# SLFRF Compliance Report - SLT-2640-P&E Report-Q3 2022 Report Period : Quarter 3 2022 (July-September)

# **Recipient Profile**

#### **Recipient Information**

| Recipient UEI                           | LXR2N7N93X84  |
|---|---|
| Recipient TIN                           | 356001130   |
| Recipient Legal Entity Name             | New Albany, Indiana   |
| Recipient Type                          | Metro City or County  |
| FAIN                                    |   |
| CFDA No./Assistance Listing             |   |
| Recipient Address                       | 311 Hauss Square, Room 323  |
| Recipient Address 2                     |   |
| Recipient Address 3                     |   |
| Recipient City                          | New Albany  |
| Recipient State/Territory               | IN  |
| Recipient Zip5                          | 47150   |
| Recipient Zip+4                         |   |
| Recipient Reporting Tier                | Tier 2. Metropolitan cities and counties with a population<br>below 250,000 residents which received more than \$10<br>million in SLFRF funding |
| Base Year Fiscal Year End Date          | 12/31/2022  |
| Discrepancies Explanation               | New Address is as follows.  142 E Main St New Albany, IN 47150  |
| Is the Recipient Registered in SAM.Gov? | Yes   |

# **Project Overview**

| Does your jurisdiction have projects to report as of this reporting period? | My jurisdiction has projects to report |
|---|--|
|---|--|

## **Project Name: Dolly Parton Imagination Library of Floyd County**

| Project Identification Number   | 121   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.13-Healthy Childhood Environments: Services to Foster<br>Youth or Families Involved in Child Welfare System   |
| Status To Completion  | Completed less than 50%   |
| Total Cumulative Obligations  | \$50,000.00   |
| Total Cumulative Expenditures   | \$7,248.89  |
| Current Period Obligations  | \$50,000.00   |
| Current Period Expenditures   | \$7,248.89  |
| Project Description   | To promote early childhood education and healthy childhood living environments specifically helping families to build a home library that allows families to establish family reading time, support young children in language and literacy development and share a love of reading and learning. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To promote early childhood education and healthy childhood living environments specifically helping families to build a home library that allows families to establish family reading time, support young children in language and literacy development and share a love of reading and learning. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To promote early childhood education and healthy childhood living environments specifically helping families to build a home library that allows families to establish family reading time, support young children in language and literacy development and share a love of reading and learning. |

## **Project Name: New Albany COVID 19 Small Business Grant (Garcia Madison)**

| Project Identification Number   | 122  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.29-Loans or Grants to Mitigate Financial Hardship  |
| Status To Completion            | Completed  |
| Total Cumulative Obligations    | \$3,000.00   |
| Total Cumulative Expenditures   | \$3,000.00   |
| Current Period Obligations      | \$3,000.00   |
| Current Period Expenditures     | \$3,000.00   |
|                                 | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 |

| Project Description   | on their operations. To respond to the public health emergency or its negative economic impacts, including asssistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19.   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 8 Imp SBs that experienced a negative economic impact   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)                                | 1   |

# **Project Name: New Albany COVID 19 Small Business Grant (Wacky Nachos)**

| Project Identification Number   | 123   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.29-Loans or Grants to Mitigate Financial Hardship   |
| Status To Completion  | Completed   |
| Total Cumulative Obligations  | \$10,000.00   |
| Total Cumulative Expenditures   | \$10,000.00   |
| Current Period Obligations  | \$10,000.00   |
| Current Period Expenditures   | \$10,000.00   |
| Project Description   | To provide assistance grants to qualifying local businesses. To respond to local businesses feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve? | 8 Imp SBs that experienced a negative economic impact   |
| Brief description of structure and objectives of assistance                                   | To provide assistance grants to qualifying local businesses. To respond to local businesses feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including   |

| program(s), including public health or negative economic impact experienced   | assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19.   |
|---|---|
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)                                | 1   |

## **Project Name: Fire House Construction**

| Project Identification Number   | 124   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed 50% or more   |
| Total Cumulative Obligations  | \$1,000,000.00  |
| Total Cumulative Expenditures   | \$641,357.33  |
| Current Period Obligations  | \$1,000,000.00  |
| Current Period Expenditures   | \$641,357.33  |
| Project Description   | To construct fire station to replace nearly six decades old<br>Twin Oaks fire station in order that first responders have<br>adequate facilities to respond to medical emergencies. |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Emergency operations centers and acquisition of emergency response equipment  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To construct fire station to replace nearly six decades old<br>Twin Oaks fire station in order that first responders have<br>adequate facilities to respond to medical emergencies. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To construct fire station to replace nearly six decades old<br>Twin Oaks fire station in order that first responders have<br>adequate facilities to respond to medical emergencies. |

# **Project Name: Aid to Friends of Town Clock Church to Support Educational Programming**

| Project Identification Number   | 107   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted) |
| Status To Completion            | Not Started   |
|                                 |   |

| Total Cumulative Obligations  | \$50,000.00   |
|-------------------------------|---|
| Total Cumulative Expenditures | \$0.00  |
| Current Period Obligations    | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description           | To provide educational programming for New Albany's historic Town Clock Church and the Underground Railroud Center promoting the City's history and cultural heritage to schools, residents, and tourists. The addition of audio visual equipment will help further the visitor experience and promote additional tourism and educational visitors. Audio visual equipment will help provide educational and tourism programming digitally thus mitigating the spread of COVID-19 while promoting the site as tourism and and cultural heritage site. |

# **Project Name: Aid to Floyd County Token Club to Support Programming**

| 108   |
|---|
| 2-Negative Economic Impacts   |
| 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)   |
| Completed less than 50%   |
| \$400,000.00  |
| \$140,339.95  |
| \$0.00  |
| \$1.00  |
| To provide programming surrounding service towards adults with intellecutal and developmental disabilities. To provide drug and alchohol treatment programming including substance misuse treatment, primarily serving low to moderate income populations. To fund building renovations to enhance quality of services. |
| 1 Imp General Public  |
| 1 Imp General Public  |
| To provide programming surrounding service towards adults with intellecutal and developmental disabilities. To provide drug and alchohol treatment programming including substance misuse treatment, primarily serving low to moderate income populations. To fund building renovations to enhance quality of services. |
| To provide programming surrounding service towards adults with intellecutal and developmental disabilities. To provide drug and alchohol treatment programming including substance misuse treatment, primarily serving low to moderate income populations. To fund building renovations to enhance quality of services. |
| 1   |
|   |

## **Project Name: Emergency Home Repair Assistance Program**

| Project Identification Number   | 109  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.18-Housing Support: Other Housing Assistance   |
| Status To Completion  | Completed 50% or more  |
| Total Cumulative Obligations  | \$100,000.00   |
| Total Cumulative Expenditures   | \$67,765.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$25,435.00  |
| Project Description   | To provide assistance with home repairs for low or moderate income individuals in qualifying census tracts. To respond to increased applicants for repair program.           |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 15 Dis Imp HHs and populations residing in Qualified Census Tracts   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To provide emergency assistance with home repairs for low or moderate income individuals in qualifying census tracts. To respond to increased applicants for repair program. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To provide emergency assistance with home repairs for low or moderate income individuals in qualifying census tracts. To respond to increased applicants for repair program. |

## **Project Name: Aid to St Elizabeth's to Support Homelessness Services**

| 110   |  |
|---|--|
| 2-Negative Economic Impacts   |  |
| 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)   |  |
| Completed   |  |
| \$50,000.00   |  |
| \$50,000.00   |  |
| \$0.00  |  |
| \$23,918.00   |  |
| To assist individuals establish a safety plan, seek employments or educational services, or find permanent housing. To respond to negative effects of COVID-19 have led to an increase in families seeking shelter from domestic violence and unsafe living environments. |  |
| 1 Imp General Public  |  |
| 1 Imp General Public  |  |
| To assist individuals establish a safety plan, seek employment or educational services, or find permanent housing. To respond to negative effects of COVID-19 hav led to an increase in families seeking shelter from domesti violence and unsafe living environments.    |  |
|   |  |

| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To assist individuals establish a safety plan, seek employment or educational services, or find permanent housing. To respond to negative effects of COVID-19 have led to an increase in families seeking shelter from domestic violence and unsafe living environments. |
|---|--|
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 1  |

# Project Name: Aid to Blessings in a Backpack to Support Food Assistance

| Project Identification Number   | 111   |  |
|---|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts   |  |
| Project Expenditure Subcategory   | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)   |  |
| Status To Completion  | Completed   |  |
| Total Cumulative Obligations  | \$50,000.00   |  |
| Total Cumulative Expenditures   | \$50,000.00   |  |
| Current Period Obligations  | \$0.00  |  |
| Current Period Expenditures   | \$0.00  |  |
| Project Description   | To fight hunger and provide assistance to households through programs targeting the most vulnerable in our community. To respond to 1,069 children between Pre-K and 5th grade facing food insecurity within the City of N Albany.                      |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To fight hunger and provide assistance to households through programs targeting programs targeting the most vulnerable in our community. To respond to 1,069 children between Pre-K and 5th grade facing food insecurity within the City of New Albany. |  |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To fight hunger and provide assistance to households through programs targeting programs targeting the most vulnerable in our community. To respond to 1,069 children between Pre-K and 5th grade facing food insecurity within the City of New Albany. |  |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 1   |  |

