

	A	B	C	D	E	F
1	Appendix B2-a, Page 1					
2	Document Date: 03/23/2021					
3	HUMAN SERVICES AGENCY GRANT BUDGET SUMMARY					
4	BY PROGRAM					
5	Name				Term	
6	Institute on Aging				July 1, 2019 - June 30, 2023	
7	(Check One) New Renewal ___ Modification <u>X</u>					
8	If modification, Effective Date of Mod. 7/1/2021 No. of Mod. 3					
9	Program: Community Living Fund					
10	Budget Reference Page No.(s)				Total	
11	Program Term				7/1/19 - 6/30/23	
12	Expenditures					
13	Salaries & Benefits	\$ 1,597,704	\$ 1,911,841	\$ 1,765,480	\$ 1,765,480	\$ 7,040,506
14	Operating Expense	\$ 252,126	\$ 303,694	\$ 270,413	\$ 270,413	\$ 1,096,646
15	Subtotal	\$1,849,830	\$2,215,535	\$2,035,893	\$2,035,893	\$8,137,152
16	Indirect Percentage (%)	15%	15%	15%	15%	15%
17	Indirect Cost (Line 16 X Line 15)	\$277,475	\$332,330	\$305,384	\$305,384	\$1,220,573
18	Allowable Indirect from Subcontracts	\$12,750	\$12,750	\$12,750	\$12,750	\$51,000
19	Capital Expenditure	\$59,153	\$60,000	\$0	\$0	\$119,153
20	Total Expenditures	\$2,196,573	\$2,620,615	\$2,354,027	\$2,354,027	\$9,525,243
21						
22	Other Operating Expense	\$428,618	\$481,903	\$372,600	\$372,600	\$1,655,722
23	Purchase of Services	\$2,237,574	\$2,090,378	\$1,817,752	\$1,817,752	\$7,963,455
24						
25	TOTAL EXPENDITURES	\$4,862,765	\$5,192,895	\$4,544,379	\$4,544,379	\$19,144,418
26	HSA Revenues					
27						
28	DAS Revenue (local)	\$3,695,702	\$3,946,600	\$3,453,728	\$3,453,728	\$14,549,758
29	Federal Funds	\$1,167,064	\$1,246,295	\$1,090,651	\$1,090,651	\$4,594,660
30						
31						
32						
33						
34						
35	Total Revenues	\$4,862,765	\$5,192,895	\$4,544,379	\$4,544,379	\$19,144,418
36	Full Time Equivalent (FTE)					
38	Prepared by:					
39	HSA-CO Review Signature:					
40	HSA #1					

	A	B	C	D	E	F	G	H	I	J
1										
2										
3										
4	Program: Community Living Fund									
5	(Same as Line 9 on HSA #1)									
6										
7	Operating Expense Detail									
8										
9										
10										
11										
12	Expenditure Category	TERM	FY 19-20	FY 20-21	FY 21-22	FY 22-23	TOTAL			
13	Occupancy		\$ 93,536	\$ 128,170	\$ 120,000	\$ 120,000	\$ 461,706			
14	Staff Travel		\$ 14,069	\$ 18,000	\$ 15,000	\$ 15,000	\$ 62,069			
15	Office Supplies, Postage		\$ 10,246	\$ 7,511	\$ 6,343	\$ 6,343	\$ 30,444			
16	Insurance		\$ 6,315	\$ 7,000	\$ 7,000	\$ 7,000	\$ 27,315			
17	Storage		\$ 4,114	\$ 5,000	\$ 4,500	\$ 4,500	\$ 18,114			
18	Web Hosting and User Fee		\$ 62,230	\$ 66,390	\$ 66,570	\$ 66,570	\$ 261,759			
19	Technology Equipment		\$ 23,189	\$ 20,000	\$ 8,000	\$ 8,000	\$ 59,189			
20	Wireless		\$ 29,211	\$ 35,000	\$ 35,000	\$ 35,000	\$ 134,211			
21	Recruiting Fees		\$ 1,712	\$ 2,000	\$ 2,000	\$ 2,000	\$ 7,712			
22	Professional Trainings		\$ 2,656	\$ 8,600	\$ 3,000	\$ 3,000	\$ 17,256			
23	Translation Services		\$ 4,849	\$ 6,023	\$ 3,000	\$ 3,000	\$ 16,872			
24										
25	TOTAL OPERATING EXPENSE		\$ 252,126	\$ 303,694	\$ 270,413	\$ 270,413	\$ 1,096,646			
26										
27	Other Operating Expense (excluded in Indirect Cost)									
28	Partner Agencies (Break Out and Provide Budget summary page for each)									
29	Catholic Charities		\$ 190,246	\$ 205,754	\$ 128,800	\$ 128,800	\$ 653,600			
30	Self-Help for the Elderly		\$ 152,774	\$ 157,450	\$ 125,350	\$ 125,350	\$ 560,924			
31	Conard House		\$ 77,178	\$ 118,700	\$ 118,450	\$ 118,450	\$ 432,777			
32										
33	Temporary Contract Employees		\$ 8,421				\$ 8,421			
34	OTHER OPERATING EXPENSE TOTAL		\$ 428,618	\$ 481,903	\$ 372,600	\$ 372,600	\$ 1,655,722			
35	HSA #3									

Program Name: Community Living Fund
 (Same as Line 9 on HSA #1)

