

123 WILLIAM STREET, 18TH FLOOR NEW YORK, NEW YORK 10038

Comprehensive Contract Management System (CCMS)/ Program Expense Summary Report (PERS) Fiscal Manual

Users: Neighborhood Development Area, Literacy, Discretionary

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Appendix of Forms:

The latest version of the forms and documents listed below are available on the DYCD website at:

https://www1.nyc.gov/site/dycd/involved/funding-and-support/cbo-financial-services.page

- 1. Certificate of Liability Insurance Sample
- 2. Certificate of Liability Insurance listing DOE or NYCHA
- 3. Certification by Broker 2020
- 4. Consultant Agreement 2020
- 5. Consultant Agreement Modification Form 2020
- 6. Request for Budget Modification 2020
- 7. EFT Enrollment Form (Direct Deposit)
- 8. Petty Cash Voucher
- 9. Space Rental Cost Allocation Form 2020
- 10. Subcontract Agreement 2020
- 11. Subcontract Agreement Modification Form 2020
- 12. Subcontract Agreement For Fiscal Conduit 2020
- 13. Subcontractor Approval Form 2020

Frequently Used Acronyms:

ACCO: Agency Chief Contracting Officer
CAFD: Contract Agency Finance Department

CIP: Central Insurance Program

DYCD: Department of Youth and Community Development

EFT: Electronic Fund Transfer/Direct Deposit **EIN #:** Federal Employer Identification Number

FMS: Financial Management System
PERS: Program Expense Report Summary

PIP: Payment Information Portal

PS: Personnel Services

OTPS: Other Than Personnel Services SUI: State Unemployment Insurance

Introduction and Overview

The Bureau of Budget and Finance (BBF) is responsible for monitoring the fiscal compliance of DYCD's human services contracts. Depending on the funding stream, there are different regulations which govern the administration and expenditure of program funds. To provide guidance to our Providers, DYCD has developed **four fiscal** manuals based on program and funding sources:

- 1. HHS Accelerator Financials (HHS)
- 2. Comprehensive Contract Management System (**CCMS**)/ Program Expense Summary Report (**PERS**)
- **3.** Workforce Innovation Opportunity Act (**WIOA**)
- 4. Fiscal Agent (YMS)

All four manuals are available on DYCD's website in the Fiscal Manuals section under CBO Financial Services.

https://www1.nyc.gov/site/dycd/involved/funding-and-support/cbo-fiscal-manuals.page

The requirements outlined in this Fiscal Manual must be adhered to by all contracted service providers ("Providers") funded by DYCD other than those contracts administered under HHS Accelerator Financials and WIOA contracts.

Effective FY20 The City of New York Health and Human Services Cost Policies and Procedures Manual ("Cost Manual") governs the treatment and claiming of costs for health and human service contracts. If there is a conflict between the terms of DYCD's Fiscal Manuals and the Cost Manual, the Cost Manual shall take precedence.

The Cost Manual was established to set guidance on indirect cost rate development and cost policies. The Cost Manual can be found at nyc.gov/nrc.

Bureau of Budget and Finance (BBF) Overview

BBF has four units that interact with Providers. Below is a description of each unit and its functions.

Budget Review & Risk Management Unit

The Budget Review Unit is responsible for ensuring that budgets and budget modifications submitted by the funded Providers are in compliance with City of New York and DYCD rules and regulations regarding budgetary requirements and fiscal accountability. The Budget Review Unit is responsible for the final approval of all budgets and budget modifications.

Budgets and Budget Modifications must first be submitted to the assigned Program or Contract Manager. Once approved, budget and budget modifications will be forwarded to Budget Review for final approval.

The Risk Management Unit coordinates New York City's Central Insurance Program (CIP) for Providers that do not have their own general liability insurance. This program includes specific insurance (General Liability, Worker's Compensation and Disability) that pertains to DYCD funded activities.

This Unit is also responsible for collecting and maintaining the general liability insurance certificate of each Provider not participating in CIP to ensure compliance with the contract terms.

Program Expense Report Summary (PERS) Payment Unit:

The Contract Agency Finance Division (CAFD) PERS Payment Unit is responsible for receiving financial reports, analyzing data, issuing payments, and providing assistance and training for the preparation of financial reports. A Fiscal Analyst is assigned to each contract and is responsible for the fiscal management of the contract. The Fiscal Analyst serves as the Provider's contact person for payment inquiries.

The cash flow process begins after the registration of the contract with the Comptroller's Office. When the contract is registered, the PERS Payment Unit automatically issues a **three month** advance. The Program Expense Report Summary (PERS) is the financial tool used to reimburse Providers for contract expenses. The **three-month** advance will be recovered against PERS submitted in the last quarter of the fiscal year.

NOTE:

The NYC Department of Finance mandates that all Providers participate in the Electronic Fund Transfer (E.F.T. - Direct Deposit) Program. Payments are deposited directly into the Provider's designated bank account. Enrollment forms must be faxed to the NYC Department of Finance at (212) 361-7058.

The PERS Payment Unit offers workshops for Providers in preparing the PERS and understanding DYCD's requirements for reimbursement. You may register by calling the CAFD Helpdesk at 646-343-6960 or sending an email to CAFDhelp@dycd.nyc.gov.

DYCD also contracts with Providers that offer technical assistance services to funded programs. The assistance includes, but is not limited to: accounting, budget development, setting up general ledgers, financial books and records, bank reconciliations, and payroll processing. Providers interested in receiving these services must contact the assigned Program or Contract Manager, who will make the referral to a technical assistance program.

Contract Agency Audit Unit:

The Contract Agency Audit Unit is responsible for conducting Fiscal Field Reviews (FFRs) of funded programs as well as evaluating related audits and reviews performed by independent Certified Public Accountants. This unit also issues Corrective Action Plans, often in conjunction with program staff. Contract Agency Audit Unit staff also provide technical assistance to Providers.

SECTION ONE

THE BUDGET

BUDGET OVERVIEW

After a contract is awarded, a budget is prepared based on the proposed services, funding availability, and contract term. Budgets generally include an allocation for Staff, Non-Staff Services, and Other Than Personnel Services (OTPS).

Below are the categories used by DYCD and the relevant Budget Codes within each category:

Personnel Services Categories:

1100 Salaries and Wages

1200 Fringe Benefits

1300 Central Insurance Program (CIP)

Non-Staff Services Categories:

2100 Consultants

2200 Subcontractors

2300 Stipends

2400 Vendors

2500 Fiscal Conduit

Other Than Personnel Services Categories:

3100 Consumable Supplies

3200 Equipment Purchases

3300 Equipment Other

3400 Space Cost

3500 Travel

3600 Utilities and Telephone

3700 Other Operational Costs

3800 Van Maintenance (for DYCD issued vehicles only)

3900 Fiscal Agent Services

Completed budgets are submitted to the assigned Program Manager. The budget will be reviewed by program and fiscal staff within DYCD. A final budget, agreed to by DYCD and the Provider, is included in the Provider's contract.

COMPLETING THE DYCD BUDGET

The DYCD Budget Form is an Excel Spreadsheet which uses a series of individual worksheets (see tabs entitled Salary, Fringe, Non-Staff Services and OTPS). The first page (the Budget Summary) will automatically be completed as these worksheets are prepared. Most of the information requested is self-explanatory. Below is some information you should keep in mind as you complete the DYCD budget.

General Information

- <u>DYCD ID #, Budget Code #, and Amendment #</u>: This information will be provided to you by DYCD.
- <u>State Unemployment Insurance Number</u>: This number appears on all correspondence relating to SUI, and may be obtained by calling the New York State Department of Labor at 1-888-899-8810.
- Operating Period: The term of the contract, (start date to end date) may overlap Fiscal Years. The City's Fiscal Year runs from July 1 to June 30. In multi-year contracts or contracts spanning more than one City Fiscal Year, a separate budget must be submitted for each Fiscal Year, indicating the portion of the award spent in each year.
- <u>In-Kind Contributions</u>: DYCD recognizes that in some cases the funding received from DYCD does not represent the full amount needed to operate a program. Providers often provide additional funding; in some cases, additional funding is a requirement of the RFP. The dollar value of existing resources from other funders that are allocated to this contract must be reflected as In-Kind Contributions. The equivalent monetary value of volunteer service must be added to the In-Kind Contributions category.
- <u>Total Provider Budget (all sources)</u>: This entry must reflect the total operating budget of the Provider, from all sources.
- <u>Total DYCD Budget</u>: This column reflects the total amount of DYCD funding allocated to each budget category. This column reflects the sum of the Program Administered and the Centrally Administered columns, described below.
- <u>Program Administered:</u> The portion of the budget that will be managed by the Provider.
- <u>Centrally Administered:</u> Specific items covered and paid by DYCD. **These are non-reimbursable costs, and Providers will not have access to these funds.** These costs include Fiscal Agent Service fees, Van Maintenance, and the Central Insurance Program (CIP). No other items may be included in this column.