# **Project Name: Neighborhood Stormwater Initiative**

| Project Identification Number   | 112                         |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 5-Infrastructure            |
| Project Expenditure Subcategory | 5.6-Clean Water: Stormwater |
| Status To Completion            | Completed                   |
| Total Cumulative Obligations    | \$473,894.00                |
| Total Cumulative Expenditures   | \$473,894.00                |
| Current Period Obligations      | \$0.00                      |
|                                 |                             |

| Current Period Expenditures  | \$355,094.00  |
|--|---|
| Project Description  | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Projected/actual construction start date                                 | 11/24/2021  |
| Projected/actual initiation of operations date                           | 11/24/2021  |
| Location Type(for broadband, geospatial location data)                   | Address   |
| Location Details   | NA  |
| Public Water System (PWS) ID Number                                      | NA  |
| National Pollutant Discharge Elimination System (NPDES)<br>Permit Number | NA  |
| Median Household Income of service area                                  | \$0.00  |
| Lowest Quintile Income of the service area                               | \$0.00  |

## Project Name: Aid to Liberty Place to Support Homelessness and Substance Abuse Services

| Project Identification Number   | 113   |  |
|---|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts   |  |
| Project Expenditure Subcategory   | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)   |  |
| Status To Completion  | Completed less than 50%   |  |
| Total Cumulative Obligations  | \$50,000.00   |  |
| Total Cumulative Expenditures   | \$3,036.98  |  |
| Current Period Obligations  | \$0.00  |  |
| Current Period Expenditures   | \$1,189.39  |  |
| Project Description   | To support the objective of providing a sober transitional living environment for veterans in efforts to help resident return to the community as positive and productive memory of society. To fund homelessness and substance abuse.  |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To support the objective of providing a sober transitional living environment for veterans in efforts to help residents return to the community as positive and productive member of society. To fund homelessness and substance abuse. |  |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To support the objective of providing a sober transitional living environment for veterans in efforts to help residents return to the community as positive and productive member of society. To fund homelessness and substance abuse. |  |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 1   |  |

# **Project Name: Ohio River Greenway Trail Extension**

| Project Identification Number | 114 |
|-------------------------------|-----|
|-------------------------------|-----|

| Project Expenditure Category  | 2-Negative Economic Impacts  |  |
|---|--|--|
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Featur<br>that Promote Health and Safety   |  |
| Status To Completion  | Completed less than 50%  |  |
| Total Cumulative Obligations  | \$1,363,000.00   |  |
| Total Cumulative Expenditures   | \$452,529.16   |  |
| Current Period Obligations  | \$0.00   |  |
| Current Period Expenditures   | \$422,029.16   |  |
| Project Description   | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usa of public outdoor spaces. To promote better mental and physical health.   |  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,363,000.00   |  |
| Type of capital expenditures, based on the following enumerated uses  | Parks, green spaces, recreational facilities, sidewalks  |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |  |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |  |

# **Project Name: Aid to Floyd County 4-H to Support Local Tourism**

| Project Identification Number   | 118  |  |
|---|--|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |  |
| Project Expenditure Subcategory   | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)  |  |
| Status To Completion  | Completed  |  |
| Total Cumulative Obligations  | \$25,000.00  |  |
| Total Cumulative Expenditures   | \$25,000.00  |  |
| Current Period Obligations  | \$0.00   |  |
| Current Period Expenditures   | \$0.00   |  |
| Project Description   | To support fundraising negatively impacted by by COVID-19. To support education services to children. To support the Floyd County 4-H Fair that draws thousands of tourists to New Albany which visit local businesses who operate their stores and booths during the event. |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve? | 1 Imp General Public   |  |
|   |  |  |

| Secondary Impacted and/or Disproportionately Impacted populations   | 12 Imp Travel tourism or hospitality sectors   |
|---|--|
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To support fundraising negatively impacted by by COVID-19. To support education services to children. To support the Floyd County 4-H Fair that draws thousands of tourists to New Albany which visit local businesses who operate their stores and booths during the event. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To support fundraising negatively impacted by by COVID-19. To support education services to children. To support the Floyd County 4-H Fair that draws thousands of tourists to New Albany which visit local businesses who operate their stores and booths during the event. |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 1  |

## **Project Name: Silver Creek Trail Landing Phase 1 (Ohio River Greenway)**

| Project Identification Number   | 115  |  |
|---|--|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |  |
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety  |  |
| Status To Completion  | Completed 50% or more  |  |
| Total Cumulative Obligations  | \$1,487,000.00   |  |
| Total Cumulative Expenditures   | \$942,416.80   |  |
| Current Period Obligations  | \$0.00   |  |
| Current Period Expenditures   | \$864,491.05   |  |
| Project Description   | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usag of public outdoor spaces. To promote better mental and physical health.  |  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,487,000.00   |  |
| Type of capital expenditures, based on the following enumerated uses  | Parks, green spaces, recreational facilities, sidewalks  |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |  |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |  |

## **Project Name: Silver Creek Trail Landing Phase 2 (Ohio River Greenway)**

|                                       | 44- |  |
|---------------------------------------|-----|--|
| Project Identification Number         |     |  |
| I I TO JECT I LICITIFICATION I NUMBER | 116 |  |

|   | +  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety  |
| Status To Completion  | Completed less than 50%  |
| Total Cumulative Obligations  | \$965,000.00   |
| Total Cumulative Expenditures   | \$74,346.50  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$74,346.50  |
| Project Description   | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$965,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Parks, green spaces, recreational facilities, sidewalks  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |

# **Project Name: Ohio River Greenway and Silver Creek Trail Pre-Development Costs**

| Project Identification Number  | 117  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety  |
| Status To Completion   | Completed less than 50%  |
| Total Cumulative Obligations   | \$119,460.36   |
| Total Cumulative Expenditures  | \$119,460.36   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$112,907.86   |
| Project Description  | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$6,552.50   |

| Type of capital expenditures, based on the following enumerated uses  | Parks, green spaces, recreational facilities, sidewalks  |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. |

# **Project Name: Premium Pay - Essential Workers**

| Project Identification Number                                      | 119  |
|--|--|
| Project Expenditure Category                                       | 4-Premium Pay  |
| Project Expenditure Subcategory                                    | 4.1-Public Sector Employees  |
| Status To Completion   | Completed  |
| Total Cumulative Obligations                                       | \$686,354.65   |
| Total Cumulative Expenditures                                      | \$686,354.65   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | To remunerate essential workers for the elevated health risks they faced during the public health emergency. Each employee who performed in-person work for the City during the period March 1, 2020 to March 1, 2021 performed essential work and were needed to maintain continuity of the safe and efficient operation of the City and delivery of essential services to the public, to preserve its critical infrastructure, to preserve its fiscal operation, to protect and operate its utilities, and to protect and promote the public health, safety and welfare and are eligible for COVID-19 premium pay. |
| Sectors Designated as Essential Critical Infrastructure<br>Sectors | Public roads, utilities, safety, health, administration  |
| Number of workers to be served                                     | 289  |
| Premium Pay Narrative  | To remunerate essential workers for the elevated health risks they faced during the public health emergency. Each employee who performed in-person work for the City during the period March 1, 2020 to March 1, 2021 performed essential work and were needed to maintain continuity of the safe and efficient operation of the City and delivery of essential services to the public, to preserve its critical infrastructure, to preserve its fiscal operation, to protect and operate its utilities, and to protect and promote the public health, safety and welfare and are eligible for COVID-19 premium pay. |
| Number of workers to be served with premium pay in K-12            |  |

schools

## **Project Name: New Albany COVID 19 Small Business Grant Program Round 2**

| Project Identification Number   | 120   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.29-Loans or Grants to Mitigate Financial Hardship   |
| Status To Completion  | Completed   |
| Total Cumulative Obligations  | \$561,750.00  |
| Total Cumulative Expenditures   | \$561,750.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)                                | 62  |

## **Project Name: Administrative Expenses 2021**

| Project Identification Number   | 100                         |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 7-Administrative            |
| Project Expenditure Subcategory | 7.1-Administrative Expenses |
| Status To Completion            | Completed less than 50%     |
| Total Cumulative Obligations    | \$70,118.00                 |
| Total Cumulative Expenditures   | \$70,118.00                 |

| Current Period Obligations  | \$70,118.00  |
|-----------------------------|--|
| Current Period Expenditures | \$7,487.00   |
|                             | To administer proper accounting, reporting, and compliance of funds received. To manage and monitor subrecipients. |

# **Project Name: New Albany COVID 19 Small Business Grant Program Round 1**

| Project Identification Number   | 101   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.29-Loans or Grants to Mitigate Financial Hardship   |
| Status To Completion  | Completed   |
| Total Cumulative Obligations  | \$175,000.00  |
| Total Cumulative Expenditures   | \$175,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by COVID 19. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 8 Imp SBs that experienced a negative economic impact   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To provide assistance grants to qualifying local businesses. To respond to local businesess feeling the effect of Covid-19 on their operations. To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality. To support all qualifying business applicants in difficulty caused by Covid 19. |
| Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)                                | 18  |

# **Project Name: New Albany Township Trustee Response to Economic Hardship Caused by COVID19**

| Project Identification Number | 102                         |
|-------------------------------|-----------------------------|
| Project Expenditure Category  | 2-Negative Economic Impacts |
|                               |                             |

| Project Expenditure Subcategory   | 2.37-Economic Impact Assistance: Other  |
|---|---|
| Status To Completion  | Completed   |
| Total Cumulative Obligations  | \$100,000.00  |
| Total Cumulative Expenditures   | \$100,000.00  |
| Current Period Obligations  | \$100,000.00  |
| Current Period Expenditures   | \$100,000.00  |
| Project Description   | To respond to economic harm to families affected by economic impact of COVID 19. The New Albany Township Trustee will assist those in need of utility payments, housing and rent, food, healthcare, and homelessness relief as well as provide financial education through the creation of an education center. |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$100,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Job and workforce training centers  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To respond to economic harm to families affected by economic impact of COVID 19. The New Albany Township Trustee will assist those in need of utility payments, housing and rent, food, healthcare, and homelessness relief as well as provide financial education through the creation of an education center. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To respond to economic harm to families affected by economic impact of COVID 19. The New Albany Township Trustee will assist those in need of utility payments, housing and rent, food, healthcare, and homelessness relief as well as provide financial education through the creation of an education center. |