Purchase of Service Detail

<u>Purchase of Service Category</u>	<u>TERM</u>	<u>FY 19-20</u>	<u>FY 20-21</u>	<u>FY 21-22</u>	<u>FY 22-23</u>	<u>TOTAL</u>
Global Purchase of Services		\$2,237,574	\$2,090,378	\$1,817,752	\$1,817,752	\$7,963,455
TOTAL PURCHASE OF SERVICE EXPENSE		\$2,237,574	\$2,090,378	\$1,817,752	\$1,817,752	\$7,963,455

HSA #4

	A	B	C	D	E	F	G
1							
2							
3							
4	Program: Community Living Fund						
5	(Same as Line 9 on HSA #1)						
6							
7	Capital Expenditure Detail						
8	(Equipment and Remodeling Cost)						
9							TOTAL
10	EQUIPMENT	TERM	FY 19-20	FY 20-21	FY 21-22	FY 22-23	7/1/19 - 6/30/23
11	No.	ITEM/DESCRIPTION					
12		NetSuite Vendor system	\$ 59,153.00				59,153
13		RTZ System Updates		\$ 60,000.00			60,000
14					0		0
15						0	0
16							
17							
18							
19							
20	TOTAL EQUIPMENT COST		59,153	60,000	0	0	119,153
21							
22	REMODELING						
23	Description:						
24							
25							
26							
27							
28							
29	TOTAL REMODELING COST						
30							
31	TOTAL CAPITAL EXPENDITURE						119,153
32	(Equipment and Remodeling Cost)						
33	HSA #4						

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term				
Catholic Charities	7/1/19-6/30/23				
(Check One) New Renewal _____ Modification _____					
If modification, Effective Date of Mod.	No. of Mod.				
Program: CLF Subcontract					
Budget Reference Page No.(s)					
Program Term	7/1/19-6/30/20	7/1/19-6/30/21	7/1/19-6/30/22	7/1/19-6/30/23	Total
Expenditures					
Salaries & Benefits	\$153,000	\$166,000	\$100,000	\$100,000	\$519,000
Operating Expenses	\$12,431	\$12,917	\$12,000	\$12,000	\$49,348
Subtotal	\$165,431	\$178,917	\$112,000	\$112,000	\$568,348
Indirect Percentage (%)	15%	15%	15%	15%	
Indirect Cost (Line 16 X Line 15)	\$24,815	\$26,837	\$16,800	\$16,800	\$85,252
Total Expenditures	\$190,246	\$205,754	\$128,800	\$128,800	\$653,600
HSA Revenues					
IOA CLF	\$0			\$0	\$0
TOTAL HSA REVENUES	\$0			\$0	\$0
Other Revenues					
Total Revenues	\$0			\$0	\$0
Full Time Equivalent (FTE)					
Prepared by: _____	Telephone No.: _____	Date: _____			
HSA-CO Review Signature: _____					
HSA #1					

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term				
Self-Help for the Elderly	7/1/19-6/30/23				
(Check One) New Renewal ____ Modification ____					
If modification, Effective Date of Mod. No. of Mod.					
Program: CLF Subcontract					
Budget Reference Page No.(s)					
Program Term	7/1/19-6/30/20	7/1/19-6/30/21	7/1/19-6/30/22	7/1/19-6/30/23	Total
Expenditures					
Salaries & Benefits	\$122,000	\$126,000	\$100,000	\$100,000	\$448,000
Operating Expenses	\$10,847	\$10,913	\$9,000	\$9,000	\$39,760
Subtotal	\$132,847	\$136,913	\$109,000	\$109,000	\$487,760
Indirect Percentage (%)	15%	15%	15%	15%	15.00%
Indirect Cost (Line 16 X Line 15)	\$19,927	\$20,537	\$16,350	\$16,350	\$73,164
Total Expenditures	\$152,774	\$157,450	\$125,350	\$125,350	\$560,924
HSA Revenues					
IOA CLF	\$0			\$0	\$0
TOTAL HSA REVENUES	\$0			\$0	\$0
Other Revenues					
Total Revenues	\$0	\$0	\$0		
Full Time Equivalent (FTE)					
Prepared by:	Telephone No.:	Date:			
HSA-CO Review Signature: _____					
HSA #1					

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term
Conard House	7/1/19-6/30/23

(Check One) New Renewal Modification

If modification, Effective Date of Mod. No. of Mod.

Program: CLF Subcontract	7/1/19-6/30/20	7/1/19-6/30/21	7/1/19-6/30/22	7/1/19-6/30/23	Total
Expenditures					
Salaries & Benefits	\$55,000	\$80,000	\$80,000	\$80,000	\$295,000
Operating Expenses	\$12,111	\$23,217	\$23,000	\$23,000	\$81,328
Subtotal	\$67,111	\$103,217	\$103,000	\$103,000	\$376,328
Indirect Percentage (%)	15%	15%	15%	15%	
Indirect Cost (Line 16 X Line 15)	\$10,067	\$15,483	\$15,450	\$15,450	\$56,449
Total Expenditures	\$77,178	\$118,700	\$118,450	\$118,450	\$432,777
HSA Revenues					
IOA CLF			\$0	\$0	\$0
TOTAL HSA REVENUES			\$0	\$0	\$0
Other Revenues					
Total Revenues			\$0	\$0	\$0
Full Time Equivalent (FTE)					

Prepared by: _____ Telephone No.: _____

HSA-CO Review Signature: _____

HSA #1