Grant Modification / Notice of Award

U.S. DEPARTMENT OF LABOR / EMPLOYMENT AND TRAINING ADMINISTRATION

GRANT MODIFICATION No. 3		No. 3	PROJECT: WIOA National Dislocated Worker Grants	
			FL-Disaster-Hurricane Matthe	ew Project No. FL-23
GRANT NUMBER: EM-30114-16-60-A-12	EIN: 364706134		EFFECTIVE DATE: 02/16/2018	PAGE 1
GRANTEE: FLORIDA DEPARTMENT OF OPPORTUNITY THE CALDWELL BUILDING 107 EAST MADISON STREE TALLAHASSEE, FLORIDA 3	ET, MSC G-229		ISSUED BY U.S. DEPARTMENT OF LAB DIVISION OF FEDERAL ASS 200 CONSTITUTION AVENU WASHINGTON, DC 20210	SISTANCE

Action:

The National Dislocated Worker Grant (DWG) modification request submitted on January 4, 2018 is approved.

To modify the existing statement of work in accordance with pages 2 to 32 of this document.

YEAR / CFDA PROGRAM ACCOUNT ID	Mod 0-2 CURRENT LEVEL	Mod 3 MODIFICATION	NEW LEVEL	PMS DOC#
FY 17 / 17.277 WIOA DIS WKRS NAT RES - EMERGENCY (ADVANCE) 16-1630-2017-0501741717BD201701740003175DW093A0000AOWI00AOWI00-A90200-410023-ETA-DEFAULT TASK-	\$5,545,203.00	\$0.00	\$5,545,203.00	EM301145W0
TOTAL FUND AVAILABILITY	\$5,545,203.00	\$0.00	\$5,545,203.00	

Except as modified, all terms and conditions of said grant /agreement remain unchanged and in full effect.

Approved by

Date Signed

02/16/2018

Grant Officer

Lynn Fraga

6. Indirect Cost Rate and Cost Allocation Plan

X	A. A <u>current</u> federally approved Negotiated Indirect Cost Rate Agreement (NICRA) or current federally approved Cost Allocation Plan (CAP) has been provided – copy attached. Regarding only the NICRA:
	(1) Indirect Rate approved:2733%
	(2) Type of Indirect Cost Rate:Provisional
	(3) Allocation Base: <u>Total direct salaries and wages including all applicable fringe</u> benefits plus flow through funding.
	(4) Current period applicable to rate:
	Estimated Indirect Costs are shown on the SF-424A budget form. If a new NICRA is issued during the life of the grant, it must be provided to DOL within 30 days of issuance. Funds may be re-budgeted as necessary between direct and indirect costs consistent with institutional requirements and DOL regulations for prior approval, however the total amount of grant award funding will not be increased. Any budget changes impacting the Statement of Work and agreed upon outcomes or deliverables require a request for modification and prior approval from the Grant Officer.
B.	(1)Latest NICRA or CAP approved by the Federal Cognizant Agency ¹ (FCA) is not current, or
	(2)No NICRA or CAP has ever been approved by an FCA.
	URGENT NOTICE: Estimated indirect costs have been specified on the SF-424A,

URGENT NOTICE: Estimated indirect costs have been specified on the SF-424A, Section B, Object Class Category "j", however only \$ [Use N/A or enter 10% of the Personnel line or the total Indirect line (whichever is less] will be released to support indirect costs in the absence of a NICRA or CAP approved by the cognizant agency. The remaining funds which have been awarded for Indirect Costs are restricted and may not be used for any purpose until the awardee provides a signed copy of the NICRA or CAP and the restriction is lifted by the Grant Officer. Upon receipt of the NICRA or CAP, ETA will issue a grant modification to the award to remove the restriction on those funds.

The awardee must submit an indirect cost rate proposal or CAP. These documents should be submitted to DOL's Division of Cost Determination (DCD), or to the awardee's Federal Cognizant Agency. In addition, the awardee must notify the Federal Project Officer that the documents have been sent. Contact information for the DCD is available at http://www.dol.gov/oasam/boc/dcd/. If this proposal is not submitted within 90 days of the effective date of the award, no funds will be approved for the reimbursement of indirect costs. Failure to submit an indirect cost proposal by the above date means the grantee will not receive further reimbursement for indirect costs until a signed copy of the federally approved NICRA or CAP is provided and the restriction is lifted by the Grant Officer. All indirect charges must be returned through the Payment Management System and no indirect charges will be reimbursed.

¹ The Federal agency providing the organization the preponderance of direct Federal funds.

The total amount of DOL's financial obligation under this grant award <u>will not</u> be increased to reimburse the awardee for higher negotiated indirect costs.