# **Project Name: Pediatric and Speciality Care Facility**

| 103  |
|--|
| 1-Public Health  |
| 1.4-Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, Child care facilities, etc.)   |
| Completed  |
| \$375,000.00   |
| \$375,000.00   |
| \$0.00   |
| \$0.00   |
| Retrofit building to medical. Provide indoor as well as outdoor spaces to safely treat patients with infectious diseases including those positive with COVID19. Hire adequate staff to set up services like speech, occupational, physical and ABA therapies as well psych services and parenting classes. |
|  |

| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$375,000.00   |
|---|--|
| Type of capital expenditures, based on the following enumerated uses  | Medical equipment and facilities   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | Retrofit building to medical. Provide indoor as well as outdoor spaces to safely treat patients with infectious diseases including those positive with COVID19. Hire adequate staff to set up services like speech, occupational, physical and ABA therapies as well psych services and parenting classes. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | Retrofit building to medical. Provide indoor as well as outdoor spaces to safely treat patients with infectious diseases including those positive with COVID19. Hire adequate staff to set up services like speech, occupational, physical and ABA therapies as well psych services and parenting classes. |

# **Project Name: LifeSpring Neighborhood Healthcare Clinic**

| Project Identification Number  | 104   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.4-Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, Child care facilities, etc.)  |
| Status To Completion   | Completed   |
| Total Cumulative Obligations   | \$296,156.00  |
| Total Cumulative Expenditures  | \$296,156.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | To create an affordable health care clinic that will be used to, among other purposes, support public health and behavioral healthcare, promote healthy childhood environments, address educational disparities, and provide opportunities for low-income, minority, and underserved communities. To respond to the COVID-19 public health emergency or its negative economic impacts, including providing enhanced basic medical care, and assistance to business and disadvantaged communities the lack proper access to medical or public health services. |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$296,156.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Medical equipment and facilities  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?  | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations                              | 7 Imp Other HHs or populations that experienced a negative economic   |
|  | To create an affordable health care clinic that will be used to, among other purposes, support public health and  |

| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | behavioral healthcare, promote healthy childhood<br>environments, address educational disparities, and provide<br>opportunities for low-income, minority, and underserved<br>communities.   |
|---|---|
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To create an affordable health care clinic that will be used to, among other purposes, support public health and behavioral healthcare, promote healthy childhood environments, address educational disparities, and provide opportunities for low-income, minority, and underserved communities. |

#### Project Name: Aid to Non-Profit Organizations Due to Increased Demand on Services

| Project Identification Number   | 105   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)   |
| Status To Completion  | Completed 50% or more   |
| Total Cumulative Obligations  | \$400,000.00  |
| Total Cumulative Expenditures   | \$298,766.29  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$16,156.70   |
| Project Description   | To support non-profit organizations that provide individuals with food assistance, eviction relief, utility assistance, and mental health and addition prevention services have been negatively impacted with increased demand on their services and reduced revenues from donors due to Covid-19.  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | To support non-profit organizations that provide individuals with food assistance, eviction relief, utility assistance, and mental health and addiction prevention services have been negatively impacted with increased demand on their services and reduced revenues from donors due to Covid-19. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | To support non-profit organizations that provide individuals with food assistance, eviction relief, utility assistance, and mental health and addiction prevention services have been negatively impacted with increased demand on their services and reduced revenues from donors due to Covid-19. |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 6   |

## **Project Name: Aid to Harvest Homecoming Festival to Support Local Businesses/Tourism**

| Project Identification Number   | 106   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted) |
|                                 |   |

| Status To Completion  | Completed less than 50%   |
|---|---|
| Total Cumulative Obligations  | \$50,000.00   |
| Total Cumulative Expenditures   | \$20,775.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Providing assistance to Harvest Homecoming, a non-profit organization promoting the 3rd largest festival in the State of Indiana which supports the City of New Albany and local tourism/businesses. Funds will be used for merchant booth fee assistance, promotion, and operating activities. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 8 Imp SBs that experienced a negative economic impact   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced                       | Providing assistance to Harvest Homecoming, a non-profit organization promoting the 3rd largest festival in the State of Indiana which supports the City of New Albany and local tourism/businesses. Funds will be used for merchant booth fee assistance, promotion, and operating activities. |
| Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 | Providing assistance to Harvest Homecoming, a non-profit organization promoting the 3rd largest festival in the State of Indiana which supports the City of New Albany and local tourism/businesses. Funds will be used for merchant booth fee assistance, promotion, and operating activities. |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 1   |

# **Subrecipients**

# Subrecipient Name: Clark-Floyd County Child Abuse Prevention Council, Inc.

| TIN  |                        |
|--|------------------------|
| Unique Entity Identifer  |                        |
| POC Email Address  |                        |
| Address Line 1   | 3000 Technology Avenue |
| Address Line 2   | Suite 2217             |
| Address Line 3   |                        |
| City   | New Albany             |
| State  | IN                     |
| Zip  | 47150                  |
| Zip+4  |                        |
| Entity Type  |                        |
| Is the Recipient Registered in SAM.Gov?  | No                     |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No                     |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No                     |

## **Subrecipient Name: MAC Construction & Excavating**

| TIN                                     | 351487672        |
|---|------------------|
| Unique Entity Identifer                 |                  |
| POC Email Address                       |                  |
| Address Line 1                          | 1908 Unruh Court |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | New Albany       |
| State                                   | IN               |
| Zip                                     | 47150            |
| Zip+4                                   | 6948             |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

#### Subrecipient Name: E-Z Construction Co., Inc.

| TIN                     | 610706805               |
|-------------------------|-------------------------|
| Unique Entity Identifer |                         |
| POC Email Address       |                         |
| Address Line 1          | 7420 Distribution Drive |
|                         |                         |

| Address Line 2   |            |
|--|------------|
| Address Line 3   |            |
| City   | Louisville |
| State  | KY         |
| Zip  | 40258      |
| Zip+4  |            |
| Entity Type  | Contractor |
| Is the Recipient Registered in SAM.Gov?  | No         |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No         |

# **Subrecipient Name: Floyd County Token Club**

| TIN  | 351778878    |
|--|--------------|
| Unique Entity Identifer  |              |
| POC Email Address  |              |
| Address Line 1   | 506 Pearl St |
| Address Line 2   |              |
| Address Line 3   |              |
| City   | New Albany   |
| State  | IN           |
| Zip  | 47150        |
| Zip+4  |              |
| Entity Type  | Subrecipient |
| Is the Recipient Registered in SAM.Gov?  | No           |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No           |

## Subrecipient Name: Dan Cristiani Excavating Co.

| TIN                     | 351284281         |
|-------------------------|-------------------|
| Unique Entity Identifer |                   |
| POC Email Address       |                   |
| Address Line 1          | 1221 Old Hwy 31 E |
| Address Line 2          |                   |
| Address Line 3          |                   |
| City                    | Clarksville       |
| State                   | IN                |
| Zip                     | 47129             |

| Zip+4                                   |            |
|---|------------|
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## Subrecipient Name: Blessings in a Backpack Floyd County

| TIN                                     | 202552199          |
|---|--------------------|
| Unique Entity Identifer                 |                    |
| POC Email Address                       |                    |
| Address Line 1                          | 2813 Grant Line Rd |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | New Albany         |
| State                                   | IN                 |
| Zip                                     | 47150              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

#### **Subrecipient Name: Liberty Place**

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | FTBEXVAP95L8       |
| POC Email Address                       |                    |
| Address Line 1                          | 2633 Grant Line Rd |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | New Albany         |
| State                                   | IN                 |
| Zip                                     | 47150              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

## **Subrecipient Name: Volunteers of America Mid-States**

| TIN                     | 610480950       |
|-------------------------|-----------------|
| Unique Entity Identifer |                 |
| POC Email Address       |                 |
| Address Line 1          | 570 S Fourth St |
| Address Line 2          | Suite 100       |
| Address Line 3          |                 |

| City                                    | Lousiville |
|---|------------|
| State                                   | KY         |
| Zip                                     | 40202      |
| Zip+4                                   |            |
| Entity Type                             |            |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## **Subrecipient Name: Homeless Coalition of Southern Indiana**

| TIN                                     | 811637476     |
|---|---------------|
| Unique Entity Identifer                 |               |
| POC Email Address                       |               |
| Address Line 1                          | 1218 E Oak St |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | New Albany    |
| State                                   | IN            |
| Zip                                     | 47150         |
| Zip+4                                   |               |
| Entity Type                             |               |
| Is the Recipient Registered in SAM.Gov? | Yes           |

#### Subrecipient Name: Hope Southern Indiana, Inc.

| TIN                                     | 351128300    |
|---|--------------|
| Unique Entity Identifer                 |              |
| POC Email Address                       |              |
| Address Line 1                          | 1200 Bono Rd |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | New Albany   |
| State                                   | IN           |
| Zip                                     | 47150        |
| Zip+4                                   |              |
| Entity Type                             |              |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# **Subrecipient Name: Harvest Homecoming Festival Association Inc**

| TIN                     | 237296763 |
|-------------------------|-----------|
| Unique Entity Identifer |           |
| POC Email Address       |           |
|                         |           |

| Address Line 1   | 431 Pearl St |
|--|--------------|
| Address Line 2   |              |
| Address Line 3   |              |
| City   | New Albany   |
| State  | IN           |
| Zip  | 47150        |
| Zip+4  |              |
| Entity Type  |              |
| Is the Recipient Registered in SAM.Gov?  | No           |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No           |

