565.60)
Total Revenues	<u>0.00</u>	<u>141,337.30</u>	<u>461,565.60</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>461,565.60</u>	<u>(461,565.60)</u>
Expenses								
5010- SALARIES & WAGES	0.00	95,803.14	205,380.96	0.00	0.00	0.00	205,380.96	(205,380.96)
5020- ACCRUED VACATION PAY	0.00	6,567.83	13,572.28	0.00	0.00	0.00	13,572.28	(13,572.28)
5112- HEALTH INSURANCE	0.00	7,325.56	20,043.30	0.00	0.00	0.00	20,043.30	(20,043.30)
5114- WORKER'S COMPENSATION	0.00	3,088.30	6,395.77	0.00	0.00	0.00	6,395.77	(6,395.77)
5116- PENSION	0.00	4,892.16	10,597.05	0.00	0.00	0.00	10,597.05	(10,597.05)
5122- FICA	0.00	8,057.41	16,817.63	0.00	0.00	0.00	16,817.63	(16,817.63)
5124- SUI	0.00	479.46	3,782.68	0.00	0.00	0.00	3,782.68	(3,782.68)
5130- ACCRUED VACATION FICA	0.00	502.38	1,038.19	0.00	0.00	0.00	1,038.19	(1,038.19)
6110- OFFICE SUPPLIES	0.00	0.00	1,758.06	0.00	0.00	15.69	1,773.75	(1,773.75)
6112- DATA PROCESSING SUPPLIES	0.00	0.00	4,441.08	0.00	0.00	0.00	4,441.08	(4,441.08)
6121- FOOD	0.00	0.00	1,072.21	0.00	0.00	0.00	1,072.21	(1,072.21)
6122- KITCHEN SUPPLIES	0.00	0.00	634.98	0.00	0.00	0.00	634.98	(634.98)
6130- PROGRAM SUPPLIES	0.00	0.00	9,370.07	0.00	0.00	0.00	9,370.07	(9,370.07)
6134- INSTRUCTIONAL SUPPLIES	0.00	0.00	1,377.24	0.00	0.00	0.00	1,377.24	(1,377.24)
6140- CUSTODIAL SUPPLIES	0.00	0.00	2,982.28	0.00	0.00	0.00	2,982.28	(2,982.28)
6180- EQUIPMENT RENTAL	0.00	0.00	3,088.69	0.00	0.00	0.00	3,088.69	(3,088.69)
6181- EQUIPMENT MAINTENANCE	0.00	0.00	3,099.58	0.00	0.00	0.00	3,099.58	(3,099.58)
6320- TELEPHONE	0.00	139.17	45,157.14	0.00	0.00	0.00	45,157.14	(45,157.14)
6410- RENT	0.00	2,364.06	30,585.10	0.00	0.00	0.00	30,585.10	(30,585.10)
6420- UTILITIES/ DISPOSAL	0.00	0.00	21,824.58	0.00	0.00	0.00	21,824.58	(21,824.58)
6432- BUILDING REPAIRS/ MAINTENANCE	0.00	0.00	5,764.84	0.00	0.00	0.00	5,764.84	(5,764.84)
6433- GROUNDS MAINTENANCE	0.00	0.00	6,342.26	0.00	0.00	0.00	6,342.26	(6,342.26)
6436- PEST CONTROL	0.00	0.00	950.43	0.00	0.00	0.00	950.43	(950.43)
6437- BURGLAR & FIRE ALARM	0.00	0.00	790.44	0.00	0.00	0.00	790.44	(790.44)
6440- PROPERTY INSURANCE	0.00	0.00	2,952.19	0.00	0.00	0.00	2,952.19	(2,952.19)
6520- CONSULTANTS	0.00	0.00	858.54	0.00	0.00	0.00	858.54	(858.54)
6522- CONSULTANT EXPENSES	0.00	0.00	187.65	0.00	0.00	0.00	187.65	(187.65)
6540- CUSTODIAL SERVICES	0.00	0.00	165.77	0.00	0.00	0.00	165.77	(165.77)
6712- STAFF TRAVEL-LOCAL	0.00	0.00	372.38	0.00	0.00	0.00	372.38	(372.38)
6742- TRAINING - STAFF	0.00	0.00	9.39	0.00	0.00	0.00	9.39	(9.39)
6834- STUDENT ACTIVITY INSURANCE	0.00	0.00	403.52	0.00	0.00	0.00	403.52	(403.52)
6850- FEES & LICENSES	0.00	0.00	152.56	0.00	0.00	0.00	152.56	(152.56)
6852- FINGERPRINT	0.00	0.00	110.64	0.00	0.00	0.00	110.64	(110.64)
6875- EMPLOYEE HEALTH & WELFARE	0.00	0.00	713.04	0.00	0.00	0.00	713.04	(713.04)
7114- PC ALLOWANCE	0.00	0.00	274.02	0.00	0.00	0.00	274.02	(274.02)
9010- INDIRECT COST ALLOCATION	0.00	11,788.91	38,499.06	0.00	0.00	0.00	38,499.06	(38,499.06)
Total Expenses	<u>0.00</u>	<u>141,008.38</u>	<u>461,565.60</u>	<u>0.00</u>	<u>0.00</u>	<u>15.69</u>	<u>461,581.29</u>	<u>(461,581.29)</u>
Excess Revenue Over (Under) Expenditures	0.00	328.92	0.00	0.00	0.00	(15.69)	(15.69)	15.69

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

380 0 MADERA REGIONAL HS BLENDED	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	328.92	0.00	0.00	0.00	(15.69)	(15.69)	15.69