PERSONNEL SERVICES (PS) refers to programmatic expenses for Salaries and Fringe Benefits. Please keep in mind the following information as you complete the DYCD budget:

• An employee paid with DYCD funds must perform work related to the DYCD contract, directly or indirectly.

For DYCD contracts, a full-time employee is defined as one who works 35 hours or more per week, is paid on a salary or hourly basis and retains a full-time position with the Provider. A full-time employee shall not be claimed as a part-time employee because her hours are shared between contracts. For example, if the employee is full-time and is scheduled to work one-fifth of her time on a DYCD contract, she is still considered a full-time employee for DYCD contract and PERS claiming purposes.

A part-time employee is generally defined as an employee who is scheduled to work less than 35 hours per week and/or is paid on an hourly or seasonal basis, and retains a part-time employment status with the Provider. A part-time employee shall not be claimed as full-time, simply because he/she only works on a DYCD contract.

The PERS must reflect the correct employment status of each employee as defined above.

• New York State's minimum wage will increase in a series of three annual changes as follows:

Effective Dates	Hourly Rate	
December 31, 2016	\$11.00 per hour	
December 31, 2017	\$13.00 per hour	
December 31, 2018	\$15.00 per hour	

- DYCD has developed titles appropriate for the provision of contracted services. No other titles may be used on DYCD budgets. There is a list of approved titles and the respective title codes on DYCD's website.
- The New York City Fiscal Year runs from July 1 through June 30.
- If the contract period overlaps fiscal years, multiple budgets must be prepared. Each budget must reflect the number of months worked in the specific fiscal year to which the budget applies. For example, a 16-month contract starting May 1, 2018 and ending August 31, 2019 would have three budgets (one covering FY 2018 for 2 months, one covering FY2019 for 12 months and one covering FY 2020 for 2 months.)
- An Annual Salary is the amount earned in a consecutive twelve-month period, whether or not that is the contract term.
- Some employees work on multiple programs. Estimate the percent of time devoted to each program and allocate only the appropriate amount to each contract. The total of all estimates (including programs not funded by DYCD) cannot exceed 100%.

Fringe Benefits

The maximum rate allowed for fringe benefits is 35%. The rate includes all benefits under the Fringe Benefits category. Fringe Benefits may include FICA, MTA Tax, Unemployment Insurance, Workers Compensation, Disability, Life Insurance, Pension, and Medical Benefits. Effective fiscal year 2017, the minimum Fringe Benefit rate of 7.99% for FICA and MTA tax is required for all contracts.

If a Provider utilizes the service of the Fiscal Agent, the minimum allocation for fringe is 12.99%. This represents 7.65% for FICA, .34% for MTA Tax plus a 5% estimated Unemployment Insurance rate.

New York City's Central Insurance Program

Providers have the option of buying into New York City's Central Insurance Program (CIP). The package offered under this program includes General Liability Insurance, Workers Compensation, and Disability Insurance. This insurance does not cover incidents of child or sexual abuse.

The cost of the CIP Insurance Package is 4.5% of the contract's total budget. CIP cannot be purchased for a portion of the contract term. Entering into the Central Insurance Program covers the provider for the full contract year.

Providers That Provide Their Own Insurance

Providers that choose not to buy into the CIP Insurance Program must provide DYCD with an original Certificate of General Liability Insurance, as well as any renewal certificates required during the contract term. Providers are required to have General Liability Insurance in the sum of not less than one million dollars (\$1,000,000) per occurrence to protect Providers themselves and the City of New York and its officials and employees against claims, losses, damages, etc. Required certificates not presented in a timely manner may result in provider being placed on check hold. Non-compliance will also be reflected in the final VENDEX evaluation of the contract. The policy must include theft insurance to guard against loss of equipment as a result of a break-in or robbery. Each Provider must be covered for loss due to burglaries, vandalism, fire or floods that affect equipment or furniture that is leased or purchased with DYCD funds. If such equipment is lost or stolen, the Provider must obtain a police report detailing the nature of the incident as well as submit a claim to the insurance carrier. In addition, the Provider must submit an official report to DYCD. The Provider must replace lost or stolen DYCD equipment with funds obtained from settlement of the claim. The Risk Management Unit must receive written notification within fifteen (15) days if the policy is cancelled during the contract term.

Insurance Requirements as of FY2017 (01/05/17) *CBOs are referred to as Providers in this manual

The New York City Comptroller's Office now requires that the Certificates of General Liability Insurance have the National Association of Insurance Commissioner (NAIC #) included on the right of the page next to the insurer A box.

The City Law Department requires DYCD to ensure that all of the Certificates of General Liability for our contracted CBOs* contain the following statement in the box labeled "Description of Operations/Locations/Vehicles":

"The City of New York, including its officials and employees, is included as Additional Insured."

Furthermore, Programs located in Department of Education (DOE) or New York City Housing Authority (NYCHA) facilities must carry insurance that covers and names the City of New York and DOE or NYCHA, as the case may be, as Additional Insured. The Certificate for such a program must contain the following statement in the box labeled "Description of Operations/Locations/Vehicles":

"The City of New York, and the Department of Education of the City School District of the City of New York [or New York City Housing Authority], including their officials and employees, are included as an Additional Insured."

Additionally, each certificate of insurance must be accompanied by a copy of the endorsement that is used for the Provider's policy. If the endorsement contains a box titled "Location(s) Of Covered Operations," it must list the location where services are being provided.

If services are provided in in multiple locations, under "Location(s) Of Covered Operations," the Provider must include the following language: "All locations of operations that are listed in the contract(s)" in lieu of having to list each location where services are provided.

DYCD **no longer** requires that the Certificate of General Liability Insurance and the Endorsement be sent directly from an insurance broker. Providers are able to email these proofs of insurance documents directly to **DYCDInsurance@dycd.nyc.gov** for review.

All other mandatory insurance policies must be made available for inspection by DYCD staff, CPA Auditors, or other authorized agents.

DYCD retains the right to enroll a non-compliant Provider in CIP and to withhold 4.5% of the contract.

Employer's FICA and MTA Tax are budgeted at 7.99% of total salaries. The maximum of wages taxed for the Social Security portion of FICA can be found at www.ssa.gov. Please note that these rates and dollar amounts are determined by the Federal government and are subject to change.

The Metropolitan Commuter Transportation Mobility Tax is imposed on certain employers and selfemployed individuals engaging in business within the Metropolitan Commuter Transportation District (MCTD). The MCTD consists of the five boroughs of New York City.

Employers:

- o This tax applies to you if you are required to withhold New York State income tax from wages and your payroll expense exceeds \$312,500 in any calendar quarter.
- o Tax rate: 0.34% (.0034) of your payroll expense for employees employed within the MCTD and allocated to your DYCD contract.

Please check the following link for a rate that applies to your organization:

https://www.tax.ny.gov/bus/mctmt/emp.htm

State Unemployment Insurance (SUI). For calendar year 2019, SUI is budgeted at the Providers insurance rate for up to and including the first \$11,400 of an employee's salary. As a result of changes in NYS law, the wage bases will be adjusted annually on January 1. The wage base is the amount of an employee's wages used to calculate an employer's Unemployment Insurance contributions. The table below lists the wage bases for 2017-2026.

<u>Please note</u>: Terminated staff as well as new staff hired within the same calendar year must be covered by SUI.

January 2017	\$10,900	January 2024	\$12,500
January 2018	\$11,100	January 2025	\$12,800
January 2019	\$11,400	January 2026	\$13,000
January 2020	\$11,600		
January 2021	\$11,800		
January 2022	\$12,000		
January 2023	\$12,300		

After 2026, the wage base will be adjusted on the first day of January each year to 16 percent of the state's average annual wage.

Medical Benefits, Life Insurance, Pension, Workers Compensation, and Disability costs are to be calculated based upon the Provider's policies.

Administrative Practices Related to Personnel Services

Salary increases will be at the discretion of the Provider, provided they are within the scope of services and are pre-approved by the Program Operations Unit.

Time sheets for all full-time and part-time employees must be dated and signed by the employee and the employee's supervisor and are subject to review by DYCD and its designees.

The Executive Director's time sheet must be signed by a member of the Board of Directors. The required director's signature may NOT be replaced by the signature of another member of management (e.g. comptroller or accountant).

Non-Staff Services Categories

Non-Staff Services Categories refers to the following categories: Consultants, Subcontractors, Stipend, Vendors and Fiscal Conduit.