## **Subrecipient Name: Complete Pediatrics and Specialty Care**

| TIN  | 872572130          |
|--|--------------------|
| Unique Entity Identifer  |                    |
| POC Email Address  |                    |
| Address Line 1   | 223 East Spring St |
| Address Line 2   | Suite 100          |
| Address Line 3   |                    |
| City   | New Albany         |
| State  | IN                 |
| Zip  | 47150              |
| Zip+4  |                    |
| Entity Type  |                    |
| Is the Recipient Registered in SAM.Gov?  | No                 |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No                 |

## ${\bf Subrecipient\ Name:\ Big\ Brothers\ Big\ Sisters\ of\ Kentuckiana,\ Inc.}$

| TIN                     | 616057856          |
|-------------------------|--------------------|
| Unique Entity Identifer |                    |
| POC Email Address       |                    |
| Address Line 1          | 1519 Gardiner Lane |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | Louisville         |
| State                   | KY                 |

| Zip                                     | 40218 |
|---|-------|
| Zip+4                                   |       |
| Entity Type                             |       |
| Is the Recipient Registered in SAM.Gov? | Yes   |

#### Subrecipient Name: Our Place Drug and Alcohol Education Services, Inc.

| TIN                                     | 311202976       |
|---|-----------------|
| Unique Entity Identifer                 |                 |
| POC Email Address                       |                 |
| Address Line 1                          | 400 E Spring St |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | New Albany      |
| State                                   | IN              |
| Zip                                     | 47150           |
| Zip+4                                   |                 |
| Entity Type                             |                 |
| Is the Recipient Registered in SAM.Gov? | Yes             |

## **Subrecipient Name: Friends of Town Clock Church**

| TIN  | 813774310    |
|--|--------------|
| Unique Entity Identifer  |              |
| POC Email Address  |              |
| Address Line 1   | PO Box 574   |
| Address Line 2   |              |
| Address Line 3   |              |
| City   | New Albany   |
| State  | IN           |
| Zip  | 47150        |
| Zip+4  |              |
| Entity Type  | Subrecipient |
| Is the Recipient Registered in SAM.Gov?  | No           |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No           |

## **Subrecipient Name: New Directions Housing Corporation**

| TIN                     | 610715630 |
|-------------------------|-----------|
| Unique Entity Identifer |           |

| POC Email Address                       |               |
|---|---------------|
| Address Line 1                          | 1617 Maple St |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | Louisville    |
| State                                   | KY            |
| Zip                                     | 40210         |
| Zip+4                                   |               |
| Entity Type                             | Subrecipient  |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## **Subrecipient Name: St Elizabeth Catholic Charities**

| TIN                                     |                 |
|---|-----------------|
| Unique Entity Identifer                 | F8N5YHE63HE9    |
| POC Email Address                       |                 |
| Address Line 1                          | 702 E Market St |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | New Albany      |
| State                                   | IN              |
| Zip                                     | 47150           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

## **Subrecipient Name: New Albany Township Trustee**

| TIN  | 356003584        |
|--|------------------|
| Unique Entity Identifer                                    |                  |
| POC Email Address  |                  |
| Address Line 1   | 311 Hauss Square |
| Address Line 2   |                  |
| Address Line 3   |                  |
| City   | New Albany       |
| State  | IN               |
| Zip  | 47150            |
| Zip+4  |                  |
| Entity Type  |                  |
| Is the Recipient Registered in SAM.Gov?                    | No               |
| In the preceding fiscal year, did recipient receive 80% or |                  |

| more of its annual gross revenue from federal funds?   | No |
|--|----|
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No |

## **Subrecipient Name: New Albany Floyd County Education Foundation**

| TIN  | 202552199          |
|--|--------------------|
| Unique Entity Identifer  |                    |
| POC Email Address  |                    |
| Address Line 1   | 2813 Grant Line Rd |
| Address Line 2   |                    |
| Address Line 3   |                    |
| City   | New Albany         |
| State  | IN                 |
| Zip  | 47150              |
| Zip+4  |                    |
| Entity Type  | Subrecipient       |
| Is the Recipient Registered in SAM.Gov?  | No                 |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No                 |

## **Subrecipient Name: TRC, LLC**

| TIN  | 400009488    |
|--|--------------|
| Unique Entity Identifer  |              |
| POC Email Address  |              |
| Address Line 1   | PO Box       |
| Address Line 2   |              |
| Address Line 3   |              |
| City   | Floyds Knobs |
| State  | IN           |
| Zip  | 47119        |
| Zip+4  |              |
| Entity Type  | Contractor   |
| Is the Recipient Registered in SAM.Gov?  | No           |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No           |

#### **Subrecipient Name: GM Development Companies LLC**

| TIN  | 462249483              |
|--|------------------------|
| Unique Entity Identifer  |                        |
| POC Email Address  |                        |
| Address Line 1   | 8561 N County Rd 175 E |
| Address Line 2   |                        |
| Address Line 3   |                        |
| City   | Springport             |
| State  | IN                     |
| Zip  | 47386                  |
| Zip+4  |                        |
| Entity Type  | Contractor             |
| Is the Recipient Registered in SAM.Gov?  | No                     |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No                     |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No                     |

# **Subrecipient Name: CASA of Floyd County, Inc.**

| TIN                                     | 117225384    |
|---|--------------|
| Unique Entity Identifer                 |              |
| POC Email Address                       |              |
| Address Line 1                          | 800 E 8th St |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | New Albany   |
| State                                   | IN           |
| Zip                                     | 47150        |
| Zip+4                                   |              |
| Entity Type                             |              |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: Dare to Care, Inc.

| 237345952           |
|---------------------|
|                     |
|                     |
| 5803 Fern Valley Rd |
|                     |
|                     |
| Louisville          |
| KY                  |
|                     |

| Zip                                     | 40228 |
|---|-------|
| Zip+4                                   |       |
| Entity Type                             |       |
| Is the Recipient Registered in SAM.Gov? | Yes   |

# Subrecipient Name: Upton Pry, Inc.

| TIN  | 351511482     |
|--|---------------|
| Unique Entity Identifer  |               |
| POC Email Address  |               |
| Address Line 1   | PO Box 1103   |
| Address Line 2   | 1304 Dewey St |
| Address Line 3   |               |
| City   | New Albany    |
| State  | IN            |
| Zip  | 47150         |
| Zip+4  |               |
| Entity Type  |               |
| Is the Recipient Registered in SAM.Gov?  | No            |
| In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds? | No            |

# **Subawards**

#### Subward No: 33

| Subaward Type                  | Subaward   |
|--------------------------------|--|
| Subaward Obligation            | \$50,000.00  |
| Subaward Date                  | 11/14/2021   |
| Place of Performance Address 1 | 312 E Main St  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NewAlbany  |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
| Description                    | Purchase and install audio visual equipment in the Underground Railround Center as part of the URR exhibits. |
| Subrecipient                   | Friends of Town Clock Church   |
| Period of Performance Start    | 12/31/2022   |
| Period of Performance End      | 6/30/2023  |

| Subaward Type                  | Subaward   |
|--------------------------------|--|
| Subaward Obligation            | \$400,000.00   |
| Subaward Date                  | 12/17/2021   |
| Place of Performance Address 1 | 506 Pearl St   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
| Description                    | Purchase and installation of a commercial fire suppression, exhaust hood vent, construction of walls to encase hood vent lines to exit thru roof. Update electric to supply hood vent. Reconstruction of window casings in upstairs and replacement of 3 windows. Installation of commercial entry doors. Cleaning AC and heat ducts. Tuck point brick in needed areas of exterior and interior of building. |
| Subrecipient                   | Floyd County Token Club  |
| Period of Performance Start    | 2/11/2022  |
| Period of Performance End      | 6/1/2022   |

| Subaward Type                  | Subaward  |
|--------------------------------|---|
| Subaward Obligation            | \$100,000.00  |
| Subaward Date                  | 12/28/2021  |
| Place of Performance Address 1 | 1617 Maple St   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Louisville  |
| Place of Performance State     | KY  |
| Place of Performance Zip       | 40210   |
| Place of Performance Zip+4     |   |
| Description                    | The ARPA New Albany Emergency Repair Program (ARPA NA-ERP) will be assisting qualified homeowner with free home repair focused on emergency needs like roofs, HVAC, hot water heaters, accessbility and structural issues. The program will mirror the existing New Albany Emergency Repair Program, but clients must live within the CDBG Target Area. No concessions will be made for this project. Since getting the agreement staff have been qualifying and completing scopes of work for ERP clients who live in the CDBG Target Area where the funds will be spent. Currently, there are 10 clients signed up. |
| Subrecipient                   | New Directions Housing Corporation  |
| Period of Performance Start    | 3/4/2022  |
| Period of Performance End      | 12/31/2024  |

#### Subward No: 36

| Subaward Type                  | Subaward                        |
|--------------------------------|---------------------------------|
| Subaward Obligation            | \$50,000.00                     |
| Subaward Date                  | 12/28/2021                      |
| Place of Performance Address 1 | 702 E Market St                 |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | New Albany                      |
| Place of Performance State     | IN                              |
| Place of Performance Zip       | 47150                           |
| Place of Performance Zip+4     |                                 |
| Description                    | To house homeless families      |
| Subrecipient                   | St Elizabeth Catholic Charities |
| Period of Performance Start    | 12/28/2021                      |
| Period of Performance End      | 3/1/2023                        |

| Subaward Type                  | Subaward  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 12/28/2021  |
| Place of Performance Address 1 | 2813 Grant Line Rd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Albany  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47150   |
| Place of Performance Zip+4     |   |
| Description                    | Provide food on the weekends for NAFCS students. The funds from this grants provides food to 1,069 New Albany students approximately 16 weeks. The grant funds will provide 17,422 weekend meals for the 1,069 New Albany pre-K through 5th grades January 1, 2022 to April 29, 2022. |
| Subrecipient                   | Blessings in a Backpack Floyd County  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 4/29/2022   |

