State of Illinois UNIFORM GRANT BUDGET TEMPLATE



FFATA Data Collection Form (if needed by agency)

Under FFATA, all sub-recipients who receive \$30,000 or more must provide the following information for federal reporting. Please fill out the following form accurately and completely.

4-digit extension if applicable:						
Sub-recipient DUNS: 111406189		Sub-recipient Parent Company DUNS:				
Sub-recipient Name:Purpose Workf	orce Solutions					
Sub-recipient DBA Name:N/A						
Sub-recipient Street Address: 120 W. Madison Suite 800						
City: Chicago State: Illinois		Zip-Code:60602 Congressional		Congressional [District:	
Sub-recipient Principal Place of Performance:Same as above						
City: Chicago	State: Illnois	Zip-Co	de:60602 Congressio		al District:	
Contract Number (if known):	Award Amount:		Project Period: From:		Project Period: To:	
	\$108,000	12/1/2021			12/31/2022	
State of Illinois Awarding Agency and Project Detail Description:						
We specialize in removing barriers to employment for young job seekers by preparing them for their first day and supporting them during						
their employment. We also act as the employer of record, removing any administrative burden from the internship host company.						
Under certain circumstances, sub-recipient must provide names and total compensation of its top 5 highly compensated officials. Please answer the following questions and follow the instructions.						
Q1. In your business or organization's previous fiscal year, did your business or organization (including parent organization, all branches and affiliates worldwide) receive (1) 80% or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements and (2) \$25,000,000 or more in annual gross revenue from U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements?						
Yes If Yes, must answer Q2 below. No X		If No, you are no	ou are not required to provide data.			
Q2. Does the public have access to information about the compensation of the senior executives in your business or organization (including parent organization, all branches and all affiliates worldwide) through periodic reports filed under section 13(a) or 15(d) of the Security Exchange Act of 1934 (5 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue code of 1986 (i.e., on IRS Form 990)?						
Yes XX No If No, you must provide the dat				provide the data.	Please fill out the rest of this form.	
Please provide names and total compens	sation of the top five officials:					
Name:				Amount:		
Name:				Amount:		
Name:				Amount:		
Name:				Amount:		
Name:				Amount:		