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
814 0 ARP COVID - REGIONAL								
Revenues								
4110- GRANT INCOME-FEDERAL	344,592.00	657.08	263,644.33	0.00	(0.77)	0.00	263,644.33	80,947.67
Total Revenues	<u>344,592.00</u>	<u>657.08</u>	<u>263,644.33</u>	<u>0.00</u>	<u>(0.77)</u>	<u>0.00</u>	<u>263,644.33</u>	<u>80,947.67</u>
Expenses								
5010- SALARIES & WAGES	232,168.00	500.00	182,000.12	0.00	0.78	0.00	182,000.12	50,167.88
5020- ACCRUED VACATION PAY	14,514.00	0.00	9,724.91	0.00	0.67	0.00	9,724.91	4,789.09
5112- HEALTH INSURANCE	21,020.00	0.00	17,060.15	0.00	0.81	0.00	17,060.15	3,959.85
5114- WORKER'S COMPENSATION	9,136.00	19.17	5,681.64	0.00	0.62	0.00	5,681.64	3,454.36
5116- PENSION	14,156.00	0.00	10,372.52	0.00	0.73	0.00	10,372.52	3,783.48
5122- FICA	18,444.00	38.25	14,471.74	0.00	0.78	0.00	14,471.74	3,972.26
5124- SUI	0.00	0.00	861.90	0.00	0.00	0.00	861.90	(861.90)
5130- ACCRUED VACATION FICA	0.00	0.00	743.96	0.00	0.00	0.00	743.96	(743.96)
6130- PROGRAM SUPPLIES	6,412.00	0.00	692.04	0.00	0.11	0.00	692.04	5,719.96
6850- FEES & LICENSES	0.00	0.00	44.85	0.00	0.00	0.00	44.85	(44.85)
9010- INDIRECT COST ALLOCATION	28,742.00	54.81	21,990.50	0.00	0.77	0.00	21,990.50	6,751.50
Total Expenses	<u>344,592.00</u>	<u>612.23</u>	<u>263,644.33</u>	<u>0.00</u>	<u>0.77</u>	<u>0.00</u>	<u>263,644.33</u>	<u>80,947.67</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>44.85</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>44.85</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

815 0 Regional SCOE CSPP Covid	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	0.00	0.00	11,288.32	0.00	0.00	0.00	11,288.32	(11,288.32)
4120- GRANT INCOME-STATE	54,023.00	0.00	0.00	0.00	0.00	0.00	0.00	54,023.00
Total Revenues	<u>54,023.00</u>	<u>0.00</u>	<u>11,288.32</u>	<u>0.00</u>	<u>(0.21)</u>	<u>0.00</u>	<u>11,288.32</u>	<u>42,734.68</u>
Expenses								
5010- SALARIES & WAGES	12,605.00	0.00	9,340.00	0.00	0.74	0.00	9,340.00	3,265.00
5114- WORKER'S COMPENSATION	432.00	0.00	292.03	0.00	0.68	0.00	292.03	139.97
5116- PENSION	498.00	0.00	377.00	0.00	0.76	0.00	377.00	121.00
5122- FICA	872.00	0.00	714.47	0.00	0.82	0.00	714.47	157.53
5124- SUI	151.00	0.00	27.28	0.00	0.18	0.00	27.28	123.72
6130- PROGRAM SUPPLIES	36,892.00	0.00	0.00	0.00	0.00	7,103.49	7,103.49	29,788.51
6134- INSTRUCTIONAL SUPPLIES	0.00	0.00	0.00	0.00	0.00	2,904.43	2,904.43	(2,904.43)
9010- INDIRECT COST ALLOCATION	2,573.00	0.00	537.54	0.00	0.21	0.00	537.54	2,035.46
Total Expenses	<u>54,023.00</u>	<u>0.00</u>	<u>11,288.32</u>	<u>0.00</u>	<u>0.21</u>	<u>10,007.92</u>	<u>21,296.24</u>	<u>32,726.76</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(10,007.92)</u>	<u>(10,007.92)</u>	<u>10,007.92</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(10,007.92)</u>	<u>(10,007.92)</u>	<u>10,007.92</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
118 0 CRRSA COVID-19								
Revenues								
4110- GRANT INCOME-FEDERAL	86,679.00	7,538.85	63,503.86	0.00	(0.73)	0.00	63,503.86	23,175.14
Total Revenues	<u>86,679.00</u>	<u>7,538.85</u>	<u>63,503.86</u>	<u>0.00</u>	<u>(0.73)</u>	<u>0.00</u>	<u>63,503.86</u>	<u>23,175.14</u>
Expenses								
6112- DATA PROCESSING SUPPLIES	0.00	0.00	4,354.88	0.00	0.00	0.00	4,354.88	(4,354.88)
6130- PROGRAM SUPPLIES	55,449.00	5,220.35	9,576.68	0.00	0.17	5,994.37	15,571.05	39,877.95
6132- MEDICAL & DENTAL SUPPLIES	0.00	0.00	18,223.42	0.00	0.00	0.00	18,223.42	(18,223.42)
6134- INSTRUCTIONAL SUPPLIES	0.00	0.00	0.00	0.00	0.00	2,095.25	2,095.25	(2,095.25)
6524- CONTRACTS	0.00	0.00	3,521.46	0.00	0.00	0.00	3,521.46	(3,521.46)
6742- TRAINING - STAFF	24,000.00	0.00	22,530.58	0.00	0.94	0.00	22,530.58	1,469.42
9010- INDIRECT COST ALLOCATION	7,230.00	628.81	5,296.84	0.00	0.73	0.00	5,296.84	1,933.16
Total Expenses	<u>86,679.00</u>	<u>5,849.16</u>	<u>63,503.86</u>	<u>0.00</u>	<u>0.73</u>	<u>8,089.62</u>	<u>71,593.48</u>	<u>15,085.52</u>
Excess Revenue Over (Under) Expenditures	<u>0.00</u>	<u>1,689.69</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(8,089.62)</u>	<u>(8,089.62)</u>	<u>8,089.62</u>
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	<u>0.00</u>	<u>1,689.69</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>(8,089.62)</u>	<u>(8,089.62)</u>	<u>8,089.62</u>