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$107,159.00  |
| Subaward Date                  | 2/22/2022   |
| Place of Performance Address 1 | 1221 Old Hwy 31 E   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Clarksville   |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47129   |
| Place of Performance Zip+4     |   |
| Description                    | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Subrecipient                   | Dan Cristiani Excavating Co.  |
| Period of Performance Start    | 2/22/2022   |
| Period of Performance End      | 12/31/2024  |

| Subaward Type       | Contract: Definitive Contract |
|---------------------|-------------------------------|
| Subaward Obligation | \$64,525.00                   |
| Subaward Date       | 3/10/2022                     |

| Place of Performance Address 1 | PO Box 273  |
|--------------------------------|---|
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Floyds Knobs  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47119   |
| Place of Performance Zip+4     |   |
| Description                    | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Subrecipient                   | TRC, LLC  |
| Period of Performance Start    | 3/10/2022   |
| Period of Performance End      | 9/30/2022   |

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$53,910.00   |
| Subaward Date                  | 3/10/2022   |
| Place of Performance Address 1 | PO Box 273  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Floyds Knobs  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47119   |
| Place of Performance Zip+4     |   |
| Description                    | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Subrecipient                   | TRC, LLC  |
| Period of Performance Start    | 3/10/2022   |
| Period of Performance End      | 9/30/2022   |

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$135,305.00                  |
| Subaward Date                  | 3/10/2022                     |
| Place of Performance Address 1 | PO Box 273                    |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Floyds Knobs                  |
|                                |                               |

| Place of Performance State  | IN  |
|-----------------------------|---|
| Place of Performance Zip    | 47119   |
| Place of Performance Zip+4  |   |
| Description                 | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Subrecipient                | TRC, LLC  |
| Period of Performance Start | 3/10/2022   |
| Period of Performance End   | 9/30/2022   |

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$101,354.00  |
| Subaward Date                  | 3/10/2022   |
| Place of Performance Address 1 | PO Box 273  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Floyds Knobs  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47119   |
| Place of Performance Zip+4     |   |
| Description                    | To encourage and improve economic development and redevelopment in the City with necessary investments in water, storm, and sewer infrastructure. |
| Subrecipient                   | TRC, LLC  |
| Period of Performance Start    | 3/10/2022   |
| Period of Performance End      | 9/30/2022   |

| Subaward Type                  | Subaward   |
|--------------------------------|--|
| Subaward Obligation            | \$50,000.00  |
| Subaward Date                  | 3/8/2021   |
| Place of Performance Address 1 | 2633 Grant Line Rd   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47129  |
| Place of Performance Zip+4     |  |
|                                | Provide a safe and sober living environment for Veterans participating in Veterans Treatment Court of Southern |

| Description                 | Indiana. These individuals would otherwise be incarcerated or without a place to live. Our program provides common and outdoor space, all meals, laundry, gym, personal bedding, restroom space, transportation, 24/7 security cameras, and staffing. |
|-----------------------------|---|
| Subrecipient                | Liberty Place   |
| Period of Performance Start | 3/20/2022   |
| Period of Performance End   | 3/31/2023   |

| Subaward Type                  | Contract: Definitive Contract  |
|--------------------------------|--|
| Subaward Obligation            | \$1,363,000.00   |
| Subaward Date                  | 1/18/2022  |
| Place of Performance Address 1 | 1908 Unruh Court   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
| Description                    | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. New asphalt trails on levee, concrete sidewalks and ramps, limestone blocks, road alignment, lighting and site furnishings. |
| Subrecipient                   | MAC Construction & Excavating  |
| Period of Performance Start    | 5/9/2022   |
| Period of Performance End      | 12/1/2022  |

| Subaward Type                  | Contract: Definitive Contract                        |
|--------------------------------|--|
| Subaward Obligation            | \$1,487,000.00                                       |
| Subaward Date                  | 1/18/2022  |
| Place of Performance Address 1 | 1908 Unruh Court                                     |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
|                                | To promote healthier living environments and outdoor |

| Description                 | recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. New asphalt trails on levee, concrete sidewalks and ramps, lighting and site furnishings. |
|-----------------------------|---|
| Subrecipient                | MAC Construction & Excavating   |
| Period of Performance Start | 6/1/2022  |
| Period of Performance End   | 12/1/2022   |

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$965,000.00  |
| Subaward Date                  | 2/1/2022  |
| Place of Performance Address 1 | 7420 Distribution Drive   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Louisville  |
| Place of Performance State     | KY  |
| Place of Performance Zip       | 40258   |
| Place of Performance Zip+4     |   |
| Description                    | To promote healthier living environments and outdoor recreation with investments in parks, public plazas, and other public outdoor spaces. To respond to increased usage of public outdoor spaces. To promote better mental and physical health. A new kayak launch will be constructed at Providence Landing to provide access to Silver Creek for non-motorized watercraft. Concrete sidewalks, ramps, and steps will descend the hillside beneath the Spring Street bridge over Silver Creek. Project elements include gabion and concrete retaining walls, rip rap and erosion control methods, landscaping, metal fabricated steps, handrailing, and a boat assist rail. |
| Subrecipient                   | E-Z Construction Co., Inc.  |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 11/1/2022   |
|                                |   |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$100,000.00               |
| Subaward Date                  | 6/8/2021                   |
| Place of Performance Address 1 | 311 Hauss Square           |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | New Albany                 |
| Place of Performance State     | IN                         |

| Place of Performance Zip    | 47150   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | To respond to economic harm to families affected by economic impact of COVID 19. The New Albany Township Trustee will assist those in need of utility payments, housing and rent, food, healthcare, and homelessness relief as well as provide financial education through the creation of an education center. |
| Subrecipient                | New Albany Township Trustee   |
| Period of Performance Start | 6/8/2021  |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$375,000.00   |
| Subaward Date                  | 9/14/2021  |
| Place of Performance Address 1 | 223 E Spring St  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
| Description                    | Retrofit building to medical. Provide indoor as well as outdoor spaces to safely treat patients with infectious diseases including those positive with COVID19. Hire adequate staff to set up services like speech, occupational, physical and ABA therapies as well psych services and parenting classes. |
| Subrecipient                   | Complete Pediatrics and Specialty Care   |
| Period of Performance Start    | 10/14/2021   |
| Period of Performance End      | 12/31/2026   |

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$296,156.00                  |
| Subaward Date                  | 9/14/2021                     |
| Place of Performance Address 1 | 2604 Charlestown Rd           |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | New Albany                    |
| Place of Performance State     | IN                            |
|                                |                               |

| Place of Performance Zip    | 47150   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | This project consists of a rehabilitation of a vacant and under-utilized commercial property for a neighborhood health clinic that will be operated by a non-profit for patients who have no insurance or who are underinsured to seek medical care to address public health and receive non-emergency diagnosis and treatment for infectious diseases such as COVID-19 among other issues. The improvements will include interior rooms, cabinets, flooring, lighting, plumbing, and mechanical systems as needed. |
| Subrecipient                | Upton Pry, Inc.   |
| Period of Performance Start | 9/14/2021   |
| Period of Performance End   | 12/13/2021  |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 6/30/2021   |
| Place of Performance Address 1 | 3000 Technology Avenue  |
| Place of Performance Address 2 | Suite 2217  |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Albany  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47150   |
| Place of Performance Zip+4     |   |
| Description                    | To offer community-based services and support for children, youth, and their families, with or at risk for health challenges. |
| Subrecipient                   | Clark-Floyd County Child Abuse Prevention Council, Inc.   |
| Period of Performance Start    | 6/30/2021   |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$50,000.00                |
| Subaward Date                  | 6/30/2021                  |
| Place of Performance Address 1 | 800 E 8th St               |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | New Albany                 |
| Place of Performance State     | IN                         |
| Place of Performance Zip       | 47150                      |

| Place of Performance Zip+4  |   |
|-----------------------------|---|
| Description                 | To advocate for the best interest of abused and neglected children who are entangled in the Floyd County court system by recruiting, training, and supporting volunteers to serve as Court Appointed Special Advocates to ensure the children get the appropriate care, guidance, assistance, and access to services they need. |
| Subrecipient                | CASA of Floyd County, Inc.  |
| Period of Performance Start | 6/30/2021   |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 10/14/2021  |
| Place of Performance Address 1 | 1519 Gardiner Lane  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Louisville  |
| Place of Performance State     | KY  |
| Place of Performance Zip       | 40218   |
| Place of Performance Zip+4     |   |
| Description                    | Forty (40) New Albany/Floyd County youth will be served through 1-to-1 mentoring relationships. Specifically, funding will be used to enroll, screen and train volunteers to become mentors; assess, match and evaluate youth; provide ongoing professional support and monitoring of each match between mentors and youth; and plan and coordinate mentoring activities. |
| Subrecipient                   | Big Brothers Big Sisters of Kentuckiana, Inc.   |
| Period of Performance Start    | 10/14/2021  |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$50,000.00                |
| Subaward Date                  | 10/14/2021                 |
| Place of Performance Address 1 | 570 S Fourth St            |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Louisville                 |
| Place of Performance State     | KY                         |
| Place of Performance Zip       | 40202                      |

