

Instructions for Completing CDA 90

SIGNATURE PAGE (1)

- Enter Area Agency on Aging (AAA) name, Closeout period, PSA ##, and Date Submitted
- AAA Director must sign once all amounts have been finalized and report is ready for submission

GENERAL INSTRUCTIONS

All Title V/SCSEP Funds and local dollars expended for Title V/SCSEP activities are to be included. Total Title V/SCSEP Funds reported must not exceed current year Budget Display Allocations.

- Yellow highlighted cells are protected You cannot enter any additional data in these cells.
- The light yellow highlighted cells will auto-fill from the support pages
- The darker yellow highlighted cells are the totals and will auto-sum

Limits and Minimums

- Total AAA Administration costs may not exceed eight (8%) percent of the total federal allocation
- Total Program/PWFB costs must be a minimum of seventy-nine (79%) percent of total federal costs
- AAAs will be covering 100% of the 10% matching requirement for the State refer to current year's Title V Budget Display for match requirements for each AAA
- The maximum reimbursement amount allowable for indirect costs is ten percent (10%) of the Contractor's direct cash costs, excluding in-kind contributions and nonexpendable equipment unless there is an HHS accepted negotiated rate
 - Contractor must submit negotiated rate documentation to support indirect costs claimed in excess of 10%
 - The same limit applies to Subcontractor's indirect costs

SUMMARY PAGE (2):

Heading: Enter the Contract period, check Direct or Contracted, enter Contract number, PSA number, and Date completed on page 1. Header information will auto-fill on all other pages. The contract number shall consist of the letters TV, the fiscal year, and the PSA number (e.g., TV 1718-34).

Section A - Amounts will auto-fill from pages 3-5.

Section B - Amounts will auto-fill from Section A.



Section C – Compliance Check

• Verify Compliance requirements have been met after completing the entire closeout

Section D – Federal Match

Complete this section after completing the entire closeout.

- Enter the split between Cash and In-kind Matching Costs
 - The total should agree with Section B Total Costs for Federal Match

AAA ADMIN PAGE (3):

Complete this page if reporting AAA administrative costs.

Section A - Personnel

- Position Classification List each position performing administrative functions for SCSEP and their total annual wage by funding source (Federal and/or Federal Match funds)
- Total Salaries & Wages Will auto-sum
- Staff Benefits Enter the amount of Staff Benefit expenditures for all positions listed by funding source
- Total Personnel Will auto-sum by adding Total Personnel and Fringe Benefits

Section B - Operating Costs

- Enter total costs for Travel, Equipment, Supplies, Contractual, and Other by funding source (Federal and/or Federal Match funds) listing Other Costs included in the total
- Total Operating Costs Will auto-sum
- Indirect Admin Enter the amount of Indirect Costs expended for AAA Administration by funding source (reimbursable amount not to exceed (10%) unless a higher rate has been approved by HHS)
- Total Administration Costs Will auto-sum by adding Total Personnel from Section A, Total Operating Costs from Section B, and Indirect Admin
- Total Administration Costs must agree with Page 2, Section A, AAA Admin, Total Costs for Federal and Federal Match



PROJECT ADMIN PAGE (4):

Do not include AAA administrative expenditures on this page. This page is for subcontracted SCSEPs only.

Section A - Personnel

- Position Classification List each position performing administrative functions for SCSEP and their total annual wage by funding source (Federal and/or Federal Match funds)
- Total Salaries & Wages Will auto-sum
- Staff Benefits Enter the amount of Staff Benefit expenditures for all positions listed by funding source
- Total Personnel Will auto-sum by adding Total Salaries & Wages and Staff Benefits

Section B - Operating Costs

- Enter total expenditures for Travel, Equipment, Supplies, Contractual, and Other by funding source (Federal and/or Federal Match funds)
- List "Other" line item costs for those costs combined and included in the total column
- Indirect Costs Enter the amount of Indirect Costs expended by funding source (reimbursable amount not to exceed ten percent (10%) unless a higher rate has been approved by HHS)
- Total Project Admin Costs Will auto-sum by adding Total Personnel from Section A, Total Operating Costs from Section B, and Indirect Costs
- Total Project Admin Costs must agree with Page 2, Section A, Project Admin, Total Costs for Federal and Federal Match
- Contractor Information Enter Name, Address, & Telephone number where indicated