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

Report Recap	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	5,245,800.00	617,029.20	4,642,595.09	3,732,210.10	(0.89)	0.00	4,642,595.09	603,204.91
4120- GRANT INCOME-STATE	815,747.00	0.00	641,503.00	0.00	(0.79)	0.00	641,503.00	174,244.00
4220- IN KIND CONTRIBUTIONS	1,194,507.00	106,563.74	776,205.25	936,328.00	(0.65)	0.00	776,205.25	418,301.75
Total Revenues	<u>7,256,054.00</u>	<u>723,592.94</u>	<u>6,060,303.34</u>	<u>4,668,538.10</u>	<u>(0.84)</u>	<u>0.00</u>	<u>6,060,303.34</u>	<u>1,195,750.66</u>
Expenses								
5010- SALARIES & WAGES	3,294,317.00	333,875.17	2,746,161.00	2,010,584.58	0.83	0.00	2,746,161.00	548,156.00
5020- ACCRUED VACATION PAY	180,184.00	21,958.32	160,767.88	136,308.00	0.89	0.00	160,767.88	19,416.12
5112- HEALTH INSURANCE	373,228.00	25,372.50	275,227.84	251,875.77	0.74	0.00	275,227.84	98,000.16
5114- WORKER'S COMPENSATION	118,495.00	10,117.46	78,505.23	79,473.00	0.66	0.00	78,505.23	39,989.77
5116- PENSION	191,872.00	16,909.53	147,727.70	126,557.00	0.77	0.00	147,727.70	44,144.30
5122- FICA	243,794.00	27,975.11	220,237.19	150,399.00	0.90	0.00	220,237.19	23,556.81
5124- SUI	44,934.00	1,617.70	34,943.37	29,513.00	0.78	0.00	34,943.37	9,990.63
5130- ACCRUED VACATION FICA	11,231.00	1,679.65	12,300.73	10,201.00	1.10	0.00	12,300.73	(1,069.73)
6110- OFFICE SUPPLIES	41,048.00	36.84	14,590.48	27,359.00	0.36	3,189.30	17,779.78	23,268.22
6112- DATA PROCESSING SUPPLIES	55,000.00	3,349.48	65,462.12	45,245.00	1.19	4,337.83	69,799.95	(14,799.95)
6121- FOOD	4,000.00	0.00	12,574.69	2,600.00	3.14	0.00	12,574.69	(8,574.69)
6122- KITCHEN SUPPLIES	2,776.00	0.00	2,700.40	1,000.00	0.97	(48.71)	2,651.69	124.31
6130- PROGRAM SUPPLIES	214,689.00	32,990.88	149,412.29	47,130.00	0.70	27,199.85	176,612.14	38,076.86
6132- MEDICAL & DENTAL SUPPLIES	15,595.00	0.00	22,313.82	6,476.00	1.43	3,040.26	25,354.08	(9,759.08)
6134- INSTRUCTIONAL SUPPLIES	26,400.00	2,132.11	12,205.26	20,013.00	0.46	17,925.74	30,131.00	(3,731.00)
6140- CUSTODIAL SUPPLIES	22,600.00	277.76	22,375.35	18,180.00	0.99	0.00	22,375.35	224.65
6142- LINEN/LAUNDRY	1,200.00	0.00	0.00	1,080.00	0.00	0.00	0.00	1,200.00
6143- FURNISHINGS	0.00	96.34	(3,705.50)	0.00	0.00	96.34	(3,609.16)	3,609.16
6150- UNIFORM RENTAL/PURCHASE	300.00	0.00	222.00	300.00	0.74	0.00	222.00	78.00
6170- POSTAGE & SHIPPING	1,200.00	0.00	601.27	825.00	0.50	0.00	601.27	598.73
6180- EQUIPMENT RENTAL	34,440.00	714.29	20,579.34	28,405.00	0.60	0.00	20,579.34	13,860.66
6181- EQUIPMENT MAINTENANCE	20,300.00	1,513.59	14,117.73	12,350.00	0.70	1,770.37	15,888.10	4,411.90
6221- EQUIPMENT OVER > \$5000	0.00	15,866.99	15,866.99	0.00	0.00	22,167.33	38,034.32	(38,034.32)
6310- PRINTING & PUBLICATIONS	8,783.00	190.81	4,782.36	5,500.00	0.54	521.03	5,303.39	3,479.61
6312- ADVERTISING & PROMOTION	1,000.00	88.04	212.04	1,000.00	0.21	0.00	212.04	787.96
6320- TELEPHONE	74,400.00	(7,308.78)	156,269.96	44,000.00	2.10	0.00	156,269.96	(81,869.96)
6410- RENT	171,006.00	21,745.92	233,550.33	104,104.00	1.37	0.00	233,550.33	(62,544.33)
6420- UTILITIES/ DISPOSAL	86,004.00	7,500.21	98,169.40	70,037.00	1.14	0.00	98,169.40	(12,165.40)
6432- BUILDING REPAIRS/ MAINTENANCE	45,900.00	3,219.84	51,388.11	41,250.00	1.12	35,804.46	87,192.57	(41,292.57)
6433- GROUNDS MAINTENANCE	22,852.00	3,300.96	25,119.27	19,846.75	1.10	0.00	25,119.27	(2,267.27)
6436- PEST CONTROL	5,892.00	703.11	6,321.21	4,851.00	1.07	0.00	6,321.21	(429.21)
6437- BURGLAR & FIRE ALARM	1,846.00	119.47	3,788.51	1,598.00	2.05	0.00	3,788.51	(1,942.51)
6440- PROPERTY INSURANCE	10,652.00	1,076.81	12,769.16	5,169.00	1.20	0.00	12,769.16	(2,117.16)
6520- CONSULTANTS	0.00	3,477.50	4,661.04	0.00	0.00	2,000.00	6,661.04	(6,661.04)
6522- CONSULTANT EXPENSES	0.00	480.89	1,146.69	0.00	0.00	0.00	1,146.69	(1,146.69)
6524- CONTRACTS	52,098.00	0.00	40,261.95	34,359.00	0.77	4,330.00	44,591.95	7,506.05
6530- LEGAL	500.00	0.00	2,143.75	2,134.00	4.29	0.00	2,143.75	(1,643.75)
6540- CUSTODIAL SERVICES	0.00	3,185.25	18,459.38	0.00	0.00	1,440.00	19,899.38	(19,899.38)

COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC.