Consultants, Subcontractors and Vendors may be corporations, nonprofit organizations, or individuals. The City requires Subcontractors to be registered in PIP but does not require PIP registration for Consultants or Vendors.

Consultants

A consultant hired on a health and human service contract is often a subject matter expert and does not perform or directly deliver a part of the prime contractor's programmatic contractual obligations. This means anyone assisting the Provider and not dealing directly with participants (ex: a STEM curriculum developer).

The services provided by the Consultant must be related to the program work scope described in the contract. Consultants cannot be salaried employees of the Provider. All consultants paid by the DYCD contract are required to be listed in this section.

For each consultant listed, a signed and notarized Consultant Agreement must be attached to the budget. Consultants retained by a Provider must enter into a written agreement detailing the specific tasks to be performed. Consultant Agreements and invoices must be maintained by the Provider for at least six (6) years. Consultant invoices must include the following details: rate, hours, type of services, date of service, consultant signature, and approval by the Provider's Executive Director or his/her designee.

Subcontractors

A Subcontractor hired on a health and human service contract is hired to **perform or directly deliver** a part of the prime contractor's programmatic contractual obligations. This means that anyone dealing directly with participants, whether an individual or an entity, (ex: a STEM teacher that teaches a robotics class).

Subcontractors are to be listed in the Subcontractor section the Budget. For each Subcontractor listed, upload a signed, notarized Subcontract Agreement.

Subcontractor Approval Process:

If a Provider proposes to engage a Subcontractor on a human service contract, DYCD requires:

- 1. The Subcontractor to be listed in the City's Payee Information Portal (PIP) nyc.gov/pip and
- 2. The Provider must identify the Subcontractor through the budget and invoice process. Provider shall identify the Subcontractor in the budget and attach the Subcontract agreement to the fiscal year budget

For any Subcontractor of more than \$20,000*, DYCD also requires:

- 1. The Subcontractor to be prequalified in HHS Accelerator, and
- 2. The Provider shall attach the Subcontract Agreement with a copy of the letter of confirmation from the Procurement Unit to the fiscal year budget

Subcontractors are approved for work on a human service contract when:

- 1. The DYCD Procurement Unit approves the subcontractor in PIP
- 2. The Provider has received a letter of confirmation from the Procurement Unit

The Provider should not engage a subcontractor until DYCD has approved that subcontractor. The prime vendor is responsible for listing all payments to subcontractors in PIP.

*For determining the value of a subcontract, all subcontracts with the same subcontractor shall be aggregated.

PASSPort requirement applies to Subcontractors receiving more than \$100,000 in City dollars.

DYCD offers a standard subcontract agreement template for human service contracts that Providers may use, but is not required to use.

Stipend

Stipends are only allowed for the benefit of participants (clients) of the program. Stipends may be included as a part of a training program, to assist a client in acquiring the skills necessary to obtain employment and to subsequently retain employment. A stipend is a nominal allowance and may be paid according to hourly, daily or weekly rates. A stipend **may not** be used to displace an employee or position, including partial displacement such as a reduction in hours and wages, to avoid hiring salaried workers, or to perform services that would otherwise be performed by an employee, including an employee who recently resigned or was discharged, an employee who is subject to reduction in workforce, or an employee who is on leave. Stipends may not be used to pay for service being received by the provider or to avoid payment of FICA, Unemployment Insurance, or Worker's Compensation Insurance. Additionally, any specific guidelines set forth by the respective DYCD Program area, must be followed. All stipends must be pre-approved by DYCD.

In some cases, it may be appropriate to provide *participant incentives*, other than stipends. Incentive Payments are non-monetary items (such as gift cards, metrocards) allowed only for the benefit of participants (clients) of the program. All such expenses must be properly supported with documents, such as invoices, that validate the expenses and with signed receipts indicating beneficiaries and time period. Depending on the guidelines set forth by the respective DYCD Program area, additional supporting documents may also be required which may include but not limited to, the Provider's incentive plan and a participant award letter. All supporting documents are subject to audit.

Programs will not be able to use program funds to pay volunteers (including mentors) for their time volunteering (since it is in the nature of volunteer work to be uncompensated.) Instead, Programs may thank volunteers by offering to defray the cost of their travelling by public transportation to the program location, by providing a subsidized meal or snack, or by recognizing volunteers with a certificate. These costs should not be budgeted in this category.

Vendors

A vendor hired on a health and human service contract provides non-programmatic services or goods. Examples of services provided by vendors are cleaning, security, etc. Vendor Agreements must be maintained on file with the Provider for a minimum of six (6) years. Providers must follow

the purchasing procedures outlined in the Fiscal Manual for the procurement of services from vendors (Section 4).

Fiscal Conduit (FOR DISCRETIONARY AWARDS)

Fiscal Conduits are DYCD contractors acting as financial intermediaries to specific sub-contractor Each sub-contractor must be listed and have a notarized Subcontract Agreement.

OTHER THAN PERSONNEL SERVICES (OTPS) – refers to programmatic expenses other than Salaries, Fringe Benefits or Non-Staff Services. The following is a description of the OTPS categories:

Consumable Supplies

Consumable supplies are supplies that do not last or are not permanent in nature. Consumable supplies include office and maintenance supplies, such as pens, stationery, chalk, erasers, towels, cleaning supplies, and books.

Equipment Purchase

Equipment purchases are supplies that are durable or permanent in nature, such as furniture, printers, fax machines, televisions, cameras, and computers, etc. All equipment purchased with DYCD funds must be listed on the budget.

All equipment and/or furniture purchased with DYCD funds is the property of the New York City Department of Youth and Community Development and must be tagged "Property of DYCD." At the end of the contract, all non-depreciated equipment that still has a useful life and was purchased with DYCD funds must be returned if requested by DYCD. Contact the assigned Contract Manager regarding continued use or other disposition of equipment. DYCD will consider requests for continued use or other recommended disposition of such equipment, upon termination or non-renewal of a contract. Contact the assigned Contract Manager regarding continued use or other disposition of equipment.

Equipment purchase must be listed with an item description, equipment cost, DYCD cost, model number, manufacturer and serial number for equipment \$500 or more. Purchases under \$500 will require an item description, Equipment Cost and DYCD cost only. All equipment purchased shall be itemized in the equipment inventory list page available on the PERS.

Equipment-Other

Costs associated with equipment include rental, lease, licensing fees, computer software, repair and maintenance of office/programmatic equipment used in the performance of the Provider's operation. Maintenance service contracts and payments for equipment repair and maintenance may also be reflected in this category. (Equipment or furniture leased with an option to buy may also become the property of DYCD at the end of the contract.)

Space Cost

Space costs are those costs associated with paying for the space necessary for program operation. Space Cost is separated into two subcategories:

Public School

Opening fees and room rentals paid to the Department of Education for school rental costs. A Provider must complete a Space Cost Allocation Plan and provide the DOE permit.

Space Cost/Other

All rent, mortgage and other expenses associated with the use of a facility. Along with the budget, the Provider will be required to submit a copy of its mortgage, lease, or month-to-month rental agreement. In addition, the Provider must submit a completed Space Cost Allocation Form. (Available on the DYCD website) The Agreement will reflect DYCD's allocated portion of the rental or mortgage charges. No renovation or construction projects may be paid for with DYCD's program funds. However, some repairs may be allowed, subject to prior written approval by DYCD.

Travel Costs

Travel costs refer to costs for local travel by the employees and, in some instances, participants of the Provider, to conduct official business related to the DYCD contract. Travel may be by public transportation, by a Provider's vehicle, or personal automobiles used for provider business. Costs for the use of a personal automobile will be reimbursed at the maximum rate provided on the IRS website IRS Standard Mileage Rate. A mileage log must be maintained for both personal and business-owned vehicles used to conduct business related to the funded program.

All participant-related travel expenses, e.g., bus trips and local travel, is to be budgeted under this category. Bus companies <u>must</u> be insured.

Providers must charge expenses for business-owned vehicles such as car maintenance, gasoline, tolls and automobile insurance to this category. Provider-owned vehicles used for DYCD purposes must be co-insured with the City of New York as named beneficiary.

Tickets for traffic violations may not be paid for with program funds.

Utilities and Telephone

Utility, telephone, internet and cable service costs related to the DYCD program are allowable for reimbursement. This includes bundled packages of internet, telephone, and/or cable. Costs must be pro-rated over the operating period.

Other Operating Costs

Expenses which do not fall into any of the categories described above are referred to as Other Operating Costs. These expenses are further separated into two subcategories: **Operating Costs** and **Indirect Costs**.

Operating Costs

Costs such as printing, postage, admissions, publications, bank charges, subscription costs, and wiring associated with computer set up are considered operating costs. This category also includes the cost of general liability insurance for Providers not participating in the Central Insurance Program and Audit Fees. Participant costs such as refreshments, entrance fees, awards, T-shirts, uniforms, sporting and recreational supplies are included in this category.