C. The organization elected to exclude indirect costs from the proposed budget. Please be aware that incurred indirect costs (such as top management salaries, financial oversight, human resources, payroll, personnel, auditing costs, accounting and legal, etc. used for the general oversight and administration of the organization) must not be classified as direct costs; these types of costs are indirect costs. Only direct costs, as defined by the applicable cost principles, will be charged. Audit disallowances may occur if indirect costs are misclassified as direct.

D. The organization has never received a negotiated indirect cost rate and, with and pursuant to the exceptions noted at 2 CFR 200.414(f) in the Cost Principles, and has elected to charge a de minimis rate of 10% of modified total direct costs (see 2 CFR 200.68 for definition) which may be used indefinitely. This methodology must be used consistently for all Federal awards until such time as you choose to negotiate for an indirect cost rate, which you may apply to do at any time. (See 2 CFR 200.414(f) for more information on use of the de minimis rate.)

If DOL is your FCA, grantees should work with DOL's DCD, which has delegated authority to negotiate and issue a NICRA or CAP on behalf of the Federal Government. More information about DOL's DCD is available at http://www.dol.gov/oasam/boc/dcd/. This website has guidelines to develop indirect cost rates, links to the applicable cost principles, and contact information. The DCD also has Frequently Asked Questions providing general information about the indirect cost rate approval process and due dates for provisional and final indirect cost rate proposals at http://www.dol.gov/oasam/faqs/FAQ-dcd.htm.

7. Federal Project Officer

The DOL/ETA Federal Project Officer (FPO) for this award is:

Name: Susan Tesone

Telephone: (404)302-5375

E-mail: Tesone.Susan.R@dol.gov

The FPO is not authorized to change any of the terms or conditions of the award or approve prior approval requests. Any changes to the terms or conditions or prior approvals must be approved by the Grant Officer through the use of a formally executed award modification.

date printed: 01/30/2018

OMB Number: 4040-0004 Expiration Date: 9/30/2019

Application for Federal Assistance	SF-424	
*1. Type of Submission: [] Preapplication [] Application [X] Changed/Corrected Application	*2. Type of Application [X] New [] Continuation [] Revision	* If Revision, select appropriate letter(s) *Other (Specify)
3. Date Received: 01/04/2018	4. Applicant Identifier:	
5a. Federal Entity Identifier: NDW-FL-ST-16-001.3		*5b. Federal Award Identifier: EM-30114-16-60-A-12
State Use Only:		
6. Date Received By State:		7. State Application Identifier:
8. APPLICANT INFORMATION:		
*a. Legal Name: Department of Econo	omic Opportunity	
*b. Employer/Taxpayer Identification N 36-4706134	Number (EIN/TIN):	*c. Organizational DUNS: 968930664
d. Address:		
*Street 1: Street 2: *City: County: *State: Province: *Country: *Zip / Postal Code:	The Caldwell Building 107 East Madison Street I Tallahassee Leon FL US 32399-4134	MSC G-229
e. Organizational Unit:		
Department Name: Workforce Services		Division Name: One Stop and Program Support
f. Name and contact information of	person to be contacted of	n matters involving this application:
Prefix: *First Name: Diane Middle Name: *Last Name: Vacca Suffix:		
Title:		
Organizational Affiliation:		
*Telephone Number: (850) 245-7451		Fax Number:
*Email: diane.vacca@deo.myflorida.co	om	

EM-30114_Mod 3_page 5 page 2 of 17

OMB Number: 4040-0004 Expiration Date: 9/30/2019

Application for Federal Assistance SF-424
*9. Type of Application 1: Select Applicant Type:
A.
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
*Other (Specify)
*10. Name of Federal Angency: DOL/ETA
11. Catalog of Federal Domestic Assistance Number:
17.277
CFDA Title:
Workforce Investment Act (WIA) National Dislocated Worker Grants
*12. Funding Opportunity Number: N/A
IN/A
*Title:
N/A
13. Competition Identification Number:
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
FL-Baker County, FL-Brevard County, FL-Clay County, FL-Duval County, FL-Flagler County, FL-Indian River County, FL-Martin County, FL-Nassau County, FL-Putnam County, FL-St. Johns County, FL-St. Lucie County, FL-Volusia County
*15. Descriptive Title of Applicant's Project:
FL-Disaster~FL-Hurricane Matthew