Revenue & Expense with Encumbrances

From 6/01/2021 to 4/30/2022

Report Recap	Grant Budget	Current Month Actual	YTD Actual April 30, 2022	YTD Budget April 30, 2022	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
6555- MEDICAL SCREENING/DEAT/STAFF	1,500.00	430.00	3,550.00	1,400.00	2.37	0.00	3,550.00	(2,050.00)
6610- GAS & OIL	2,520.00	708.92	7,265.11	1,925.00	2.88	0.00	7,265.11	(4,745.11)
6620- VEHICLE INSURANCE	15,732.00	1,576.74	16,873.85	12,826.00	1.07	0.00	16,873.85	(1,141.85)
6640- VEHICLE REPAIR & MAINTENANCE	7,500.00	3,446.16	18,074.02	5,500.00	2.41	0.00	18,074.02	(10,574.02)
6712- STAFF TRAVEL-LOCAL	5,518.00	202.10	3,395.95	3,870.00	0.62	0.00	3,395.95	2,122.05
6714- STAFF TRAVEL-OUT OF AREA	22,650.00	0.00	0.00	9,500.00	0.00	0.00	0.00	22,650.00
6722- PER DIEM - STAFF	3,322.00	0.00	0.00	100.00	0.00	0.00	0.00	3,322.00
6742- TRAINING - STAFF	66,805.00	5,209.13	59,914.18	10,000.00	0.90	5,147.00	65,061.18	1,743.82
6748- EDUCATION REIMBURSEMENT	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.00
6750- FIELD TRIPS	4,060.00	0.00	0.00	2,800.00	0.00	0.00	0.00	4,060.00
6832- LIABILITY INSURANCE	840.00	26.93	295.44	770.00	0.35	0.00	295.44	544.56
6834- STUDENT ACTIVITY INSURANCE	2,742.00	35.09	2,065.05	1,809.00	0.75	0.00	2,065.05	676.95
6840- PROPERTY TAXES	0.00	0.00	2.30	0.00	0.00	0.00	2.30	(2.30)
6850- FEES & LICENSES	14,849.00	1,499.00	7,738.81	4,927.00	0.52	0.00	7,738.81	7,110.19
6852- FINGERPRINT	1,500.00	148.75	1,377.14	1,500.00	0.92	0.00	1,377.14	122.86
6875- EMPLOYEE HEALTH & WELFARE	12,000.00	2,256.11	7,000.61	12,000.00	0.58	4,240.21	11,240.82	759.18
7111- PARENT MILEAGE	1,256.00	0.00	41.20	1,080.00	0.03	0.00	41.20	1,214.80
7112- PARENT INVOLVEMENT	11,160.00	0.00	0.00	7,290.00	0.00	0.00	0.00	11,160.00
7114- PC ALLOWANCE	3,400.00	180.00	2,100.00	2,970.00	0.62	0.00	2,100.00	1,300.00
7116- POLICY COUNCIL FOOD ALLOWANCE	1,000.00	0.00	0.00	917.00	0.00	0.00	0.00	1,000.00
8110- IN KIND SALARIES	239,750.00	86,737.19	556,961.20	76,951.00	2.32	0.00	556,961.20	(317,211.20)
8120- IN KIND RENT	318,251.00	19,826.55	218,092.05	286,788.00	0.69	0.00	218,092.05	100,158.95
8130- IN KIND - OTHER	636,506.00	0.00	1,152.00	572,589.00	0.00	0.00	1,152.00	635,354.00
9010- INDIRECT COST ALLOCATION	503,657.00	50,142.77	435,973.24	311,303.00	0.87	0.00	435,973.24	67,683.76
Total Expenses	7,256,054.00	706,689.19	6,026,102.49	4,668,538.10	0.83	133,161.01	6,159,263.50	1,096,790.50
Excess Revenue Over (Under) Expenditures	0.00	16,903.75	34,200.85	0.00	0.00	(133,161.01)	(98,960.16)	98,960.16
Beginning Net Assets - Unrestricted	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Beginning Net Assets - Board Designated	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ending Net Assets	0.00	16,903.75	34,200.85	0.00	0.00	(133,161.01)	(98,960.16)	98,960.16

FUND #311 Basic
Madera Regional Head Start
Budget to Actual
For the period ending April 30, 2022

