STATE OF CONNECTICUT DEPARTMENT OF HOUSING



CONTRACT AMENDMENT

Contractor: ImmaCare Inc.

Contractor Address: PO Box 260669, Hartford, CT 06126

Contract Number: 15DOH0401BP / 064ICI-MIS-2

Amendment Number: 1

Amount as Amended: \$1,379,483.00

Contract Term as Amended: 7/1/2015 - 6/30/2018

The contract between ImmaCare Inc. (the "Contractor") and the Department Of Housing (the "Agency"), which was last executed by the parties on effective date: 06/26/15, is hereby amended as follows:

- 1. The contract is amended because the total maximum amount payable under this contract has decreased by (\$53,474.00) from \$1,432,957.00 to \$1,379,483.00 due to a recission of 5.75% in SFY 2017 State funding.
- 2. Part I, Section A.1. of the original contract shall be deleted in its entirety.
- 3. Part I, Section A.2.a.i. of this contract shall be deleted and the following is substituted in lieu thereof:
 - i. The Contractor shall provide the following shelter options:
 - 75 (#) beds for individuals per night
 - __ (#) beds for families per night
 - __(#) units for individuals per night
 - __(#) units for families per night
 - 3. Part I, Section C.1.b. of the original contract shall be deleted in its entirety.
 - 4. Part I, Section D. 5. of the original contract shall be deleted in its entirety.
 - 5. Part I, Section E. 9 of the contract shall be deleted in its entirety.
 - 6. Part I, Section(s) G.4. of the contract shall be deleted in its entirety.
 - 7. Part I, Section(s) G. 7. of the contract shall be deleted and the following is substituted in lieu thereof:
 - g. Contractor shall use reasonable efforts to ensure that Clients complete a client satisfaction survey *[for each separate program]* provided by the Contractor. A summary of these surveys will be presented to the Board of Directors and approved in the Board minutes. These minutes will be reviewed during the Department's annual visit.
 - 8. Part I, Section H.1. of this contract, is hereby deleted and the following is substituted in lieu thereof::
 - 1. **Payment Provisions.** The Agency agrees to pay for the services provided and as described under this contract up to a maximum amount not to exceed \$1,379,483.00, for the entire contract period.

9. The budget, on page 12 of the contract is hereby deleted and the following is substituted in lieu thereof:

Effective Date: 11/18/2016

CONTRACT NUMBER: 15DOH0401BP A1 - \$1,379,483.00

CONTRACT PERIOD: 07/01/2015 through 06/30/2018

ST FISCAL YR (SFY): 2017

PROVIDER: ImmaCare Inc.
Approved by: Berrvia

	Approved by: Berryja	a)							
4000	4000 INCOME			S-STATE	-	ESS SSBG- FEDERAL	<u>6</u>		
	Program Funding Period:			/01/2016 hrough /30/2017		07/01/2016 through 06/30/2017			
			SFY16- \$502,957+SFY17- \$438,263+SFY18-				<u>Total Income</u>		
									l
								\$438,	263=TOTAL
			CO	NTRACT			ı		
			\$1	,379,483			ı		
	CONTRACT FUNDING				Ļ		Ļ		
-	4100 CONTRACT FUNDING	SID 16149 -DOH 1200901	\$	12,397	\$	425,866	\$	_438,263 12,397	
-	4101 State Funds 4102 Federal/Other Funds	20710-DOH 2070100	7	12,397	\$	425,866	\$	425,866	
-	4300 OTHER INCOME	20/10-0011 20/0100	5	12	\$	178,029	\$	178,029	
4303 Municipal Funds			-		\$	34,029	\$	34,029	
4307 United Way					\$	30,000	\$	30,000	
-	4316 Other (specify in narrative)				\$	114,000	\$	114,000	
	TOTAL INCOME			12,397	5	603,895	5	616,292	
			<u>s</u>		1=		=		
	DIDECT EVERNICES		197			ESS SSBG-			
5000	DIRECT EXPENSES			S-STATE	Ļ	FEDERAL		Total Expenses	
	5100 SALARIES		\$		\$	396,067	\$	396,067	
_	5101 Staff Salaries & Wages		\$	-	\$	396,067	\$	396,067	
-	5200 FRINGE BENEFITS		\$		\$	83,174	\$	83,174	
5300 CONTRACTUAL SERVICES			5	-	5	22.000	5	22,000	
5304 Other Contractual (specify in narrative)				Value 11 12 12 12 12 12 12 12 12 12 12 12 12	\$	22,000	\$	22,000	
5500 MATERIALS AND SUPPLIES			\$	_1,000	\$	16,500	\$	17,500	
5501 Food			\$	1,000	\$	9,000	\$	10,000	
_	5504 Other Mtrls and Sppls (specify in narrative)				\$	7,500	\$	7,500	
5600 FACILITIES			\$		\$	32,000	\$	32,000	
5603 Maintenance & Repair - Facility and Plant			_		\$	9,000	\$	9,000	
5604 Utilities				2000	\$	23,000	\$	23,000	
5800 OTHER EXPENSES			\$	2,500	\$	7,000	\$	9,500	
5801 Communications			\$	500	\$	4,000	\$	4,500	
5802 Insurance			\$	500	\$	3,000	\$	3,500	
5804 Staff Training and Conferences			\$	1,500	_		\$	1,500	
-	5900 CLIENT SUBSIDIES			7,600	\$		\$	7,600	
-	5901 Transportation			2,600	⊢		\$	2,600	
5905 Personal Items 5906 Other Client Subsidies (specify in narrative)			\$	1,500 3,500	⊢		\$	1,500 3,500	
			\$	1910		0.000000		3559380	
	TOTAL DIRECT EXPENSES			11,100	\$	556,741	\$	567,841	
7000	7000 INDIRECT EXPENSES			S-STATE		FEDERAL		Total Evnences	
7000	7100 ADMINISTRATIVE & GENERAL			1,297	5	47,154	\$	Total Expenses 48,451	
7111 Staff Salaries & Wages			\$	1,297	\$	47,154	\$	48,451	
TOTAL INDIRECT EXPENSES			5	1,297	\$	47,154	\$	48,451	
TOTAL EXPENSES			5	12.397	5	603.895	5	616.292	
***************************************					F	ESS SSBG-	F	-	
INCOME/EXPENSE SUMMARY			ES	S-STATE		FEDERAL		Total	
TOTAL INCOME			\$	12,397	\$	603,895	\$	616,292	
TOTAL EXPENSES			\$	12,397	\$	603,895	\$	616,292	
EXCESS/(SHORTAGE)			5	-	5		\$	-	
								10.72	

- 10. Part I, Section(s) I. 3. of this contract is hereby deleted and the following is substituted in lieu thereof:
 - a. No budget revisions proposed by the Contractor may be submitted later than 45 calendar days <u>prior</u> to the end of each contract year during the contract period, except that the Department may entertain, at any time, a budget revision for the purpose of increasing funds solely for the audit of the Program. The final financial report will show all category overruns. Costs incurred after the end of the budget period will be disallowed except those which the Department has expressly approved in writing and in advance.
- 11. All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

SIGNATURES AND APPROVALS

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IN WITNESS WHERPOF, the patters have executed this Contract amendment by their duly authorized representatives with full knowledge of and agreement with us to tak and conditions.

CONTRACTOR - IMMACARB INC.	
ECO. S.J. CH. HERT, Feerodies Durctur	Date
DEPARTMENT OF HOUSING WONNIE M. KLEIN, Curminioner	12B,16
CONNECTICUT ATTORNEY GENERAL. Approved as to form:	122/6