

Truth in Testimony Disclosure Form

In accordance with Rule XI, clause 2(g)(5)*, of the *Rules of the House of Representatives*, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: Ways and Means

Subcommittee: Worker and Family Support

Hearing Date: March 11, 2020

Hearing Title :

Combatting Child Poverty in America

Witness Name: RON HASKINS

Position/Title: SENIOR FELLOW, BROOKINGS

Witness Type: Governmental Non-governmental

Are you representing yourself or an organization? Self Organization

If you are representing an organization, please list what entity or entities you are representing:

NATIONAL ACADEMIES OF SCIENCE

If you are a non-governmental witness, please list any federal grants or contracts (including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current calendar year and previous two calendar years. Include the source and amount of each grant or contract. *If necessary, attach additional sheet(s) to provide more information.*

NOVA CONTRACT WITH THE NATIONAL ACADEMIES OF SCIENCES,
ENGINEERING MEDICINE: ASST SEC. FOR PLANNING AND EVALUATION
U.S. DEPT. OF HHS; CONTRACT HHS P233201400020B ORDER NO.
HHSP 23337058, \$1,250,000.

If you are a non-governmental witness, please list any contracts or payments originating with a foreign government and related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current year and previous two calendar years. Include the amount and country of origin of each contract or payment. *If necessary, attach additional sheet(s) to provide more information.*

NONE