Account	Grant	Current	Current Mth	Prior Mth	YTD				
Description	Budget	Period	YTD	YTD	Budget	% Spent	Encumbered	Actual + Encumbered	Balance
Revenues									
4110- GRANT INCOME-FEDERAL	4,110,180.00	553,788.21	3,673,060.54	3,119,272.33	3,732,210.10	92%	115,472.03	3,788,532.57	(321,647.43)
4210- DONATIONS	-	-	-	-	-	0%	-	-	-
4220- IN KIND CONTRIBUTIONS	1,039,051.00	177,302.08	691,366.18	514,064.10	936,328.00	67%	-	691,366.18	(347,684.82)
4330- SALE OF ASSETS	-	-	-	-	-	0%	-	-	-
4350- RENTAL INCOME	-	-	-	-	-	0%	-	-	-
4390- MISC INCOME	-	-	-	-	-	0%	-	-	-
Total Revenues	5,149,231.00	731,090.29	4,364,426.72	3,633,336.43	4,668,538.10	85%	115,472.03	4,479,898.75	(669,332.25)
5010 SALARIES & WAGES	2,214,386.00	303,579.18	1,840,785.40	1,537,206.22	2,010,584.58	83%	-	1,840,785.40	(373,600.60)
5019- SALARIES & WAGES C19	-	-	-	-	-	0%	-	-	-
5020 ACCRUED VACATION PAY	150,147.00	19,708.67	105,975.68	86,267.01	136,308.00	71%	-	105,975.68	(44,171.32)
5112 HEALTH INSURANCE	233,273.89	23,199.82	185,619.21	162,419.39	251,875.77	80%	-	185,619.21	(47,654.68)
5114 WORKER'S COMPENSATION	74,620.70	9,803.47	57,180.98	47,377.51	79,473.00	77%	-	57,180.98	(17,439.72)
5115- Worker's Compensation C19	-	-	-	-	-	0%	-	-	-
5116 PENSION	123,934.08	12,304.14	96,100.87	83,796.73	126,557.00	78%	-	96,100.87	(27,833.21)
5117- Pension C19	-	-	-	-	-	0%	-	-	-
5121- FICA C19	-	-	-	-	-	0%	-	-	-
5122 FICA	165,643.00	25,411.13	148,733.96	123,322.83	150,399.00	90%	-	148,733.96	(16,909.04)
5123- SUI C19	-	-	-	-	-	0%	-	-	-
5124 SUI	32,508.00	1,564.75	25,785.80	24,221.05	29,513.00	79%	-	25,785.80	(6,722.20)
5130 ACCRUED VACATION FRINGE	11,231.00	1,507.57	8,109.29	6,601.72	10,201.00	72%	-	8,109.29	(3,121.71)
6110 OFFICE SUPPLIES	30,070.00	1,171.78	12,707.29	11,535.51	27,359.00	49%	1,922.28	14,629.57	(15,440.43)
6112 DATA PROCESSING	50,000.00	3,378.97	55,720.20	52,341.23	45,245.00	116%	2,436.01	58,156.21	8,156.21
6121 FOOD	4,000.00	-	9,897.16	9,897.16	2,600.00	247%	-	9,897.16	5,897.16
6122 KITCHEN SUPPLIES	1,000.00	-	2,700.40	2,700.40	1,000.00	265%	(48.71)	2,651.69	1,651.69
6130 PROGRAM SUPPLIES	52,003.00	28,908.65	105,471.38	76,562.73	47,130.00	230%	14,184.91	119,656.29	67,653.29
6132 MEDICAL & DENTAL SUPPLIES	7,195.00	-	2,688.33	2,688.33	6,476.00	40%	192.61	2,880.94	(4,314.06)
6134 INSTRUCTIONAL SUPPLIES	22,200.00	2,167.60	8,025.49	5,857.89	20,013.00	94%	12,926.06	20,951.55	(1,248.45)
6140 CUSTODIAL SUPPLIES	20,200.00	3,916.15	21,932.56	18,016.41	18,180.00	109%	-	21,932.56	1,732.56
6142 LINEN/LAUNDRY	1,200.00	-	-	-	1,080.00	0%	-	-	(1,200.00)
6150 UNIFORM RENTAL/PURCHASE	300.00	-	222.00	222.00	300.00	74%	-	222.00	(78.00)
6170 POSTAGE & SHIPPING	900.00	34.40	601.21	566.81	825.00	67%	-	601.21	(298.79)
6180 EQUIPMENT RENTAL	31,200.00	714.29	17,703.70	16,989.41	28,405.00	57%	-	17,703.70	(13,496.30)
6181 EQUIPMENT MAINTENANCE	13,700.00	1,511.67	13,929.02	12,417.35	12,350.00	115%	1,770.37	15,699.39	1,999.39
6221 EQUIPMENT OVER >\$5000	51,297.00	15,866.99	15,866.99	-	-	74%	22,167.33	38,034.32	(13,262.68)
6231- BUILDING RENOVATION	-	-	-	-	-	0%	-	-	-
6310 PRINTING & PUBLICATIONS	5,500.00	190.81	4,565.37	4,374.56	5,500.00	92%	521.03	5,086.40	(413.60)
6312 ADVERTISING & PROMOTION	1,000.00	88.04	150.04	62.00	1,000.00	15%	-	150.04	(849.96)
6320 TELEPHONE	48,000.00	965.65	136,465.56	135,499.91	44,000.00	284%	-	136,465.56	88,465.56
6410 RENT	113,786.00	17,234.56	186,113.11	168,878.55	104,104.00	164%	-	186,113.11	72,327.11
6420 UTILITIES/ DISPOSAL	76,404.00	7,219.55	87,537.89	80,318.34	70,037.00	115%	-	87,537.89	11,133.89
6432 BUILDING REPAIRS/ MAINTEN	72,039.00	3,219.84	48,661.54	45,441.70	41,250.00	116%	34,621.28	83,282.82	11,243.82
6433 GROUNDS MAINTENANCE	21,652.00	3,300.96	25,119.27	21,818.31	19,846.75	116%	-	25,119.27	3,467.27
6435 BUILDING IMPROVEMENTS	-	-	-	-	-	0%	-	-	-
6436 PEST CONTROL	5,292.00	590.61	5,534.11	4,943.50	4,851.00	105%	-	5,534.11	242.11
6437 BURGLAR & FIRE ALARM	1,630.00	119.47	3,633.93	3,514.46	1,598.00	223%	-	3,633.93	2,003.93
6440 PROPERTY INSURANCE	7,772.00	884.18	10,371.40	9,487.22	5,169.00	133%	-	10,371.40	2,599.40
6520 CONSULTANTS	-	3,477.50	4,336.04	858.54	-	0%	-	4,336.04	4,336.04
6522 CONSULTANT EXPENSES	-	480.89	1,134.37	653.48	-	0%	-	1,134.37	1,134.37
6524 CONTRACTS	41,930.00	2,826.19	36,740.49	33,914.30	34,359.00	98%	4,330.00	41,070.49	(859.51)
6530 LEGAL	-	-	2,143.75	2,143.75	2,134.00	0%	-	2,143.75	2,143.75
6540 CUSTODIAL SERVICES	-	3,081.75	17,296.85	14,215.10	-	0%	1,440.00	18,736.85	18,736.85
6555 MEDICAL SCREENING/DEAT/ST	1,500.00	430.00	3,550.00	3,120.00	1,400.00	237%	-	3,550.00	2,050.00
6562 MEDICAL EXAM	-	-	-	-	-	0%	-	-	-
6564 MEDICAL FOLLOW-UP	-	-	-	-	-	0%	-	-	-
6566 DENTAL EXAM	-	-	-	-	-	0%	-	-	-

