

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: Dixwell Neighborhood Corporation
Contractor Address: 60 Connolly Parkway Bldg. 2B, Room 107, Hamden, CT 06514
Contract Number: 15DSS4001HX / 093-1HX-HRD-1
Amendment Number: **Amendment 2**
Amount as Amended: \$130,879
Contract Term as Amended: 10/1/2015 to 6/30/2018

The contract between Dixwell Neighborhood Corporation (“Contractor”) and the Connecticut Department of Social Services (“Department”), which was last executed by the parties and approved by the Office of the Attorney General on 2/11/2016, and previously amended on 10/7/2016 is hereby further amended as follows:

1. The term of the contract is for an additional one (1) year and the end date of the contract is changed from 6/30/17 to 6/30/18.
2. The total maximum amount payable under the contract has increased by \$37,389 from \$93,490 to \$130,879 in order to continue services to the intended population of this contractor.
3. DSS contract/contact person on page 1 or the original contract shall be deleted and replaced as follows: Donna LoCurto at (860) 424-5323.
4. For the period 7/1/17 through 6/30/18, Part I Section J. labeled BUDGET AND PAYMENT PROVISIONS, subsection 1 of this contract and amendments thereof, shall be deleted and replaced with the following:

PART I

FINANCIAL SUMMARY

PROGRAM NAME:
PROGRAM NUMBER:

Dixwell Neighborhood Corporation
15DSS1HX A-2

Contract Amount	Requested	Adjustments	Approved
<i>For Amendments Only</i>			
Previously Approved Contract Amount			
Amount of Amendment	\$ 93,490	\$ 37,389	\$ 130,879

Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	<u>UNIT RATE</u>				
	1a. Bed Days				
	1b. Client Advocate				
	1c. Security Deposit				
	1d. Other Unit Rate Costs				
	TOTAL UNIT RATE	0	0	0	0
2	<u>CONTRACTUAL SERVICES</u>				
	2a. Accounting	2,000		1,000	3,000
	2b. Legal	0	0	0	0
	2c. Independent Audit	4,000		2,000	6,000
	2d. Other Contractual Services	0	0	0	0
	TOTAL CONTRACTUAL SERVICES	6,000	-	3,000	9,000
3	<u>ADMINISTRATION</u>				
	3a. Admin. Salaries	0	0	0	0
	3b. Admin. Fringe Benefits	0	0	0	0
	3c. Admin. Overhead	0	0	0	0
	TOTAL ADMINISTRATION	0	0	0	0
4	<u>DIRECT PROGRAM STAFF</u>				
	4a. Program Salaries	53,378		20,689	74,067
	4b. Program Fringe Benefits	7,733		3,301	11,034
	TOTAL DIRECT PROGRAM	61,111	-	23,990	85,101
5	<u>OTHER COSTS</u>				
	5a. Program Rent	10,500		4,500	15,000
	5b. Consumable Supplies	3,339		1,139	4,478
	5c. Travel & Transportation	2,900		425	3,325
	5d. Utilities	650		325	975
	5e. Repairs & Maintenance	0	0	0	0
	5f. Insurance	2,200		1,100	3,300
	5g. Food & Related Costs	0	0	0	0
	5h. Other Project Expenses	6,790		2,910	9,700
	TOTAL OTHER COSTS	26,379	-	10,399	36,778
6	<u>EQUIPMENT</u>	0	0	0	0
7	<u>PROGRAM INCOME</u>	0	0	0	0
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME	0	0	0	0
8	<u>TOTAL NET PROGRAM COST</u>	93,490		37,389	130,879
	(Sum of 1 through 6, minus Line 7)				

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

15DSS4001HX/093-1HX-HRD-1 A2

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

CONTRACTOR

Dixwell Neighborhood Corporation



William Gray, Executive Director

6/19/17
Date

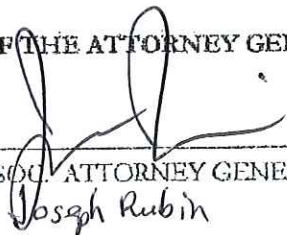
DEPARTMENT OF SOCIAL SERVICES



RODERICK L. BREMBY, Commissioner

6/27/17
Date

OFFICE OF THE ATTORNEY GENERAL



ASSOC. / ASSOC. ATTORNEY GENERAL (Approved as to form)
Joseph Rubin

6/30/17
Date



STATE OF CONNECTICUT
NONDISCRIMINATION CERTIFICATION -- Affidavit
By Entity
For Contracts Valued at \$50,000 or More

Documentation in the form of an affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended

INSTRUCTIONS:

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

AFFIDAVIT:

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of

an oath. I am Executive Director of Dixwell Neighborhood Corporation, an entity
Signatory's Title Name of Entity

duly formed and existing under the laws of Connecticut
Name of State or Commonwealth

I certify that I am authorized to execute and deliver this affidavit on behalf of

Dixwell Neighborhood Corporation and that Dixwell Neighborhood Corporation
Name of Entity Name of Entity

has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut

General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended.