| Place of Performance Zip+4  |   |
|-----------------------------|---|
| Description                 | Communities benefit when adults with intellectual and developmental disabilities are helped to reach their full potential. VOA protects the health of adults with disabilities, integrates them into their New Albany and Floyd County community and assures that they have positive interactions in a safe and welcoming home. Our trained professionals provide comprehensive support in residential setting. Our Supported Employment program gives many adults with disabilities their very first opportunity to work in productive and meaningful jobs, which benefits the entire community. |
| Subrecipient                | Volunteers of America Mid-States  |
| Period of Performance Start | 10/14/2021  |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$50,000.00  |
| Subaward Date                  | 10/14/2021   |
| Place of Performance Address 1 | 1218 E Oak St  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Albany   |
| Place of Performance State     | IN   |
| Place of Performance Zip       | 47150  |
| Place of Performance Zip+4     |  |
| Description                    | This project is to keep individuals housed, prevent eviction, and/or find affordable housing for those evicted. Case management is provided to navigate through agencies to provide support. There is a goal to recruit landlords who are willing to provide affordable housing for those under 30% AMI and struggle to afford high cost rent. |
| Subrecipient                   | Homeless Coalition of Southern Indiana   |
| Period of Performance Start    | 10/14/2021   |
| Period of Performance End      | 12/31/2026   |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$50,000.00                |
| Subaward Date                  | 6/30/2021                  |
| Place of Performance Address 1 | 5803 Fern Valley Rd        |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Louisville                 |
|                                |                            |

| Place of Performance State  | KY  |
|-----------------------------|---|
| Place of Performance Zip    | 40228   |
| Place of Performance Zip+4  |   |
| Description                 | Dare to Care meets a crucial need in Floyd County through its Feeding Families Program. This program benefits men, women, children, seniors and veterans who are food insecure or at risk of food insecurity. |
| Subrecipient                | Dare to Care, Inc.  |
| Period of Performance Start | 6/30/2021   |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 6/30/2021   |
| Place of Performance Address 1 | 1200 Bono Rd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Albany  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47150   |
| Place of Performance Zip+4     |   |
| Description                    | Family & Emergency Services (FES) is an ongoing program that has been in place for many years. For the fiscal year 7-1-2021 - 6-30-2022 Hope's Board of Directors increased the FES budget from \$50,000 to \$100,000; but FY to date - a little more than halfway through - Hope has already spent more than \$140,000 for rent/mortgage and utility assistance, New Albany Housing Authority deposit assistance and homeless prevention (temporary housing). This ARP funding enabled us to help more people with more/higher past-due expenses, and the Family & Emergency Services program will continue. |
| Subrecipient                   | Hope Southern Indiana, Inc.   |
| Period of Performance Start    | 6/30/2021   |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$50,000.00                |
| Subaward Date                  | 6/30/2021                  |
| Place of Performance Address 1 | 400 E Spring St            |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |

| Place of Performance City   | New Albany  |
|-----------------------------|---|
| Place of Performance State  | IN  |
| Place of Performance Zip    | 47150   |
| Place of Performance Zip+4  |   |
| Description                 | Providing education, prevention, and intervention services for individuals of all ages, families, organizations, and communities who are presently or potentially impacted by alcohol, tobacco or other drug abuse. |
| Subrecipient                | Our Place Drug and Alcohol Education Services, Inc.   |
| Period of Performance Start | 6/30/2021   |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 6/30/2021   |
| Place of Performance Address 1 | 431 Pearl St  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Albany  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47150   |
| Place of Performance Zip+4     |   |
| Description                    | Providing assistance to Harvest Homecoming, a non-profit organization promoting the 3rd largest festival in the State of Indiana which supports the City of New Albany and local tourism/businesses. Funds will be used for merchant booth fee assistance, promotion, and operating activities. |
| Subrecipient                   | Harvest Homecoming Festival Association Inc   |
| Period of Performance Start    | 6/30/2021   |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Subaward           |
|--------------------------------|--------------------|
| Subaward Obligation            | \$50,000.00        |
| Subaward Date                  | 4/25/2022          |
| Place of Performance Address 1 | 2813 Grant Line Rd |
| Place of Performance Address 2 |                    |
| Place of Performance Address 3 |                    |
| Place of Performance City      | New Albany         |
| Place of Performance State     | IN                 |
| Place of Performance Zip       | 47150              |

| Place of Performance Zip+4  |   |
|-----------------------------|---|
| Description                 | To promote early childhood education and healthy childhood living environments specifically helping families to build a home library that allows families to establish family reading time, support young children in language and literacy development and share a love of reading and learning. |
| Subrecipient                | New Albany Floyd County Education Foundation  |
| Period of Performance Start | 7/1/2022  |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$1,000,000.00  |
| Subaward Date                  | 8/2/2022  |
| Place of Performance Address 1 | 8561 N County Rd 175 E  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Springport  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 47386   |
| Place of Performance Zip+4     |   |
| Description                    | To construct fire station to replace nearly six decades old<br>Twin Oaks fire station in order that first responders have<br>adequate facilities to respond to medical emergencies. |
| Subrecipient                   | GM Development Companies LLC  |
| Period of Performance Start    | 8/2/2022  |
| Period of Performance End      | 12/31/2026  |

# **Expenditures**

#### **Expenditures for Awards more than \$50,000**

Expenditure: EN-00429213

| Project Name       | Aid to Floyd County Token Club to Support Programming |
|--------------------|---|
| Subaward ID        | SUB-0167632   |
| Subaward No        | 34  |
| Subaward Amount    | \$400,000.00  |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Floyd County Token Club                               |
| Expenditure Start  | 6/28/2022   |
| Expenditure End    | 6/28/2022   |
| Expenditure Amount | \$2,500.00  |

## Expenditure: EN-00429212

| Project Name       | Aid to Floyd County Token Club to Support Programming |
|--------------------|---|
| Subaward ID        | SUB-0167632   |
| Subaward No        | 34  |
| Subaward Amount    | \$400,000.00  |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Floyd County Token Club                               |
| Expenditure Start  | 6/28/2022   |
| Expenditure End    | 6/28/2022   |
| Expenditure Amount | \$69,834.94   |

| Project Name       | Aid to Floyd County Token Club to Support Programming |
|--------------------|---|
| Subaward ID        | SUB-0167632   |
| Subaward No        | 34  |
| Subaward Amount    | \$400,000.00  |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Floyd County Token Club                               |
| Expenditure Start  | 5/4/2022  |
| Expenditure End    | 5/4/2022  |
| Expenditure Amount | \$30,000.00   |

| Project Name       | Aid to Floyd County Token Club to Support Programming |
|--------------------|---|
| Subaward ID        | SUB-0167632   |
| Subaward No        | 34  |
| Subaward Amount    | \$400,000.00  |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Floyd County Token Club                               |
| Expenditure Start  | 2/23/2022   |
| Expenditure End    | 12/31/2024  |
| Expenditure Amount | \$38,004.01   |

## Expenditure: EN-00624431

| Project Name       | Aid to Floyd County Token Club to Support Programming |
|--------------------|---|
| Subaward ID        | SUB-0167632   |
| Subaward No        | 34  |
| Subaward Amount    | \$400,000.00  |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Floyd County Token Club                               |
| Expenditure Start  | 2/8/2022  |
| Expenditure End    | 2/8/2022  |
| Expenditure Amount | \$1.00  |

#### Expenditure: EN-00429447

| Project Name       | Emergency Home Repair Assistance Program |
|--------------------|--|
| Subaward ID        | SUB-0167638                              |
| Subaward No        | 35                                       |
| Subaward Amount    | \$100,000.00                             |
| Subaward Type      | Subaward                                 |
| Subrecipient Name  | New Directions Housing Corporation       |
| Expenditure Start  | 4/20/2022                                |
| Expenditure End    | 6/16/2022                                |
| Expenditure Amount | \$42,330.00                              |

| Project Name | Emergency Home Repair Assistance Program |
|--------------|--|
| Subaward ID  | SUB-0167638                              |
|              |  |

| Subaward No        | 35                                 |
|--------------------|------------------------------------|
| Subaward Amount    | \$100,000.00                       |
| Subaward Type      | Subaward                           |
| Subrecipient Name  | New Directions Housing Corporation |
| Expenditure Start  | 7/6/2022                           |
| Expenditure End    | 8/4/2022                           |
| Expenditure Amount | \$25,435.00                        |

| Project Name       | Aid to St Elizabeth's to Support Homelessness Services |
|--------------------|--|
| Subaward ID        | SUB-0167642  |
| Subaward No        | 36   |
| Subaward Amount    | \$50,000.00  |
| Subaward Type      | Subaward   |
| Subrecipient Name  | St Elizabeth Catholic Charities                        |
| Expenditure Start  | 4/1/2022   |
| Expenditure End    | 6/30/2022  |
| Expenditure Amount | \$23,680.49  |

# Expenditure: EN-00270493

| Project Name       | Aid to St Elizabeth's to Support Homelessness Services |
|--------------------|--|
| Subaward ID        | SUB-0167642  |
| Subaward No        | 36   |
| Subaward Amount    | \$50,000.00  |
| Subaward Type      | Subaward   |
| Subrecipient Name  | St Elizabeth Catholic Charities                        |
| Expenditure Start  | 3/25/2022  |
| Expenditure End    | 3/31/2022  |
| Expenditure Amount | \$2,401.51   |

| Project Name      | Aid to St Elizabeth's to Support Homelessness Services |
|-------------------|--|
| Subaward ID       | SUB-0167642  |
| Subaward No       | 36   |
| Subaward Amount   | \$50,000.00  |
| Subaward Type     | Subaward   |
| Subrecipient Name | St Elizabeth Catholic Charities                        |
|                   |  |

| Expenditure Start  | 7/1/2022    |
|--------------------|-------------|
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$23,918.00 |

| Project Name       | Aid to Blessings in a Backpack to Support Food Assistance |
|--------------------|---|
| Subaward ID        | SUB-0167643   |
| Subaward No        | 37  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Blessings in a Backpack Floyd County                      |
| Expenditure Start  | 4/1/2022  |
| Expenditure End    | 4/29/2022   |
| Expenditure Amount | \$13,183.64   |