FUND #311 Basic
Madera Regional Head Start
Budget to Actual
For the period ending April 30, 2022

Account	Grant	Current	Current Mth	Prior Mth	YTD		Actual +		
Description	Budget	Period	YTD	YTD	Budget	% Spent	Encumbered	Encumbered	Balance
6568 DENTAL FOLLOW-UP	-	-	-	-	-	0%	-	-	-
6610 GAS & OIL	2,100.00	795.97	6,917.70	6,121.73	1,925.00	329%	-	6,917.70	4,817.70
6620 VEHICLE INSURANCE	13,992.00	1,388.30	14,897.42	13,509.12	12,826.00	106%	-	14,897.42	905.42
6640 VEHICLE REPAIR & MAINTENA	6,000.00	2,895.42	13,252.62	10,357.20	5,500.00	221%	-	13,252.62	7,252.62
6712 STAFF TRAVEL-LOCAL	4,300.00	296.05	3,395.95	3,099.90	3,870.00	79%	-	3,395.95	(904.05)
6714 STAFF TRAVEL-OUT OF AREA	9,500.00	-	-	-	9,500.00	0%	-	-	(9,500.00)
6722 PER DIEM - STAFF	100.00	-	-	-	100.00	0%	-	-	(100.00)
6724 PER DIEM - PARENT	-	-	-	-	-	0%	-	-	-
6730 VOLUNTEER TRAVEL	-	-	-	-	-	0%	-	-	-
6742 TRAINING - STAFF	10,000.00	-	906.88	906.88	10,000.00	61%	5,147.00	6,053.88	(3,946.12)
6744 TRAINING VOLUNTEERS	-	-	-	-	-	0%	-	-	-
6746 TRAINING PARENTS	-	-	-	-	-	0%	-	-	-
6748 EDUCATION REIMBURSEMENT	-	-	-	-	-	0%	-	-	-
6750 FIELD TRIPS	2,800.00	-	-	-	2,800.00	0%	-	-	(2,800.00)
6810 BANK CHARGES	-	-	-	-	-	0%	-	-	-
6820 INTEREST CHARGES	-	-	-	-	-	0%	-	-	-
6832 LIABILITY INSURANCE	840.00	26.93	295.44	268.51	770.00	35%	-	295.44	(544.56)
6834 STUDENT ACTIVITY INSURANC	2,010.00	-	1,646.47	1,646.47	1,809.00	82%	-	1,646.47	(363.53)
6840 PROPERTY TAXES	-	-	2.23	2.23	-	0%	-	2.23	2.23
6850 FEES & LICENSES	5,374.00	2,103.59	7,438.38	5,334.79	4,927.00	138%	-	7,438.38	2,064.38
6851 CPR FEES	-	-	-	-	-	0%	-	-	-
6852 FINGER PRINTING	1,500.00	148.75	1,377.14	1,228.39	1,500.00	92%	-	1,377.14	(122.86)
6860 DEPRECIATION EXPENSE	-	-	-	-	-	0%	-	-	-
6870 EMPLOYEE RECOGNITION	-	-	-	-	-	0%	-	-	-
6875- EMPLOYEE HEALTH & WELFARE COSTS	12,000.00	2,256.11	6,782.99	4,526.88	12,000.00	92%	4,230.37	11,013.36	(986.64)
6880 VOLUNTEER RECONGNITION	-	-	-	-	-	0%	-	-	-
6892 CASH SHORT / OVER	-	-	-	-	-	0%	-	-	-
7110 PARENT ACTIVITIES	-	-	-	-	-	0%	-	-	-
7111 PARENT MILEAGE	1,200.00	-	41.20	41.20	1,080.00	3%	-	41.20	(1,158.80)
7112 PARENT INVOLVEMENT	8,100.00	-	-	-	7,290.00	0%	-	-	(8,100.00)
7114 PPC ALLOWANCE	3,300.00	150.00	1,950.00	1,800.00	2,970.00	59%	-	1,950.00	(1,350.00)
7115 PPC FOOD ALLOWANCE	-	-	-	-	-	0%	-	-	-
7116 POLICY COUN. FOOD ALLOWAN	1,000.00	-	-	-	917.00	0%	-	-	(1,000.00)
8110 IN KIND SALARIES	85,394.00	137,463.98	472,122.13	334,658.15	76,951.00	553%	-	472,122.13	386,728.13
8120 IN KIND RENT	318,251.00	39,653.10	218,092.05	178,438.95	286,788.00	69%	-	218,092.05	(100,158.95)
8130 IN KIND - OTHER	635,406.00	185.00	1,152.00	967.00	572,589.00	0%	-	1,152.00	(634,254.00)
9010 INDIRECT COST ALLOCATION	338,550.33	44,867.86	305,045.48	260,177.62	311,303.00	93%	9,631.49	314,676.97	(23,873.36)
Total Expenses	5,149,231.00	731,090.29	4,364,426.72	3,633,336.43	4,668,538.10	87%	115,472.03	4,479,898.75	(669,332.25)
Excess Revenue Over (Under) Expenditures	-	-	-	-	-	-	-	-	-

