

Fiscal Federal Funding Accountability and Transparency Act (FFATA) Certification Copy

Organization Name	Collin County				
Address	2300 Bloomdale Rd, Suite 3100				
City	McKinney	State	Texas	Zip Code (9 digit)	75071
Payee Name	Collin County				
Address	Auditors Office 2300 Bloondale Rd #3100				
City	McKinney	State	TX	Zip Code (9 digit)	75071-8517
Vendor identification No.	17560008736	MailCode	026		
Payee DUNS No.	074873449				

1. Did your organization have a gross income, from all sources, of more than \$300,000 in your previous tax year?

Yes       No

2. Certification Regarding % of Annual Gross from Federal Awards.

Did your organization receive 80% or more of its annual gross revenue from federal awards during the preceding fiscal year?

Yes       No

3. Certification Regarding Amount of Annual Gross from Federal Awards.

Did your organization receive \$25 million or more in annual gross revenues from federal awards in the preceding fiscal year?

Yes       No

4. Certification Regarding Public Access to Compensation Information.

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 Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Yes       No

If Yes, where can this information be found?

If No, you must provide the names and total compensation of the top five highly compensated officers.  
Example: John Blum:500000;Mary Redd:50000;Eric Gant:400000;Todd Platt:300000;Sally Tom:300000

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Identify contact persons for FFATA Correspondence.

FFATA Contact Person #1

Name	Jeff May
Email	jmay@co.collin.tx.us
Telephone	(972) 548-4641

FFATA Contact Person #2

Name	Janna Benson-Caponera
Email	jbenson-caponera@co.collin.tx.us
Telephone	(972) 548-4638

As the authorized representative of the Organization, I hereby certify that the statements made by me in this certification form are true, complete and correct to the best of my knowledge.

E-Signature

Date