PROGRAM PAGE (5):

Section A – Participant Wages

- Participant Classification List participants by classification
- Number of Participants Provide the number of participants that worked in the classification
- Wage per Hour Enter the hourly wage of participants that worked in the classification
- Participant classifications, earning a different hourly wage, are listed on separate lines
- Total Hours Enter the total number of hours worked in this program
- Federal, Federal Match, and Program Income Enter the Classification's total annual wage by funding source (Federal, Federal Match, and Program Income)
- Total Wages Will auto-sum



Section B – Participant Fringe Benefits

- Enter the total cost for Physicals, FICA, Workers Compensation, and Other (identify other fringe benefits) by funding source
 - Note: Costs for Workers Compensation must be paid by the Contractor and cannot be paid by the Host agency
- Total Fringe Benefits Will auto-sum
- Total Participant Wages and Fringe Will auto-sum by adding Total Wages and Total Fringe Benefits (this amount must agree with Page 2, Section A, Program/PWFB, Total Personnel Costs columns for Federal, Federal Match, and Program Income)

Section C - Operating Costs

- Enter Travel, Equipment, Supplies, Contractual, Orientation, Assessment, etc. under Staff Costs and/or Other Costs columns as appropriate, by funding source (Federal, Federal Match, and Program Income)
- Specify Other Operating Costs reported (may be grouped), and enter amounts by funding source (Federal, Federal Match, and Program Income)
- Indirect Costs Enter the amount of Indirect Costs expended by funding source (reimbursable amount not to exceed ten percent (10%) unless a higher rate has been approved by HHS)
- Total Operating Costs Will auto-sum
- Total Program/OTHER Will auto-sum by adding Total Operating Costs and Indirect Costs; amount must agree with Page 2, Section A, Program/Other, Total Operating and Indirect Costs for Federal, Federal Match, and Program Other

EQUIPMENT PAGE (6)

AAA Administration & Project Administration Equipment Purchased (To be reimbursable, specify equipment in the Budget Summary)

- Enter Contractor and Subcontractor Admin equipment purchased with federal funds
- Enter Description and Quantity, Date Acquired, Location, ID or Serial Number, Make & Model, Unit Price, Total Cost and percentage of the Total Cost paid with Federal TV/SCSEP funds
- SCSEP Cost Will auto-calculate by multiplying the equipment Total Cost by the Federal %
- Administration Equipment Purchased Total Will auto-sum



Program Equipment Purchased (To be reimbursable, specify equipment in the Budget Summary)

- Enter Contractor and Subcontractor Program equipment purchased with federal funds
- Enter Description, Quantity, Date Acquired, Location, ID or Serial Number, Make & Model, Unit Price, Total Cost, and percentage of the Total Cost paid with Federal TV/SCSEP funds
- SCSEP Cost Will auto-calculate by multiplying the equipment Total Cost by the Federal %
- Program Equipment Purchased Total Will auto-sum

Individually tag and record ALL technology items, regardless of classification as equipment or supply in an equipment/technology database.

SUMMARY PAGE (2)

Section C – Compliance Check

Complete Section C after entering all information on pages 3-6.

- Enter your AAA's Federal Allocation from the latest budget display
- Verify Compliance requirements have been met

Section D - Federal Match

Complete Section D after entering all information on pages 3-6.

The Federal Match amounts reported in the closeout, and summarized in Section B, may contain Cash and/or In-kind costs.

- Identify specific Cash and/or In-kind Match costs amounts
- Federal Match Total must agree with Section B Total Costs for Federal Match

SUBMISSION DUE DATES:

Your TV-1718 contract closeout is due to the Department no later than July 30th.

By the due date, submit your completed TV Closeout (CDA 90) form in Excel format, along with a scanned copy of the signed closeout via email to FiscalTeam@aging.ca.gov. Signed hard copy closeout is no longer required.