493,053.36	3,352,148.07	2,859,094.71		ADMINISTRATIVE EXPENSES	\$475,465.93
44,867.86	305,045.47	260,177.62	9.10%	PERCENT ADMINISTRATIVE	10.77%
				LIMIT IS 15%	

YTD Contract % 92.17%

**Fresno Migrant Head Start
Budget to Actual (331 Basic)
Period Ending Apr-22**

Account Description	Grant Budget	Current	Current Mth	Prior Month	YTD Budget	% Spent	Encumbered	YTD Actual +	
		Period	YTD	YTD				Encumbered	Budget Balance
REVENUES									
4110 GRANT INCOME-FEDERAL	4,652,471.00	371,158.06	2,348,121.80	1,976,963.74	2,192,314.00	50.47%	80,891.89	2,429,013.69	(2,223,457.31)
4130 GRANT INCOME-AREA	0.00	0.00				0.00%	0.00	0.00	0.00
4210 DONATIONS	0.00	0.00				0.00%	0.00	0.00	0.00
4220 IN KIND CONTRIBUTIONS	645,704.00	16,141.08	336,187.95	320,046.87	222,458.00	52.07%	0.00	336,187.95	(309,516.05)
4330- SALE OF ASSETS		0.00	2,250.00	2,250.00	0.00	0.00%	0.00	2,250.00	2,250.00
4390 MISC INCOME	0.00	0.00				0.00%	0.00	0.00	0.00
TOTAL REVENUES	5,298,175.00	387,299.14	2,686,559.75	2,299,260.61	2,414,772.00	50.71%	80,891.89	2,767,451.64	(2,530,723.36)
5010 SALARIES & WAGES	6A 2,781,656.00	193,538.92	1,283,575.50	1,090,036.58	1,245,971.00	46.14%	0.00	1,283,575.50	(1,498,080.50)
5012- DIRECTOR'S SALARY	6A 0.00	0.00				0.00%		0.00	0.00
5019- SALARIES & WAGES C19	6A 0.00	0.00				0.00%		0.00	0.00
5020 ACCRUED VACATION PAY	6A 169,703.00	12,364.71	77,287.45	64,922.74	75,833.00	45.54%	0.00	77,287.45	(92,415.55)
5112 HEALTH INSURANCE	6B 180,114.00	10,060.94	91,059.08	80,998.14	92,177.00	50.56%	0.00	91,059.08	(89,054.92)
5114 WORKER'S COMPENSATION	6B 111,323.00	4,477.99	35,505.74	31,027.75	49,859.00	31.89%	0.00	35,505.74	(75,817.26)
5115- Worker's Compensation C19	6B 0.00	0.00				0.00%		0.00	0.00
5116 PENSION	6B 158,842.00	7,985.17	79,708.93	71,723.76	70,479.00	50.18%	0.00	79,708.93	(79,133.07)
5117- Pension C19	6B 0.00	0.00				0.00%		0.00	0.00
5121- FICA C19	6B 0.00	0.00				0.00%		0.00	0.00
5122 FICA	6B 209,737.00	14,820.44	109,932.70	95,112.26	93,944.00	52.41%	0.00	109,932.70	(99,804.30)
5124 SUI	6B 41,926.00	6,437.31	11,784.73	5,347.42	6,044.00	28.11%	0.00	11,784.73	(30,141.27)
5125- DIRECTOR'S FRINGE	6B 0.00	0.00				0.00%		0.00	0.00
5130 ACCRUED VACATION FRINGE	6B 12,795.00	945.85	5,911.02	4,965.17	5,720.00	46.20%	0.00	5,911.02	(6,883.98)
6714 STAFF TRAVEL-OUT OF AREA	6C 0.00	0.00				0.00%		0.00	0.00
6722 PER DIEM - STAFF	6C 0.00	0.00				0.00%		0.00	0.00
6221 EQUIPMENT OVER > \$5000	6D 0.00	0.00				0.00%		0.00	0.00
6110 OFFICE SUPPLIES	6E 20,000.00	2,173.51	8,048.09	5,874.58	9,648.00	40.24%	2,847.17	10,895.26	(9,104.74)
6112 DATA PROCESSING SUPPLIES	6E 27,000.00	4,020.58	38,706.04	34,685.46	14,736.00	143.36%	45.00	38,751.04	11,751.04
6121 FOOD	6E 4,000.00	0.00	1,943.98	1,943.98	0.00	48.60%	0.00	1,943.98	(2,056.02)
6122 KITCHEN SUPPLIES	6E 1,050.00	2,928.95	3,043.79	114.84	0.00	289.88%	0.00	3,043.79	1,993.79
6130 PROGRAM SUPPLIES	6E 34,886.00	10,425.78	38,385.26	27,959.48	12,526.00	110.03%	4,831.98	43,217.24	8,331.24
6134 INSTRUCTIONAL SUPPLIES	6E 4,400.00	0.00	228.91	228.91	1,412.00	5.20%	0.00	228.91	(4,171.09)
6140 CUSTODIAL SUPPLIES	6E 38,285.00	619.89	10,097.53	9,477.64	17,598.00	26.37%	0.00	10,097.53	(28,187.47)
6142 LINEN/LAUNDRY	6E 0.00	0.00				0.00%		0.00	0.00
6170 POSTAGE & SHIPPING	6E 1,500.00	20.81	258.20	237.39	900.00	17.21%	0.00	258.20	(1,241.80)
6132 MEDICAL & DENTAL SUPPLIES	6H 140.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00	(140.00)
6150 UNIFORM RENTAL/PURCHASE	6H 0.00	0.00				0.00%		0.00	0.00
6180 EQUIPMENT RENTAL	6H 21,984.00	249.71	15,798.66	15,548.95	14,656.00	71.86%	0.00	15,798.66	(6,185.34)
6181 EQUIPMENT MAINTENANCE	6H 18,120.00	3,083.25	17,817.54	14,734.29	12,080.00	98.33%	0.00	17,817.54	(302.46)
6212 EQUIPMENT PURCHASES < \$500	6H 0.00	0.00				0.00%		0.00	0.00
6214 EQUIPMENT OVER > 500	6H 0.00	0.00				0.00%		0.00	0.00
6216 EQUIPMENT OVER > \$1000	6H 0.00	0.00				0.00%		0.00	0.00
6231 BUILDING RENOVATION	6H 0.00	0.00				0.00%		0.00	0.00
6232 BUILDING IMPROVEMENTS	6H 0.00	0.00				0.00%		0.00	0.00
6310 PRINTING & PUBLICATIONS	6H 7,000.00	712.20	3,114.61	2,402.41	7,000.00	44.49%	0.00	3,114.61	(3,885.39)
6312 ADVERTISING & PROMOTION	6H 250.00	0.00	0.00	0.00	250.00	0.00%	0.00	0.00	(250.00)
6320 TELEPHONE	6H 73,782.00	3,470.33	44,819.02	41,348.69	49,192.00	60.75%	0.00	44,819.02	(28,962.98)
6410 RENT	6H 77,036.00	8,391.92	67,751.52	59,359.60	51,357.00	87.95%	0.00	67,751.52	(9,284.48)
6420 UTILITIES/ DISPOSAL	6H 53,136.00	7,291.45	51,286.89	43,995.44	35,424.00	96.52%	0.00	51,286.89	(1,849.11)
6432 BUILDING REPAIRS/ MAINT	6H 57,000.00	11,708.26	40,192.82	28,484.56	38,016.00	70.51%	41,388.37	81,581.19	24,581.19
6433 GROUNDS MAINTENANCE	6H 17,940.00	2,379.85	23,607.28	21,227.43	11,960.00	131.59%	2,307.83	25,915.11	7,975.11
6436 PEST CONTROL	6H 6,600.00	4,917.45	8,659.45	3,742.00	4,400.00	131.20%	0.00	8,659.45	2,059.45
6437 BURGLAR & FIRE ALARM	6H 2,155.00	227.04	4,469.94	4,242.90	1,435.00	207.42%	0.00	4,469.94	2,314.94
6440 PROPERTY INSURANCE	6H 12,048.00	1,136.17	9,089.36	7,953.19	8,024.00	75.44%	0.00	9,089.36	(2,958.64)
6520 CONSULTANTS	6H 3,590.00	0.00	420.00	420.00	0.00	11.70%	18,880.00	19,300.00	15,710.00