Admission/Entrance Fees for Participants

Expenditures must be incurred during the operating period in which goods and services are received or delivered. Tickets purchased for trips must be used for the participants under the program of that budgeted period. The Provider will not be reimbursed for tickets purchased in one contract year but used for participants of the subsequent contract year.

Audit Fees

DYCD will reimburse Providers for a portion of their audit fees. If the provider receives funding from other sources besides DYCD, the provider may only include DYCD's proportionate share. The proportionate share must be calculated by dividing the total DYCD budget by the Provider's total budget and applying that percentage to the total Audit Cost. Audit fees are to be budgeted and expensed in the contract year in which the audit is performed. For example, an audit for contract year 2010 must be budgeted for in contract year 2011.

Indirect Costs-Indirect Rate

Effective 7/1/19 the City of New York has adopted a **Health and Human Services Cost Policies and Procedures Manual ("Cost Manual")** to provide uniform cost rate guidance for health and human service contracts. The Cost Manual can be found at nyc.gov/nrc.

The Cost Manual provides guidance on Indirect Cost Rate (ICR) calculations and claiming on the PERS.

Historically, the indirect rate was calculated based on the total funding of an individual contract. Moving forward, the Indirect Rate will be calculated excluding the following categories from your budget:

- Stipends
- Travel
- Indirect Rates
- Space Cost

Additionally, equipment costs greater than \$5,000 and subcontractors costs greater than \$25,000 are also excluded. The indirect rate submitted by providers will applicable for all DYCD human service funded contracts.

The new (Cost Manual) calculation will automatically apply to all new, renewal, or negotiated acquisition extension contracts and budgets.

All other contracts can decide to opt in or opt out.

Van Maintenance

If the Provider has been assigned a city-owned van, DYCD will provide maintenance through the Department of Citywide Administrative Services. A total of \$2,000 will automatically be deducted annually from the contract for Van Maintenance. This cost is centrally administered and is not reimbursable.

Fiscal Agent Services

DYCD has contracted with a firm to provide fiscal agent services to DYCD funded contractors. All Providers have the option of purchasing the services of the Fiscal Agent who will:

- Establish financial records
- Maintain and report on available provider budget balance
- Verify invoices
- Provide payroll services and personnel reporting
- Ensure the timely filing and payment of employment-related taxes
- Ensure that Accounts Payable and Ledger system and activities are in accordance with generally accepted accounting practices and procedures
- File Federal Tax Form 941 and 941B
- Prepare W2s, W3s, and 1099s

Fiscal Agent Fees

Fiscal Agent Services fees must be allocated in the Fiscal Agent Service category. Separate fees must be allocated for each individual budget. Effective 7/1/18 the Fiscal agent fee has changed, see below.

Contract Dollar Value Fiscal Agent Service Fees

\$2,500 -\$25,000 \$420

\$25,001 and over 3% (of each budget)

Note: For Providers who only have standalone Discretionary contacts under \$25,000, there is no fee. A Provider that chooses to be placed under, or is mandated to use, the services of the Fiscal Agent must have all of its non WIOA DYCD contracts administered by the Fiscal Agent. The Fiscal Agent fees are centrally administered costs and are not reimbursable. Those Providers that are mandated for Fiscal Agent services will receive written notification from DYCD.

SECTION TWO

BUDGET MODIFICATIONS

BUDGET MODIFICATION POLICIES AND PROCEDURES OVERVIEW

A Budget Modification does not increase or decrease a contract award amount; it serves to reallocate money between line items of an already approved budget. Changes to the approved and registered budget may be submitted only as they relate directly to the accomplishment of services required in the contract. Providers must submit all modifications (both programmatic and budgetary) to the assigned DYCD Contract Manager in Program Operations. Budget modifications must not be implemented prior to approval by CAFD.

Forms to request a contract modification can be accessed through the DYCD website: http://www1.nyc.gov/site/dycd/involved/funding-and-support/cbo-budget-review-risk-management.page.

The number of budget modifications allowed is based on the term of the contract. Providers must plan their programs and budgets carefully, since there is a limit on the number of allowable budget modifications. The number of modifications accepted is based on the contract term, as follows:

Contract Term	Number of Budget Modifications Allowed
3 months or less	1 Modification
4 to 8 months	2 Modifications
9 to 12 months	3 Modifications

Requests are to be submitted to the assigned Contract Manager at least two weeks prior to their proposed effective date. No budget or programmatic changes may be made without prior written approval from DYCD.

Please note: The last day for budget modifications to be submitted is April 30 of the Fiscal Year. Providers with contracts that were registered after mid-March of the fiscal year are exempt from the above deadline.

Questions regarding the budget modification process must be directed to your DYCD Contract Manager.

SECTION THREE

INTERNAL CONTROLS AND GENERAL ACCOUNTING PROCEDURES

INTERNAL CONTROLS

The Providers' executive and management staff are responsible for establishing and maintaining an internal control structure. Internal controls will vary from one Provider to the next, depending on such factors as their size, nature of operations and objectives. However, the need for internal controls remains the same; a Provider should find the most efficient and effective way of implementing its needed internal control procedures.

DYCD expects all funded Providers to be in compliance with the new requirements of the New York Not-for-Profit Corporation Law, as mandated by the Non-Profit Revitalization Act signed into law in New York in 2013 and subsequent amendments passed in 2016. In particular (and without limitation), DYCD expects all funded not for profit Providers to maintain and follow a conflict of interest policy, and, if it is a Provider with 20 or more employees and annual revenue in excess of \$1,000,000, a whistleblower policy. Please note that compliance with the requirements of the Nonprofit Revitalization Act are subject to verification by DYCD staff and/or DYCD's contracted audit firms. There are many publicly available resources to help Providers understand the new governance requirements of New York law (which go beyond the points highlighted here); DYCD can suggest possible resources, if necessary.

The following are examples of internal control activities:

- <u>Segregation of Duties</u>: Duties and responsibilities must be divided among different staff members to reduce the risk of error or fraud. In large Providers there are often different staff members responsible for procurement and for payment.
- <u>Proper Execution of Transactions and Events</u>: Transactions and significant events must be authorized only by persons acting within the scope of their authority.
- <u>Documentation of Transactions</u>: All transactions need to be clearly documented, and all documents must be readily available for inspection.
- <u>Secure Physical and Financial Assets:</u> A Provider must safeguard its assets, including cash and equipment. Periodic inventory checks will help prevent loss or unauthorized use of the Provider's assets.

Retention of Accounting Records

In accordance with City contract requirements, Providers must retain all contract related financial records, including auditors' reports, for six (6) years after the final invoice of the contract is paid, and is subject to audit/or investigation for such an additional period.

Bookkeeping Practices and Procedures

Providers must maintain separate accounting records for funds received through each contract with DYCD. Accounting records must be established and maintained in accordance with Generally Accepted Accounting Principles. It is essential that the Provider maintain accurate, complete and permanent books and records, available for inspection by a DYCD staff member or its designee.

DYCD staff and its representatives will conduct both announced and unannounced site visits to Providers during the contract term to ensure that the books and records are being appropriately maintained.

Timesheets

Timesheets must be completed for all full and part-time employees. Each timesheet must be signed and dated by the employee and the employee's supervisor. The Executive Director's timesheet must be reviewed and approved by a member of the Board of Directors.

Electronic timesheets may be maintained if they are certified as accurate by the signature of the Executive Director or a senior level management designee.

Cost Allocation

Cost allocation is the distribution of one cost across multiple funded programs. A cost allocation methodology identifies the type of expenses that are being claimed and establishes a basis for allocating costs to business units or cost centers based on an appropriate allotment of such cost.

1. Requirement:

Each provider must develop a written cost allocation plan. The plan must include an explanation of its methodology detailing the basis used in allocating cost to its various DYCD programs. Time distribution records must reflect an after-the-fact determination of the actual activity of each employee. Cost allocation is established on the premise that Providers maintain an adequate accounting system and accounting records to document costs and support claims. Allocation methods and distribution of cost must be based on a generally accepted accounting practice prescribed by OMB Super Circular regulatory guidance and in accordance with Generally Accepted Accounting Practice. Refer to Office of Management and Budget for guidance: 2 CFR Chapters I, and Chapter II, Parts 200, 215, 220, 225, and 230 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and promptly made available to DYCD or its contracted CPA firms.