## Expenditure: EN-00270489

| Project Name       | Aid to Blessings in a Backpack to Support Food Assistance |
|--------------------|---|
| Subaward ID        | SUB-0167643   |
| Subaward No        | 37  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Subaward  |
| Subrecipient Name  | Blessings in a Backpack Floyd County                      |
| Expenditure Start  | 1/7/2022  |
| Expenditure End    | 3/25/2022   |
| Expenditure Amount | \$36,816.36   |

# Expenditure: EN-00270487

| Project Name       | Neighborhood Stormwater Initiative |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0167793                        |
| Subaward No        | 38                                 |
| Subaward Amount    | \$107,159.00                       |
| Subaward Type      | Contract: Definitive Contract      |
| Subrecipient Name  | Dan Cristiani Excavating Co.       |
| Expenditure Start  | 3/14/2022                          |
| Expenditure End    | 3/14/2022                          |
| Expenditure Amount | \$107,159.00                       |

| Project Name       | Neighborhood Stormwater Initiative |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0441103                        |
| Subaward No        | 116                                |
| Subaward Amount    | \$64,525.00                        |
| Subaward Type      | Contract: Definitive Contract      |
| Subrecipient Name  | TRC, LLC                           |
| Expenditure Start  | 7/1/2022                           |
| Expenditure End    | 9/30/2022                          |
| Expenditure Amount | \$64,525.00                        |

| Project Name       | Neighborhood Stormwater Initiative |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0441102                        |
| Subaward No        | 115                                |
| Subaward Amount    | \$53,910.00                        |
| Subaward Type      | Contract: Definitive Contract      |
| Subrecipient Name  | TRC, LLC                           |
| Expenditure Start  | 7/1/2022                           |
| Expenditure End    | 9/30/2022                          |
| Expenditure Amount | \$53,910.00                        |

# Expenditure: EN-00624495

| Project Name       | Neighborhood Stormwater Initiative |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0441101                        |
| Subaward No        | 114                                |
| Subaward Amount    | \$135,305.00                       |
| Subaward Type      | Contract: Definitive Contract      |
| Subrecipient Name  | TRC, LLC                           |
| Expenditure Start  | 7/1/2022                           |
| Expenditure End    | 9/30/2022                          |
| Expenditure Amount | \$135,305.00                       |

| Project Name | Neighborhood Stormwater Initiative |
|--------------|------------------------------------|
| Subaward ID  | SUB-0441100                        |
| Subaward No  | 113                                |
|              |                                    |

| Subaward Amount    | \$101,354.00                  |
|--------------------|-------------------------------|
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | TRC, LLC                      |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$101,354.00                  |

| Project Name       | Aid to Liberty Place to Support Homelessness and<br>Substance Abuse Services |
|--------------------|--|
| Subaward ID        | SUB-0167798  |
| Subaward No        | 39   |
| Subaward Amount    | \$50,000.00  |
| Subaward Type      | Subaward   |
| Subrecipient Name  | Liberty Place  |
| Expenditure Start  | 4/2/2022   |
| Expenditure End    | 6/20/2022  |
| Expenditure Amount | \$1,430.69   |

# Expenditure: EN-00270480

| Project Name       | Aid to Liberty Place to Support Homelessness and<br>Substance Abuse Services |
|--------------------|--|
| Subaward ID        | SUB-0167798  |
| Subaward No        | 39   |
| Subaward Amount    | \$50,000.00  |
| Subaward Type      | Subaward   |
| Subrecipient Name  | Liberty Place  |
| Expenditure Start  | 3/20/2022  |
| Expenditure End    | 3/24/2022  |
| Expenditure Amount | \$416.90   |

| Project Name    | Aid to Liberty Place to Support Homelessness and<br>Substance Abuse Services |
|-----------------|--|
| Subaward ID     | SUB-0167798  |
| Subaward No     | 39   |
| Subaward Amount | \$50,000.00  |
| Subaward Type   | Subaward   |
|                 |  |

| Subrecipient Name  | Liberty Place |
|--------------------|---------------|
| Expenditure Start  | 7/6/2022      |
| Expenditure End    | 9/26/2022     |
| Expenditure Amount | \$1,189.39    |

| Project Name       | Ohio River Greenway Trail Extension |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0329754                         |
| Subaward No        | 40                                  |
| Subaward Amount    | \$1,363,000.00                      |
| Subaward Type      | Contract: Definitive Contract       |
| Subrecipient Name  | MAC Construction & Excavating       |
| Expenditure Start  | 5/4/2022                            |
| Expenditure End    | 5/4/2022                            |
| Expenditure Amount | \$30,500.00                         |

# Expenditure: EN-00625575

| Project Name       | Ohio River Greenway Trail Extension |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0329754                         |
| Subaward No        | 40                                  |
| Subaward Amount    | \$1,363,000.00                      |
| Subaward Type      | Contract: Definitive Contract       |
| Subrecipient Name  | MAC Construction & Excavating       |
| Expenditure Start  | 7/1/2022                            |
| Expenditure End    | 9/30/2022                           |
| Expenditure Amount | \$422,029.16                        |

| Project Name       | Silver Creek Trail Landing Phase 1 (Ohio River Greenway) |
|--------------------|--|
| Subaward ID        | SUB-0329755  |
| Subaward No        | 41   |
| Subaward Amount    | \$1,487,000.00   |
| Subaward Type      | Contract: Definitive Contract                            |
| Subrecipient Name  | MAC Construction & Excavating                            |
| Expenditure Start  | 6/2/2022   |
| Expenditure End    | 6/2/2022   |
| Expenditure Amount | \$77,925.75  |

| Project Name       | Silver Creek Trail Landing Phase 1 (Ohio River Greenway) |
|--------------------|--|
| Subaward ID        | SUB-0329755  |
| Subaward No        | 41   |
| Subaward Amount    | \$1,487,000.00   |
| Subaward Type      | Contract: Definitive Contract                            |
| Subrecipient Name  | MAC Construction & Excavating                            |
| Expenditure Start  | 7/1/2022   |
| Expenditure End    | 9/30/2022  |
| Expenditure Amount | \$864,491.05   |

## Expenditure: EN-00625579

| Project Name       | Silver Creek Trail Landing Phase 2 (Ohio River Greenway) |
|--------------------|--|
| Subaward ID        | SUB-0329756  |
| Subaward No        | 42   |
| Subaward Amount    | \$965,000.00   |
| Subaward Type      | Contract: Definitive Contract                            |
| Subrecipient Name  | E-Z Construction Co., Inc.                               |
| Expenditure Start  | 7/1/2022   |
| Expenditure End    | 9/30/2022  |
| Expenditure Amount | \$74,346.50  |

## Expenditure: EN-00624355

| Project Name       | New Albany Township Trustee Response to Economic<br>Hardship Caused by COVID19 |
|--------------------|--|
| Subaward ID        | SUB-0011957  |
| Subaward No        | 27   |
| Subaward Amount    | \$100,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | New Albany Township Trustee  |
| Expenditure Start  | 7/1/2022   |
| Expenditure End    | 9/30/2022  |
| Expenditure Amount | \$100,000.00   |

| Project Name | Pediatric and Speciality Care Facility |
|--------------|--|
| Subaward ID  | SUB-0012159                            |

|                    | 1                                      |
|--------------------|--|
| Subaward No        | 32                                     |
| Subaward Amount    | \$375,000.00                           |
| Subaward Type      | Grant: Lump Sum Payment(s)             |
| Subrecipient Name  | Complete Pediatrics and Specialty Care |
| Expenditure Start  | 4/1/2022                               |
| Expenditure End    | 6/30/2022                              |
| Expenditure Amount | \$375,000.00                           |

| Project Name       | LifeSpring Neighborhood Healthcare Clinic |
|--------------------|---|
| Subaward ID        | SUB-0028142                               |
| Subaward No        | 28  |
| Subaward Amount    | \$296,156.00                              |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Upton Pry, Inc.                           |
| Expenditure Start  | 11/19/2021                                |
| Expenditure End    | 11/19/2021                                |
| Expenditure Amount | \$159,082.00                              |

# Expenditure: EN-00270680

| Project Name       | LifeSpring Neighborhood Healthcare Clinic |
|--------------------|---|
| Subaward ID        | SUB-0028142                               |
| Subaward No        | 28  |
| Subaward Amount    | \$296,156.00                              |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Upton Pry, Inc.                           |
| Expenditure Start  | 1/25/2022                                 |
| Expenditure End    | 1/25/2022                                 |
| Expenditure Amount | \$137,074.00                              |

| Project Name    | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|-----------------|---|
| Subaward ID     | SUB-0031927   |
| Subaward No     | 7   |
| Subaward Amount | \$50,000.00   |
| Subaward Type   | Grant: Lump Sum Payment(s)  |
|                 |   |

| Subrecipient Name  | Clark-Floyd County Child Abuse Prevention Council, Inc. |
|--------------------|---|
| Expenditure Start  | 8/30/2021   |
| Expenditure End    | 12/30/2021  |
| Expenditure Amount | \$28,520.91   |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0031925   |
| Subaward No        | 6   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | CASA of Floyd County, Inc.  |
| Expenditure Start  | 8/16/2021   |
| Expenditure End    | 12/31/2021  |
| Expenditure Amount | \$4,163.73  |

