

DRAFT

**UNEMPLOYMENT INSURANCE (UI) PROGRAM
FY 2012 ANNUAL FUNDING AGREEMENT ADDENDUM
for
MIDDLE CLASS TAX RELIEF AND JOB CREATION ACT OF 2012**

Grant/Agreement No. UI-XXXXX

(To be completed by DOL)

**CFDA # 17.225 Unemployment Insurance
CFDA#17.207 Employment Service**

- 1. Relationship to Other Agreements:** Unless inconsistent with specific terms and conditions provided herein, the terms and conditions of the Fiscal Year (FY) 2012 UI Program annual funding agreement between the U.S. Department of Labor, Employment and Training Administration (Grantor) and the **STATE/COMMONWEALTH** of _____ (Grantee) apply to the funds identified in Section 2 and are hereby incorporated by reference.
- 2. Grant Funds:** This annual funding grant agreement addendum addresses additional requirements applicable to funds appropriated in the Middle Class Tax Relief and Jobs Creation Act of 2012 (the Act) for Reimbursement of Short-Time Compensation (STC) benefit payments and for applicable administrative costs.
- 3. Purposes and Principles:** A major goal of the Act is to have State Workforce Systems pursue strategies that would positively impact employment levels by satisfying certain needs of unemployed workers and employers. To that end the Act makes funds available to states engaging in programs that have been shown capable of supporting the goal. Funds are also made available to evaluate the various strategies to help determine their effectiveness and to understand their impact on workers, employers, and the labor market. Consistent with transparency and accountability principles, reporting and monitoring of activities and associated funding are essential and grantees are expected to support these activities through compliance with all related requirements.
- 4. Limit on Funds:** Funds appropriated or otherwise made available to states by the Act are to be strictly used for the intended purposes as stated in agreements and guidance or operating instructions issued by the Department.
- 5. Reporting: Program Management and Financial Expenditure:** For the purposes of funding, accountability, monitoring, administering, and evaluating the various programs and activities required or permitted by the Act, the Grantee agrees to furnish timely to the Department the information, as approved by OMB under the Paperwork Reduction Act, as the Department, or its representative, requests. The manner in which states will satisfy such requests will be conveyed in guidance issued by the Department.

6. **Applicable Authority:** Funds authorized under the Act and provided under this grant agreement addendum must be expended in accordance with all applicable Federal statutes, regulations, policies, and guidance.
7. **Grant Expenditure Period:** The period of availability of funding varies for the different components and will be provided in the Notice of Obligation as funding is provided.
8. **Notice of Obligation:** Funds will be obligated and allocated via a Grant Modification/Notice of Obligation (NOO modification) to the FY 2012 annual funding agreement/grant. Obligations and costs may not exceed the amount obligated by the NOO modification unless otherwise modified by the Grantor. Upon execution of this addendum, the NOO modification to the FY 2012 grant will be issued. Funds are obligated for the amount indicated in the NOO grant modification document in accordance with the Grantee's UI allotment levels. The Federal obligation level will be amended by the Grant Officer to increase (or adjust) amounts available to the Grantee as funds become available for obligation and additional NOO (or Deobligation) grant modifications are required and issued.
9. **Signatory Information:** By signing below, the signatories agree to the terms and conditions of this agreement addendum on behalf of their respective agencies indicated below. In addition, the Grantee's expenditure of any funds properly granted hereunder constitutes acceptance of the award, including any new or additional terms and conditions as may be attached hereto.

GRANTEE:

(State/Commonwealth)

_____ TAX EIN# _____
 Agency Name

_____ PMS EIN# _____
 Mailing Address (If known)

_____ PMS PIN
 ACCT# _____

_____ DUNS# _____

BY _____
 Governor/Authorized Signatory Signature Date
 (Print name)

Title _____ Email _____
 Address _____

FOR GRANTOR: U.S. Department of Labor/Employment and Training Administration; 200 Constitution Ave NW; Room N-4716; Washington, DC 20210

_____ Date
 THOMAS C. MARTIN Signature
 Grant Officer