2. Approach:

When allocating cost to a particular contract the following must be considered in determining an appropriate base for allocating costs:

- a. Allowable direct costs that apply to only one program must be charged directly to that program or contract and cannot be cost allocated.
- b. Allowable direct costs that can be identified across multiple programs must be prorated using a base most appropriate to the particular cost being pro-rated.
- c. Allowable indirect costs (cost that benefit all programs and cannot be identified to a specific program) are allocated to programs, grants, etc., using a base that results in an equitable distribution.
- d. A provider is not allowed to charge more than 100% of a cost across programs.

3. Documentation:

Regardless of the cost allocation method used, expenses claimed must be supported by documentation of cost distribution showing the ratio of the benefit each program received. Please note that approval of a DYCD budget does not constitute approval of a Provider's cost allocation plan and method used.

A reasonable cost allocation plan must be presented to show the basis used to allocate the amounts incurred in each of the funded programs. The basis applied cannot be based on the budgeted amount; rather it must be based on the benefit derived by each program from that particular expense, (e.g. time, space, usage, etc.).

4. Audit:

All expenses submitted for reimbursement are subject to an audit to assess whether the expenses are allowable and reasonable based on the cost allocation method used. Unreasonable cost allocations will result in disallowed costs. See Section Eleven for additional details on audit requirements.

Employees Personnel Files:

Employees' personnel files must include all pertinent documents used in the hiring process. The hiring documents must include at the minimum, the following documents:

- Employment Application
- I-9 Employment Eligibility Verification
- Authorized working papers for individual under 18
- Job Description
- W-4 form
- Resume
- Copy of Educational Degree, Diplomas or Certificate
- Background Check
- Personnel Action Form

Resigned Employees:

Employee vacation and sick time accumulated during the course of employment are allowed to be paid to that employee under the DYCD contract upon separation from employment, when such separation occurs during the contract operating period and the Provider has a policy allowing for payment for such time. If the employee's time is cost allocated, it must be charged accordingly.

Vendor Invoices

All invoices maintained as documentation to support a claim must be in its original form, and must display the Provider's name as the recipient of the goods/services. All invoices must be maintained and made available for review, in accordance with Generally Accepted Accounting Principles.

If invoices do not need to be submitted, they must nevertheless be maintained and made available for review, in accordance with the record keeping requirements of the contract.

Bank Accounts

Providers are not required to maintain separate bank accounts for each contract award. Electronic Funds Transfers (EFT) of the contract award can now be made to a single provider bank account.

Electronic Funds Transfer – EFT (Direct Deposit)

Local Law 43 of 2007 requires any vendor providing the City with services valued at more than \$25,000 to enroll in the Vendor Payment Direct Deposit program. DYCD encourages <u>all vendors</u> that do business with the City to enroll in the Direct Deposit program.

Benefits of Direct Deposit ("EFT") Payments

• Electronic payment is safer and more secure - Paper checks can be lost in the mail, stolen, or delivered to the wrong address

- Receive payments faster EFT payments are deposited directly into the vendor's bank account.
- Electronic payment records are available online Use the City's Payee Information Portal (PIP) for current vendor payment records
- Enroll for EFT/Direct Deposit program online via the Payee Information Portal (PIP) at nyc.gov/PIP. PIP is now available for vendors to set up a single bank account for all vendor payments made from the New York City Financial Management System (FMS). Both existing and new city vendors can sign up for EFT/Direct Deposit through PIP.
- Existing EFT enabled vendors with a PIP User ID and password can update their bank account information in PIP.
- New vendors doing business with the City of New York can create a new PIP account and vendor code, and then add their bank account information for EFT/Direct Deposit immediately.
- Providers are required to transfer all DYCD funds from the EFT account to the appropriate
 payroll and general accounts. Bank reconciliation of all accounts must be prepared on a
 monthly basis, reviewed by upper management, and kept on file for examination by DYCD
 or its designees.

Signatories

DYCD requires that a Provider have at least two signatures on each check. Every Provider is expected to comply with this policy unless it has received prior written authorization from DYCD stating otherwise.

Cash Flow

The cash flow process is initiated following registration of the contract with the New York City Comptroller's Office. DYCD is unable to release funds until the contract is registered.

Effective 7/1/17 the policy has changed from a **two** to a **three-month** initial advance. An initial advance equivalent to three months of the Providers approved budget will be issued automatically by the Contract Agency Finance Department upon contract registration. If the contract term is less than six (6) months, the initial advance will be one-half of the budget. Funds are electronically transferred to the accounts of Providers enrolled in the EFT Program.

Disbursements

Disbursements, except those from petty cash funds and payment with the Provider's corporate credit or debit card, must be made by check. Providers must adhere to the following control functions when handling DYCD disbursements

- The function of approving vouchers, preparing checks and recording disbursements must be handled by different employees.
- Employees handling disbursements should not have duties related to cash receipts or the reconciliation of bank accounts.
- Vouchers payable should be established for each payment and recorded promptly.
- Payment should be made only after the original voucher and all copies of pertinent papers have been approved.

- Invoices should be cancelled or stamped "Paid" in order to prevent duplication of payment.
- Confirmation receipts for online purchases must be printed out and retained by Providers.
- A periodic review of vouchers should be made by an authorized person to determine that all processing steps are being followed properly.

If a Provider is unable to comply with the control functions described above, comparable reasonable procedures must be developed to allow for proper accountability and segregation of duties in handling disbursements. A written description of these comparable procedures must be sent to your Contract or Program Manager.

Unclaimed Funds

Unclaimed funds are funds that become available in the Provider's bank account due to returned checks or checks that were never cashed by the intended recipient. Undistributed funds remain the property of DYCD and must be reimbursed to DYCD at the end of the fiscal year. The following steps must be taken to account for DYCD unclaimed funds:

- Providers are required to exhaust all efforts to contact the intended recipient, in a timely manner, within 90 days from the check date.
- After the 90-day period, the provider is required to place a stop payment on those checks and return the funds to DYCD within 10 days.
- Providers are required to retain all evidence of the steps used to contact the intended recipients.
- Providers are not allowed, at any time, to submit DYCD unclaimed funds to New York State Office of Unclaimed Funds.

SECTION FOUR

PURCHASING PROCEDURES

GENERAL PROCUREMENT POLICIES

Any procurement of goods and/or services is to be conducted in the Provider's name. The Provider is responsible for ordering, receiving, inspecting and accepting merchandise. The name of the Department of Youth and Community Development, its officials, employees, or the City of New York must not be used, under any circumstances, for the purpose of ordering and/or securing goods and services from a vendor. Invoices, bills, receipts, etc., must be issued in the name and address of the Provider or its immediate affiliate. All expenditures must comply with applicable laws and contract regulations, and are subject to audit.

Purchasing Requirements/Competitive Bidding

The procurement of goods shall be governed by the competitive bidding requirements described below. The purpose of competitive bidding requirements is to establish a procedure that will secure the best possible price for goods and services while allowing for appropriate competition. The procurement process must be open and competitive (that is, no vendor qualified to provide the goods or services may be restricted from bidding and there must be fair competition among those bidders). These procedures also apply to the rental or leasing of equipment. A procurement shall not be artificially divided in order to meet the requirements of this section. The monetary thresholds identified below refer to payments made, or obligations undertaken in the course of a one (1) year period with respect to any one (1) person or entity.

• For purchases with a value of \$5,000 or less, no competitive bids are required unless federal funds are used. If federal funds are used the threshold is \$3,500 or below for noncompetitive bids, provided the price is reasonable, subject to the limitation below for CSBG funds.

Documentation of the purchase must be maintained by the Provider. This documentation must include the name of the vendor, the item purchased, the date and amount paid.

• Purchases from \$5,001 - 25,000

Contractor shall conduct sufficient market research and/or competition to support its determination that the price of such purchased goods, supplies, services or equipment is reasonable. Documentation of the market research and the purchase must be maintained by the Provider. This documentation must include the name of the entities contacted, the vendor, and the item purchased, the date and amount paid

• Purchases \$25,001 or greater

A minimum of three (3) <u>written</u> bids must be obtained for the purchase of goods, supplies or services of similar items where the cost can reasonably be expected to be \$25,001 or greater. The bids must contain a description of the item requested, the time, date, place and form of requested responses, and the name of the employee responsible for securing bids. The bids must be maintained by the provider.

Applies ONLY to CSBG Funded Contracts

Purchases of \$1 or greater

A minimum of three (3) written bids must be obtained for the purchase of goods, supplies or services of similar items. The bids must contain a description of the item requested, the time, date, place and form of requested responses, and the name of the employee responsible for securing bids. The bids must be maintained by the provider. At least one of these bids must be a New York State certified M/WBE business. Additionally, it is encouraged that at least one other bidder be a New York State certified Service-Disabled Veteran-Owned Business (SDVOB).