# Expenditure: EN-00038447

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027418   |
| Subaward No        | 31  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Big Brothers Big Sisters of Kentuckiana, Inc.                       |
| Expenditure Start  | 10/14/2021  |
| Expenditure End    | 12/23/2021  |
| Expenditure Amount | \$17,500.00   |

| Project Name      | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|-------------------|---|
| Subaward ID       | SUB-0027415   |
| Subaward No       | 30  |
| Subaward Amount   | \$50,000.00   |
| Subaward Type     | Grant: Lump Sum Payment(s)  |
| Subrecipient Name | Volunteers of America Mid-States                                    |
| Expenditure Start | 10/14/2021  |
|                   |   |

| Expenditure End    | 12/31/2021  |
|--------------------|-------------|
| Expenditure Amount | \$16,887.74 |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027411   |
| Subaward No        | 29  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Homeless Coalition of Southern Indiana                              |
| Expenditure Start  | 11/12/2021  |
| Expenditure End    | 12/24/2021  |
| Expenditure Amount | \$19,677.91   |

# Expenditure: EN-00038437

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0025880   |
| Subaward No        | 8   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Dare to Care, Inc.  |
| Expenditure Start  | 7/1/2021  |
| Expenditure End    | 7/1/2021  |
| Expenditure Amount | \$50,000.00   |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0024360   |
| Subaward No        | 5   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Hope Southern Indiana, Inc.   |
| Expenditure Start  | 8/9/2021  |
| Expenditure End    | 9/27/2021   |
| Expenditure Amount | \$50,000.00   |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027418   |
| Subaward No        | 31  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Big Brothers Big Sisters of Kentuckiana, Inc.                       |
| Expenditure Start  | 4/14/2022   |
| Expenditure End    | 6/30/2022   |
| Expenditure Amount | \$3,750.00  |

## Expenditure: EN-00430876

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0031927   |
| Subaward No        | 7   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Clark-Floyd County Child Abuse Prevention Council, Inc.             |
| Expenditure Start  | 4/15/2022   |
| Expenditure End    | 6/21/2022   |
| Expenditure Amount | \$10,910.35   |

# Expenditure: EN-00430878

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027415   |
| Subaward No        | 30  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Volunteers of America Mid-States                                    |
| Expenditure Start  | 4/1/2022  |
| Expenditure End    | 4/30/2022   |
| Expenditure Amount | \$4,947.26  |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027411   |
| Subaward No        | 29  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Homeless Coalition of Southern Indiana                              |
| Expenditure Start  | 4/1/2022  |
| Expenditure End    | 4/29/2022   |
| Expenditure Amount | \$8,819.79  |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0031925   |
| Subaward No        | 6   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | CASA of Floyd County, Inc.  |
| Expenditure Start  | 4/8/2022  |
| Expenditure End    | 6/24/2022   |
| Expenditure Amount | \$1,514.02  |

# Expenditure: EN-00284789

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027411   |
| Subaward No        | 29  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Homeless Coalition of Southern Indiana                              |
| Expenditure Start  | 1/31/2022   |
| Expenditure End    | 3/18/2022   |
| Expenditure Amount | \$21,502.30   |

| Project Name | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------|---|
| Subaward ID  | SUB-0031925   |

| Subaward No        | 6                          |
|--------------------|----------------------------|
| Subaward Amount    | \$50,000.00                |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | CASA of Floyd County, Inc. |
| Expenditure Start  | 1/18/2022                  |
| Expenditure End    | 3/25/2022                  |
| Expenditure Amount | \$1,931.84                 |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027418   |
| Subaward No        | 31  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Big Brothers Big Sisters of Kentuckiana, Inc.                       |
| Expenditure Start  | 1/20/2022   |
| Expenditure End    | 3/31/2022   |
| Expenditure Amount | \$3,750.00  |

## Expenditure: EN-00284682

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0031927   |
| Subaward No        | 7   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Clark-Floyd County Child Abuse Prevention Council, Inc.             |
| Expenditure Start  | 1/3/2022  |
| Expenditure End    | 3/31/2022   |
| Expenditure Amount | \$10,568.74   |

| Project Name    | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|-----------------|---|
| Subaward ID     | SUB-0027415   |
| Subaward No     | 30  |
| Subaward Amount | \$50,000.00   |
|                 |   |

| Subaward Type      | Grant: Lump Sum Payment(s)       |
|--------------------|----------------------------------|
| Subrecipient Name  | Volunteers of America Mid-States |
| Expenditure Start  | 1/1/2022                         |
| Expenditure End    | 3/31/2022                        |
| Expenditure Amount | \$28,165.00                      |

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0027418   |
| Subaward No        | 31  |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Big Brothers Big Sisters of Kentuckiana, Inc.                       |
| Expenditure Start  | 7/1/2022  |
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$10,000.00   |

# Expenditure: EN-00624349

| Project Name       | Aid to Non-Profit Organizations Due to Increased Demand on Services |
|--------------------|---|
| Subaward ID        | SUB-0031925   |
| Subaward No        | 6   |
| Subaward Amount    | \$50,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | CASA of Floyd County, Inc.  |
| Expenditure Start  | 7/1/2022  |
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$6,156.70  |

| Project Name      | Aid to Harvest Homecoming Festival to Support Local<br>Businesses/Tourism |
|-------------------|---|
| Subaward ID       | SUB-0038105   |
| Subaward No       | 3   |
| Subaward Amount   | \$50,000.00   |
| Subaward Type     | Grant: Lump Sum Payment(s)  |
| Subrecipient Name | Harvest Homecoming Festival Association Inc                               |
|                   |   |

| Expenditure Start  | 8/19/2021   |
|--------------------|-------------|
| Expenditure End    | 11/21/2021  |
| Expenditure Amount | \$20,775.00 |

| Project Name       | Dolly Parton Imagination Library of Floyd County |
|--------------------|--|
| Subaward ID        | SUB-0438581                                      |
| Subaward No        | 108  |
| Subaward Amount    | \$50,000.00                                      |
| Subaward Type      | Subaward   |
| Subrecipient Name  | New Albany Floyd County Education Foundation     |
| Expenditure Start  | 7/1/2022   |
| Expenditure End    | 9/30/2022  |
| Expenditure Amount | \$7,248.89                                       |

#### Expenditure: EN-00625613

| Project Name       | Fire House Construction       |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0438584                   |
| Subaward No        | 111                           |
| Subaward Amount    | \$1,000,000.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | GM Development Companies LLC  |
| Expenditure Start  | 8/2/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$641,357.33                  |

## Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-00429298

| Project Name                    | Neighborhood Stormwater Initiative |
|---------------------------------|------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded     |
| Total Period Expenditure Amount | \$11,641.00                        |
| Total Period Obligation Amount  | \$11,641.00                        |

| Project Name                    | Aid to Floyd County 4-H to Support Local Tourism |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded                      |
| Total Period Expenditure Amount | \$25,000.00                                      |
| Total Period Obligation Amount  | \$25,000.00                                      |

| Project Name                    | Ohio River Greenway and Silver Creek Trail<br>Pre-Development Costs |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$6,552.50  |
| Total Period Obligation Amount  | \$6,552.50  |

Expenditure: EN-00625583

|                                 | Ohio River Greenway and Silver Creek Trail<br>Pre-Development Costs |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$112,907.86  |
| Total Period Obligation Amount  | \$112,907.86  |

Expenditure: EN-00429305

| Project Name                    | Premium Pay - Essential Workers |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$686,354.65                    |
| Total Period Obligation Amount  | \$686,354.65                    |

Expenditure: EN-00429404

| Project Name                    | New Albany COVID 19 Small Business Grant Program<br>Round 2 |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded                                 |
| Total Period Expenditure Amount | \$561,750.00  |
| Total Period Obligation Amount  | \$561,750.00  |

Expenditure: EN-00028190

| Project Name                    | Administrative Expenses 2021 |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$24,147.50                  |
| Total Period Obligation Amount  | \$24,147.50                  |

Expenditure: EN-00429321

| Project Name                    | Administrative Expenses 2021 |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$8,705.00                   |
| Total Period Obligation Amount  | \$8,705.00                   |

| Project Name                    | Administrative Expenses 2021 |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$29,778.50                  |
| Total Period Obligation Amount  | \$29,778.50                  |

| Project Name                    | Administrative Expenses 2021 |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$7,487.00                   |
| Total Period Obligation Amount  | \$7,487.00                   |

Expenditure: EN-00028518

| Project Name                    | New Albany COVID 19 Small Business Grant Program<br>Round 1 |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded                                 |
| Total Period Expenditure Amount | \$175,000.00  |
| Total Period Obligation Amount  | \$175,000.00  |

Expenditure: EN-00625590

| Project Name                    | New Albany COVID 19 Small Business Grant (Garcia Madison) |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                              |
| Total Period Expenditure Amount | \$3,000.00  |
| Total Period Obligation Amount  | \$3,000.00  |

| Project Name                    | New Albany COVID 19 Small Business Grant (Wacky Nachos) |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                            |
| Total Period Expenditure Amount | \$10,000.00   |
| Total Period Obligation Amount  | \$10,000.00   |

# Report

# **Revenue Replacement**

| Is your jurisdiction electing to use the standard allowance of up to \$10 million, not to exceed your total award allocation, for identifying revenue loss? | Yes   |
|---|---|
| Revenue Loss Due to Covid-19 Public Health Emergency  | \$10,000,000.00                                     |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?  | No  |
| Please provide an explanation of how revenue replacement funds were allocated to government services  | None allocated to government services at this time. |

# Overview

| Total Obligations            |  |
|------------------------------|--|
| Total Expenditures           |  |
| Total Adopted Budget         |  |
| Total Number of Projects     |  |
| Total Number of Subawards    |  |
| Total Number of Expenditures |  |

# Certification

| Authorized Representative Name      | Marcus Alexander Flynn     |
|-------------------------------------|----------------------------|
| Authorized Representative Telephone | 5027941179                 |
| Authorized Representative Title     | Accountant                 |
| Authorized Representative Email     | mflynn@cityofnewalbany.com |
| Submission Date                     | 10/27/2022 9:35 AM         |