[Signature]
Authorized Signatory

William F. Gray
Printed Name

Sworn and subscribed to before me on this 19 day of June, 2017.

[Signature]
Commissioner of the Superior Court/
Notary Public

Karen J. Bellamy
NOTARY PUBLIC
State of Connecticut
My Commission Expires June 30, 2019

Commission Expiration Date

OPM Ethics Form 1

Rev. 5.26.

1 of 2



**STATE OF CONNECTICUT
GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION**

Written or electronic certification to accompany a State contract with a value of \$50,000 or more, pursuant to C.G.S. §§ 4-250, 4-252(c) and 9-612(f)(2) and Governor Dannel P. Malloy's Executive Order 49.

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE: Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)

Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(E) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding Gifts by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a Gift to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

OPM Ethics Form 1

Rev. 5-26-15
Page 2 of 2

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after January 1, 2011, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(f)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(f)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after January 1, 2011 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(f)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>
N/A				

Lawful Campaign Contributions to Candidates for the General Assembly:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>
N/A				

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Dixwell Neighborhood Corporation
 Printed Contractor Name

 Signature of Authorized Official

William F. Gray
 Printed Name of Authorized Official

Subscribed and acknowledged before me this _____ day of June, 2017

 Commissioner of the Superior Court (or Notary Public)

My Commission Expires Karen J. Bellamy
 NOTARY PUBLIC
 State of Connecticut
 My Commission Expires June 30, 2019

OPM Ethics Form 5

Rev. 5-26-15



STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: _____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, except for the agreement listed below:

Table with columns: Consultant's Name and Title, Name of Firm (if applicable), Start Date, End Date, Cost, Description of Services Provided.

Is the consultant a former State employee or former public official? [] YES [X] NO

If YES: Name of Former State Agency, Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

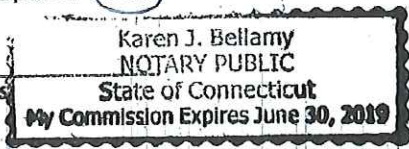
Dixwell Neighborhood Corporation, Signature of Principal or Key Personnel, Date, William F. Gray

Printed Name (of above), Awarding State Agency

Sworn and subscribed before me on this 19 day of June, 2017

Commissioner of the Superior Court or Notary Public

My Commission Expires



WORKFORCE ANALYSIS

Contractor Dixwell
Neighborhood Corporation

Address 60 Connolly
Parkway Bldg. 2B, Room
107, Hamden, CT .06514

Number of Connecticut Employees	
Full-time: 1	Part-time: 2
Employment figures obtained from	
Visual Check <input type="checkbox"/>	Employment Records <input type="checkbox"/>
Other <input type="checkbox"/>	Contractor «ContractorOrg» Number

JOB CATEGORIES	TOTALS	WHITE	BLACK	HISPANIC	ASIAN OR PACIFIC ISLANDER	AMER. INDIAN OR ALASKAN NATIVE	PERSON WITH DISABILITIES
		(No. of Hispanic Origin)	(No. of Hispanic Origin)	(No. of Hispanic Origin)	(No. of Hispanic Origin)	(No. of Hispanic Origin)	(No. of Hispanic Origin)
Officials & Managers							
Professionals	3		1	2			
Technicians							
Service Workers							
Office & Clerical							
Craft Workers (Skilled)							
Operations (Semi-Skilled)							
Laborers (Unskilled)							
TOTALS	3		1	2			
Totals One Year Ago							

FORMAL ON-THE-JOB-TRAINEES

Apprentices							
Trainees							

1. Have you successfully implemented an Affirmative Action Plan?

Yes No If yes, date of implementation 1982 ; If no, explain
Do you promise to develop and implement a successful Affirmative Action Plan?

Yes No N/A Explain:

2. Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-17 of the Connecticut Department of Labor Regulations, inclusive:

Yes No N/A Explain:

3. According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area?

Yes No Explain:

4. If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises?

Yes No Explain:

Authorized Signature:

Date: 6/19/17