Sole Source Procurement

Purchases exceeding \$5,000 of non-federal funds where a Provider is purchasing items that are considered to be sole source in nature, do not require bids. Sole source procurements are exceptions to normal purchasing procedures and are permitted only when there is one, and only one, potential bidder or offer for an item or service.

Examples of circumstances that could justify sole source procurements are:

- Newspaper advertisements
- o Health and Liability Insurances, Workers Compensation
- o Tickets to sporting events or theme parks
- o One-time performances by artists for participants
- Utilities (gas, electricity, telephone)

<u>Note:</u> The selection of Consultants and Subcontractors are not subject to the bidding process, but must demonstrate a prudent and reasonable degree of care.

Proof of Delivery Date:

DYCD may require proof of delivery date for goods purchased between June 20th and the 30th.

Inventory

Providers must maintain an inventory of all furniture and equipment purchased with DYCD funds. An inventory control decal must be placed on the equipment indicating that it is the property of New York City.

A physical inventory is required every year, and inventory records must include the date of the last physical inventory review.

Relinquishment or Disposal of Furniture and Equipment

All furniture and equipment purchased with DYCD funds remain the property of the City of New York and must be returned at the end of the contract. Providers must contact their DYCD Contract Manager to arrange for disposition of equipment.

If it is determined that the equipment bought with DYCD funds is fully depreciated and has no further useful value, please notify Contract Agency Finance, in writing, with a list of the equipment, serial number(s), model number(s) and purchase date. Providers will receive written notification with specific instructions regarding the disposal of equipment.

Inventory lists must include the method and reasons for disposition and the value of disposed equipment. In cases of loss or theft, property lists must include all pertinent information to support the claim. If appropriate, copies of police reports must be attached.

SECTION FIVE

CREDIT/DEBIT CARDS POLICIES AND PROCEDURES

Policies and Procedures for Use of Credit/Debit Cards

Credit cards must be established in the name of the Provider and solely for the use of carrying on the operation of the Provider. Written policies and procedures are necessary to establish an internal control structure for credit/debit card use. A Provider's Board of Directors must first determine whether to approve use of credit or debit cards; once the Provider's Board has approved the use of credit/debit cards, the Board must adopt a comprehensive credit/debit card policy that, at a minimum:

- A. Identifies all authorized users
- B. Sets appropriate credit limits
- C. Establishes custody of the cards when not in use
- D. Requires proper documentation for all transactions
- E. Establishes a means to recoup any unauthorized expenditures
- F. Specifies that the safeguard of, and charges appearing on, each card, are the responsibility of the cardholder
- G. Prohibits purchases that are personal in nature
- H. Prohibits use of cards to split orders or otherwise circumvent bidding thresholds
- I. Limits the use of staff and/or volunteer personal credit cards for Provider-related purchases to emergency situations (with emergencies to be defined) where standard procurement methods are unfeasible. Such expenditures, moreover, should be consistent with the Provider's purchasing policies and procedures
- J. Sets limits on the amount that can be purchased in any individual transaction; and requires preapproval for purchases over that limit
- K. Limits cash withdrawals/advances to emergency situations (with emergencies to be defined), and requires such withdrawals to be governed by the following rules:
 - a. Amount may not exceed \$200 per ATM withdrawal.
 - b. The Provider's Executive Director or a designee must authorize cash withdrawals. If the Provider's Executive Director is the individual making such cash withdrawals, the Provider's Executive Director must receive authorization from the Provider Board Chairperson.
 - c. When a payment is made with cash from an ATM withdrawal a receipt from the transaction is filed and maintained in an ATM transaction and cash box (this must be a box kept separate and apart from the petty cash box).
 - d. Any cash withdrawn from a credit/debit account that is not utilized in a purchase should be deposited in the ATM transaction and cash box or redeposited in the agency credit/debit account.
 - e. Each expense emanating from an ATM withdrawal should be recorded in the Provider's general ledger to its corresponding expense account, with an offsetting entry to the credit account associated with the credit/debit card. A monthly reconciliation of the ATM transaction box and the credit/debit general ledger account must be performed.

f. The Provider is not allowed to comingle DYCD funds from cash balances related to ATM withdrawals with Non-DYCD funding streams. Separate general ledger accounts must be established to account for DYCD cash balances related to ATM withdrawals.

The CFO or Comptroller must ensure that a proper review of claims is performed prior to the payment of each credit card statement. This includes requiring that itemized receipts or other similar documents signed by the individual making the purchase adequately support all charges on the statements. In the case of debit card usage, bank statements must be regularly and timely reviewed and checked against supporting documentation.

SECTION SIX

PETTY CASH POLICY

A. Petty Cash Fund Use Establishment

To facilitate the payment of certain minimal charges that cannot be handled by check, Providers may establish a Petty Cash Fund for up to \$1,000.00. It is important to remember that items purchased with Petty Cash Funds are subject to the same regulations and accounting practices as expenses paid by check.

The Petty Cash Fund must be maintained in a secure place to safeguard against loss from unauthorized use or disposition. In the event of loss due to theft or fire, the Provider will NOT be reimbursed for loss of the Petty Cash Fund.

B. Petty Cash Fund Use

A Petty Cash Fund shall be governed by the following rules:

- A Petty Cash Expense may not exceed \$200 dollars per total purchase.
- The Provider Executive Director or a designee must authorize petty cash expenses.
- When a cash payment is made from the Petty Cash Fund, a Petty Cash Voucher (on **DYCD's website**) together with receipt is placed in the petty cash box.
- Therefore, the total of cash remaining in the box plus the total amount of vouchers therein must equal the petty cash fund amount.
- Each voucher must be supported with a receipt or invoice which shows the date of purchase, item purchased, the cost, and who made the purchase. Attach each receipt to its proper invoice.
- Each expense from the petty cash voucher must be journaled in the Provider's general ledger to the appropriate expense account with an offsetting entry to the petty cash account.
- Periodically, when the amount of cash remaining in the box requires replenishment, a check is drawn for the amount of all vouchers in the box. Cash from the check is placed in the petty cash box to replenish the Petty Cash Fund to its full amount. The reimbursement check amount is to be credited to the applicable operating cash account with an offsetting debit to the petty cash general ledger account. A separate Petty Cash Voucher Form must be used for the replenishment of the Petty Cash Fund.
- A monthly reconciliation of Petty Cash funds with the petty cash general ledger account must be performed.
- The Provider is not allowed to commingle DYCD funds used for petty cash. A separate general ledger account must be established to account for DYCD petty cash.

Examples of reimbursable expenses for which use of pretty cash may be appropriate:

- Local travel by public transportation
- Programmatic supplies
- Postage (The purchase of one hundred stamps will be allowed through petty cash.)

Examples of non-reimbursable expenses are:

- Personal expenses
- Alcoholic beverages for a staff party

SECTION SEVEN

GENERATED INCOME

OVERVIEW OF GENERATED INCOME

Income derived by a Provider as a result of resources paid for by the Department of Youth and Community Development is considered Generated Income. Providers engaged in such income generating activities must maintain a monthly report of those activities. These reports must be made available to DYCD for review upon request.

Providers with income generating activities must adhere to the following bookkeeping standards:

- i. A separate bank account must be established;
- ii. All bank documents, such as deposit slips, reconciliations, statements, canceled checks:
- iii. Signature cards must be properly maintained on file;
- iv. A separate cash receipts journal must be established to record cash receipts generated;
- v. A separate cash disbursement journal must be maintained to record cash expenditures (the cash disbursement journal must be established in a form that reflects the nature of the expense);
- vi. Supporting documentation for each disbursement recorded in the cash disbursement journal must be properly maintained on file;
- vii. If appropriate, a general ledger must be maintained in order to summarize monthly transactions;
- viii. A monthly trial balance must be taken; and
- ix. All financial and accounting records relating to income-generating activities must be available for examination and audit by DYCD or its designees upon request.

Grants that a Provider receives from other government sources or foundations are not considered generated income.

SECTION EIGHT

PROGRAM EXPENSE REPORT SUMMARY (PERS)

PROGRAM EXPENSE REPORT SUMMARY (PERS) OVERVIEW¹

DYCD uses a document called the "Program Expense Report Summary (PERS)" to reimburse Providers for program expenditures. A Fiscal Analyst analyzes the information listed on the PERS to determine whether the expenses submitted are appropriate for its contracted services and comply with the approved budget. From this analysis, DYCD determines the reimbursement amount.

DYCD PERS must be prepared on a cash basis. Expenses must be reported on the PERS for the month in which the check was issued or, in the case of credit or debit cards, the month in which the payment was made. For example, a PERS submitted for the month of October must reflect checks issued in October.