BOARD OF DIRECTORS 2022 ATTENDANCE

Director	Area Represented	January	February	March	April	May	June	July	August	September	October	November	December
Public Officials													
Deborah Martinez A: Sharon Diaz	Department of Social Services	P	P	P	A	P							
David Hernandez <i>Secretary/Treasurer</i>	Madera Unified School District	P	P	P	P	P							
Leticia Gonzalez A: Robert Poythress	Madera County Board of Supervisors	P	P	P	P	P							
Steve Montes A: Artemio Villegas	Madera City Council	P	P	P	X	P							
Diana Palmer A: Kelly Smith	Chowchilla City Council	P	P	X	P	P							
Private Sector Officials													
Debi Bray	Madera Chamber of Commerce	P	P	P	X	P							
Alma Hernandez	Head Start Policy Council	X	X	P	X	P							
Donald Holley	Community Affairs	P	P	P	P	P							
Eric LiCalsi <i>Vice-Chairperson</i>	Attorney at Law	X	P	P	X	P							
Vicki Bandy	Early Childhood Education & Development	X	X	P	X	X							
Low-Income Target Area Officials													
Martha Garcia A: Joann Lorange	Central Madera/Alpha	X	P	P	P	P							
Tyson Pogue <i>Chairperson</i>	Eastern Madera County	P	P	P	P	P							
Richard Gutierrez	Eastside/Parksdale	P	P	P	P	X							
Molly Hernandez	Fairmead/Chowchilla	P	P	X	P	X							
Aurora Flores A: Octavio Pineda	Monroe/Washington	P	X	X	P	X							
<i>Total Directors</i>		11/15	12/15	12/15	10/15	11/15							

P = Primary Present | A = Alternate Present | X = Absent

Error Calculation Report (Alternative Payment)

Agency Name: Community Action Partnership of Madera (B509)

Vendor Number: B382

Report Month: October 2021

Total number of files reviewed **20**

Eligibility

Total number of files with Eligibility errors	0
Percentage of Eligibility errors	0%
Dollar value of Eligibility errors	0.00

Need

Total number of files with Need errors	0
Percentage of Need errors	0%
Dollar value of Need errors	0.00

Family / Parent Fee

Total number of files with Family/Parent Fee errors	0
Percentage of Family/Parent Fee errors	0%
Dollar value of Family/Parent Fee errors	0.00

Provider Reimbursement/Attendance

Total number of files with Provider Payment errors	1
Percentage of Provider Payment errors	100%
Dollar value of Provider Payment errors	87.88

TOTALS

Total payments	11,419.80
Total dollars paid in error	87.88
Percentage of total dollars paid in error	1%