There are circumstances where checks are allowed outside the PERS submission period. During the year end close out, a Provider may have a payroll service period or an invoice service period that crosses Fiscal Years. The prorated portion of that check must be charged to the appropriate Fiscal Year (or budget operating period if the budget ends prior to June 30, 2018). An example of this would be a payroll issued 07/13/18 with a payroll service period of 06/25/18 through 07/06/18. Only June 25 through June 30th may be reflected on the June-Final Invoice. The remainder of the payroll would be reflected on the July PERS.

The PERS submission is required once the contract has been registered.

Annual Contracts of \$50,000 or greater

A monthly PERS is required for contracts with annual budgets of \$50,000 or greater. Providers must submit their PERS listing the expenditures made during the month by the 10th day of the following month. PERS received after the 15th of the following month are considered late and may result in a negative contract performance rating.

Annual Contracts \$10,001 - \$50,000

Contracts in this range have the option of submitting PERS monthly or quarterly. Quarterly reports are due as follows:

July-September Submission Date October 10
October-December Submission Date January 10
January-March Submission Date April 10
April-June Submission Date July 10

Final PERS Submission Date due August 31

Annual Contracts of \$10,000 or less

A Provider with a contract of \$10,000 or less has the option of submitting PERS monthly, quarterly or one PERS for the full amount.

Payment Information Tracking

Providers have two tracking methods to trace all payments against their DYCD contracts. Both methods require on line registration. Registration for both can be arranged through the DYCD website: www.nyc.gov/dycd

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¹ WIOA CONTRACTS DO NOT USE THE PERS FORM.

DYCD offers consolidated Expense and Payment History Reports to all Providers for all contracts. They are generated and emailed the third week of every month. (This service is not available for contracts under the Fiscal Agent.)

The City of New York offers the Payee Information Portal (PIP) that allows Providers to track all payments made through Department of Finance by any NYC Agency. It also allows a Provider to perform vendor maintenance on their records (address, telephone updates, etc.). The PIP website address is: nyc.gov/pip.

Reimbursement of PERS

Reimbursement for a properly prepared PERS must be received within 20-25 days of submission to DYCD.

Blank PERS

The latest PERS form and instructions are available via email at PERS@dycd.nyc.gov. Do not correspond with this email address. It is an automatic reply and unmonitored inbox. The form and instructions are also available on DYCD's website.

A PERS must be submitted with two original signatures. Providers may develop their own PERS as long as it mirrors DYCD's PERS format. If the required fields are not on the Provider-created PERS, the Fiscal Analyst may reject the PERS and require resubmission in the correct format.

Overview of the PERS Processing by DYCD

The Fiscal Analyst reviews the PERS to determine whether expenses are appropriate, are within the scope of the contract, and are in compliance with DYCD's policy and procedures. If the PERS do not meet these requirements, the expenses are not eligible for reimbursement and are "disallowed."

If expenses are disallowed, a Status Report letter is sent to the Provider notifying them of the disallowance(s) and the reason. When the discrepancy has been corrected, Providers may resubmit the expense on the next upcoming PERS.

PERS with substantial errors or omissions will be rejected by the Fiscal Analyst and returned to the Provider for correction.

A payment voucher is processed, once DYCD approves the submitted PERS. It can take approximately 5-7 business days for an Electronic Funds Transfer (EFT) or check to be issued once the payment voucher is processed.

An initial advance is issued when a contract is registered. Generally, advances will be recovered in the last quarter of the operating budget period (approximately 1/3rd each month). However, DYCD has the option to recover advances earlier, based on the actual spending rate.

In some instances, a Provider will be placed on "Check Hold." Among the reasons a Provider might be placed on check hold are: missing or expired insurance; a corrective action plan associated with the contract; funds due to DYCD from the Provider; or late submission of financial or program reports to DYCD.

If a Provider is on Check Hold, a submitted PERS will be reviewed, but not paid until the deficiency or discrepancy is rectified.

Non-Reimbursable Expenses (Disallowances):

A Status Report Letter will serve as notification to a provider of disallowed non-reimbursable expenses. The status letter will detail the reasons for the disallowance and will reflect the adjusted approved expenses for the PERS processed.

Expenditures for items neither budgeted nor allowable under DYCD Federal, State and City guidelines will not be reimbursed.

The following expenses are not allowed by DYCD:

- 1. Expenses outside of the budget operating period are not allowed. This includes payment of back tax obligations.
- 2. Funds cannot be used for litigation expenses, legal settlements, or legal judgements
- 3. Expenditures for items neither budgeted nor allowable under DYCD Federal, State and City guidelines for Providers
- 4. Purchase of land and buildings
- 5. Taxes from which municipalities are exempt (Sales Tax, NYS Franchise Tax, Federal Unemployment Tax (FUTA)
- 6. Capital improvements, which are defined to mean the erection of substantial structures which are capital in nature, or the valuable additions to or valuable modifications of real estate; this includes expenditures for hard surfacing, cement installations, substantial repairs to a building, basic heating, lighting or sanitary equipment and installation, permanent outdoor lighting systems, fencing (except for partial fencing justified as a safety device), swimming and wading pools and tennis courts;
- 7. Personal membership fees in any social, country, dining and lobbying clubs or professional associations
- 8. League franchise fees in the name of an individual
- 9. Interest and penalty costs
- 10. Activities for which a provider has already charged a fee to participants
- 11. Activities that are normally considered a part of the regular school day
- 12. Activities of a commercial nature
- 13. Expenditures for pre-paid payroll or consulting services. The date on the check (pay date) must be on or after the period of service
- 14. Expenditure for fund raising activities
- 15. Expenditures for stipends when used to replace existing staff and/or for the primary purpose of saving money by using low cost labor, and to avoid paying fringe benefits, or to replace other funding. Special exceptions may be made in advance with approval from DYCD and Office of Children and Family Services, when no other sources are available and stipends are critical for the implementation of the program model
- 16. Prizes other than inexpensive awards such as trophies, medals or ribbons
- 17. Medical liability insurance and fire insurance on capital structures
- 18. Security Deposits
- 19. Bonuses
- 20. Severance payment

- 21. Tips and Gratuity
- 22. Alcoholic Beverages
- 23. Bad Debt
- 24. If federal funds are used, Entertainment Costs are not reimbursable

Questions regarding acceptability of specific items may be emailed to your Fiscal Analyst or CAFDhelp@dycd.nyc.gov.

General Information to Avoid Disallowance

- Contract amendments (budget increases) pending registration should not be included on your PERS until the amendment is registered. You may submit expenses on the next upcoming PERS once registered.
 - Title codes and position title must match DYCD's approved budget.
 - Salaries reported on the PERS include all withholding taxes
 - The maximum FICA amount allowed on a PERS is 7.65% of salaries
 - Indirect Costs may be claimed monthly or quarterly by prorating the amount based on your budget allocation and budget operating period. No payment details are required.
 - You should not submit expenses on categories modified through a budget modification until the modification is approved.
- Equipment purchase must be listed with an item description, equipment cost, DYCD cost, model number, manufacturer and serial number for equipment \$500 or more. Purchases under \$500 will require an item description, Equipment Cost and DYCD cost only. All equipment purchased shall be itemized in the equipment inventory list page available on the PERS.
- DYCD may require proof of delivery date for goods purchased between June 20th and the 30th.

SECTION NINE

YEAR END CLOSE OUT

YEAR END CLOSE OUT

Contract Term

The Provider must perform all contract services and receive all goods and vendor services by the last day of the contracted operating period. Employer's FICA and New York State Unemployment Insurance (SUI) expenses applicable to salary expenditures incurred and paid through the last day of the contract period must be included. Any expenditure made for goods and services which are received after the last day of the contract/budget period will NOT be accepted as an authorized expenditure. In addition, current year DYCD contract funds cannot be used to pay expenses incurred in a prior contract period (e.g. for payment of back tax debts.) There are no exceptions to this rule.

Deadline for Submission of Final PERS

The deadline for submission of a FINAL PERS is <u>no later than (60) sixty days</u> after the end date of the budget operating period. Budgets ending June 30th have a deadline of August 31st.

NOTE: Failure to meet this deadline may result in the rejection and disallowance of all expenses reported on the PERS.

Unpaid PERS

An Unpaid PERS is a document used to reflect expenses not paid due to insufficient funds. An Unpaid PERS is filled out on a regular PERS form. "UNPAID PERS" should be reflected in the month field. This report should only reflect bills that have not been paid and do not have unrecovered advances. Do not include paid expenses in this document. This "UNPAID PERS" will be reviewed by the fiscal analyst and if warranted will generate an advance.

Once the bills are paid by the Provider, a PERS must be submitted with the check numbers and all the required documentation for expenses previously reported on the "UNPAID PERS". If a PERS is not submitted, the advance will become a refund due DYCD.

Refunds Due

Any balance of funds issued by DYCD and not accounted for by an approved expenditure is a refund due to DYCD. Providers must make a refund due check payable to the NYC Department of Youth and Community Development. The check must be sent to: DYCD/CAFD 123 William Street, 18th Floor, New York, NY 10038-2609.

Annual Close Out Letter and Financial Recap Form

When all PERS have been processed, a fiscal analyst will officially close out the contract. A Close Out Letter and Financial Recap Form reflecting approved expenditures for each month and all payments issued from DYCD will be mailed to the Provider. It is extremely important that the Provider verify its expenditures and payments against the Financial Recap Form.

The Close Out Letter will inform the Provider of any amount owed to DYCD. A check for the refund due amount must be issued to DYCD within ten (10) days of receipt of the year end Close Out Letter. If the refund due amount is not received by that date, the Provider will automatically be placed on <u>Check Hold</u> for all future payments from DYCD.

If a check issued by DYCD is reflected on the financial recap but has not been received, notify the Providers Fiscal Analyst immediately by telephone, or e-mail the CAFD Help Desk at

<u>Cafdhelp@dycd.nyc.gov</u> . A stop payment request will be made to the Department of Finance and a new check will be issued.

Any discrepancy in expenditures must be explained in writing to DYCD's Contract Agency Finance Division, 123 William Street 18th floor, NY, NY 10038 (attach a Final PERS with the expenditures in question).

Refund Due - Non-Responsive Letter

If a refund check or Final PERS is not submitted in response to the Close Out Letter, your Provider will be referred to DYCD's Office of Legal Affairs for collection. Nonpayment may also result in the Provider being referred for a Caution Rating in the Performance Evaluation (VENDEX) system. This rating may have a negative impact upon the Provider's ability to secure future funding with DYCD or other City agencies. Providers having a poor Performance Evaluation (VENDEX) rating may also be mandated to use the services of DYCD's Fiscal Agent.

Recoupment Procedures

DYCD reserves the right to offset against another contract the amount of an unpaid refund due.

Close Out Procedures for Terminated Providers

Upon receipt of a termination notice and effective date of termination, the Provider shall comply with all applicable DYCD closeout procedures, which include, but are not limited to the following:

- Submit PERS accounting for expenditures prior to termination date
- Any balance of funds not accounted for by an approved expenditure is to be refunded to DYCD.
- Comply with guidelines outlined in Section Four of this manual pertaining to Relinquishment of Equipment.
- If assigned a DYCD Vehicle a Provider will immediately surrender the Van to DYCD pursuant to Paragraph 12(C) of the Van License agreement.

SECTION TEN

CENTRAL INSURANCE PROGRAM (CIP) FOR PARTICIPATING PROVIDERS

CENTRAL INSURANCE PROGRAM (CIP)

The Central Insurance Program (CIP) serves the insurance needs of not-for-profit contractors who do business with human services agencies in the City.

CIP provides comprehensive general liability, workers' compensation, and disability benefit programs to these vendor agencies. The Central Insurance Program is operated by the Mayor's Office.

DYCD will deduct 4.5% of a contract's total budget to cover the cost of the insurance. The 4.5% is non-reimbursable.

General Liability Insurance

General Liability Insurance is automatically assigned to Providers that opt to participate in the CIP.

The General Liability policy provides coverage limited to (\$1,000,000) million dollars per occurrence for incidents that occur in connection with program activities described in the Provider's contract with DYCD. The General Liability policy also provides coverage for the costs of defending claims or suits resulting from bodily injury.

The policy also provides coverage for verifiable medical expenditures for authorized participants injured in the program. All injuries, however slight, to any program participant, volunteer, visitor, or others must be reported on a DYCD Incident Report Form. The Incident Report Form must be on file with DYCD before submission of related medical bills.

Original medical and dental bills must be submitted with a second copy of the Incident Report Form.

Workers' Compensation and Disability Insurance

Workers' Compensation covers injuries suffered by employees while on the job. This coverage only pertains to employees listed on the DYCD budget.

Disability benefits to employees listed on the DYCD budget are provided in case of a non-work related illness or injury causing disability.

The Provider must submit the Employer's Report of Injury (C-2 Form) and/or the Form for Disability to the CIP Program.

Staff Changes made in contracts with CIP

When new staff is hired, the Provider must submit an Individual Enrollment Form to DYCD. When an employee is terminated or resigns, the Provider must submit a Termination Roster. The completion of this roster will ensure that the name(s) of former employees are removed from the Central Insurance Program. In both instances, the forms are to be returned to DYCD.

Exclusions

CIP insurance does not include coverage for allegations of child or sexual abuse. The Provider must immediately notify DYCD of any incident or allegation of abuse of a program participant by any of the Contract's administrators or staff, including both paid staff and volunteers. Written notification is to be submitted on DYCD's Incident Report Form.

The term "abuse" refers to any physical, sexual, emotional or verbal abuse, or any other maltreatment of a program participant. Compliance with this reporting requirement does not satisfy any other legally mandated reporting of abuse, such as notifying the law enforcement officials or notifying the NYS Central Register of Child Abuse and Maltreatment.

The CIP coverage terminates at the end of each fiscal year.

Forms and additional information related to CIP may be obtained from the Central Insurance Program.

Mayor's Office of Operations Central Insurance Program 253 Broadway – 5th Floor New York, New York 10007 Tel: (212) 788-7600

SECTION ELEVEN

AUDIT

Reporting and Audit Requirements

Not-for-Profit Providers that contract with DYCD are required to comply with all applicable state and federal laws with respect to required filings. For federal reporting purposes, Not-for Profit Providers may be required to file an information return (e.g. the I.R.S. Form 990). In accordance with New York law, Providers may be required to register with the Charities Bureau of the New York State Attorney General's Office; in addition, Providers that solicit from the public are required to file with the NYS Attorney General's Office financial forms that vary depending on the Provider's gross revenues.

The following chart summarizes the requirements of the Nonprofit Revitalization Act of 2013:

Effective Dates	Level of Gross Revenues	CPA Audit or CPA Review
July 1, 2014 through June 30, 2017	Less than \$250,000	No CPA Audit or CPA Review required, but must file an unaudited financial report on form provided by the Attorney General
	At least \$250,000 but not more than \$500,000	CPA Review
	More than \$500,000	CPA Audit
July 1, 2017 through June 30, 2021	Less than \$250,000	No CPA Audit or CPA Review required, but must file an unaudited financial report on form provided by the Attorney General
	At least \$250,000 but not more than \$750,000	CPA Review
	The \$500,000 threshold increases to \$750,000	CPA Audit
July 1, 2021 and forward	The \$250,000 threshold remains constant	No CPA Audit or CPA Review required, but must file an unaudited financial report on form provided by the Attorney General
	At least \$250,000 but not more than \$750,000	CPA Review
	The \$750,000 threshold increases to \$1,000,000	CPA Audit

Regardless of the size or type of a not-for-profit Provider, an annual audit can help to improve operations and provide proper accountability for public and private resources.

In addition, DYCD funded Providers are subject to the following requirements:

Contracts with DYCD Funding Greater Than \$75,000

Providers with aggregate DYCD funding greater than \$75,000 will be audited by a CPA firm under contract to DYCD. The Auditor will perform random verification checks of the expenditures claimed on the PERS. The audit is performed after the fiscal year is completed and relates only to DYCD contracts. The Provider will be notified of the findings and questioned costs. Unresolved questioned cost(s) may have to be reimbursed to DYCD.

Contracts with DYCD Funding Between \$25,000 and \$75,000

Providers with aggregate DYCD funding between \$25,000 and \$75,000 are subject to fiscal field reviews ("FFR"). A FFR evaluates a Provider's system of internal accounting and administrative controls. The objective of the FFR is to ensure that Providers adhere to the procedures and requirements cited in the Fiscal Manual and the contract. The FFR notes both administrative and fiscal findings. FFRs are performed either by DYCD Audit staff or CPA firms under contract to DYCD.

Audit: Federal Requirements

Providers that expend \$750,000 or more in federal awards per fiscal year must have a single or program-specific audit conducted for that year in accordance with the provisions of Title 2 CFR 200.500, Subpart F of the OMB Uniform Administrative Requirements (Super Circular). Super Circular Subpart F replaces the previous OMB Circular A-133 to implement new requirements of the Single Audit Act which raised the single audit threshold from \$500,000 to \$750,000 effective for fiscal years beginning on or after December 26, 2014.

Technical Assistance

DYCD may be able to provide technical assistance to a Provider in matters that may affect contract performance, such as compliance with applicable laws and regulations, preparation of required reports, and dissemination of information necessary to keep the Provider abreast of changes that may affect the program operation and reporting requirements. The Provider should at all times feel free to contact DYCD with questions about applicable fiscal procedures.