EM-30114_Mod 3_page 6 page 3 of 17

OMB Number: 4040-0004 Expiration Date: 9/30/2019

Application for Federal Assistance SF-424					
16. Congressional Districts Of:					
*a. Applicant: FL District 2		*b. Program/Project: FL District 3, FL District 4, FL District 5, FL District 6, FL District 7, FL District 8, FL District 17, FL District 18			
17. Proposed Project:					
*a. Start Date: 10/08/2016		*b. End Date: 09/30/2018			
18. Estimated Funding (\$):					
*a. Federal:	\$ 5,545,203				
*b. Applicant:	\$ 0				
*c. State:	\$ 0				
*d. Local:	\$ 0				
*e. Other:	\$ 0				
*f. Program Income:	\$ 0				
*g. TOTAL:	\$ 5,545,203				
[] a. This application was made	. 12372 but has not been selected	Executive Order 12372 Process for review on			
*20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.) [] Yes [X] No					
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)					
[X] ** I AGREE					
** The list of certifications and a or agency specific instrutions.	** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement				
Authorized Representative:					
Prefix: *First Name: Michael					
Middle Name: D.					
*Last Name: Lynch					
Suffix:					
*Title: Senior Management Anal	lysis				
*Telephone Number: (850) 245-	7193	Fax Number:			
*Email: michael.lynch@deo.myf	lorida.com				
*Signature of Authorized Repres	sentative: Michael D. Lynch	*Date Signed: 01/04/2018			

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Standard Form 424 (Revised 10/2005) Prescribed by OMB Circular A-102

SF-424A

	BUDGET	ΓINFORMA	TION - Non-Co	onstruction Pi	_	pproval no. 0348-0044
		SECTIO	N A - BUDGET SU	MMARY	OIVIB A	ppi ovai 110. 0340-0044
Catalog of Federal Grant Program Domestic Function Assistance		Estimated Unobligated Funds		New or Revised Budget		
or Activity (a)	Number (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
2.						
3.			+			
4.						
5. TOTALS						
			B - BUDGET CAT		•	
			ANT PROGRAM, FU		_,	Total
6. OBJECT CLASS CAT	EGORIES	(1)	(2)	(3)	(4)	(5)
a. Personnel		\$83,700				\$83,700
b. Fringe Benefits		\$30,132				\$30,132
c. Travel		\$3,000				\$3,000
d. Equipment		\$0				\$0
e. Supplies		\$1,200				\$1,200
f. Contractual		\$5,407,867				\$5,407,867
g. Construction		\$0				\$0
h. Other		\$4,213				\$4,213
i. Total direct Charges (sum of 6a-6h)	\$5,530,112				\$5,530,112
j. Indirect Charges		\$15,091				\$15,091
k. TOTALS (sum of 6i a	nd 6j)	\$5,545,203				\$5,545,203
7. PROGRAM INCOME						

Prescribed by OMB Circular A-102

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Standard Form 424A (Rev. 7-97)

SECTION C - NON FEDERAL RESOURCES						
(a) Grant Prog	ram	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8.						
9.						
10.						
11.						
12. TOTALS (sum of lines 8 -11)						
	SEC	TION D - FORECAS	TED CASH NEEDS			
	Total for 2nd Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	
13. Federal						
14. Non Federal						
15. TOTAL (sum of lines 13 - 14)						
SECTION E - BU	DGET ESTIMATE	S OF FEDERAL FUI		SALANCE OF THE PI	ROJECT	
				PERIODS (YEARS)		
(a) Grant Prog	ram	(b) First	(c) Second	(d) Third	(e) Fourth	
16.						
17.						
18.						
19.						
20. TOTALS (sum of lines 16 -19)						
	SECTI	ON F - OTHER BUD	GET INFORMATION	N		
21. Direct Charges:		22. Indirect Charges:				
23. Remarks						

Standard Form 424A (Rev. 7-97) Prescribed by OMB Circular A-102

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Budget Narrative

Grant Application: NDW-FL-ST-16-001.3

Budget Information Narratives

Budget Narrative

Personnel: Provide a detailed explanation of the cost components of the planned cost for Personnel.

See attached budget narrative.

Fringe Benefits: Provide a detailed explanation of the cost components of the planned cost for Fringe Benefits.

See attached budget narrative.

Travel: Provide a detailed explanation of the cost components of the planned cost for Travel.

Five trips by DEO personnel, to the participating regions, to monitor grant activities and provide technical assistance. All trips are for two people with one night hotel's stay.

Hotel - \$118/night x2 = \$236 x 5 = \$1180 Car rental 40/day x2 = 80 x5 = 400Fuel 52/trip x5 = 260Meals \$36/day x 2 = \$72/day x5 = 360 Per diem - \$80/day x2 = 160 x 5 = 800Total \$3,000

Supplies: Provide a detailed explanation of the cost components of the planned cost for Supplies.

Office supplies such as pens, pencils, paper, printer ink to support day-to-day operations of the grant.

Contractual: Provide a detailed explanation for Contractual costs which specifies:

- Estimated amount of the contractual agreement(s)
- Proposed timelines
- Proposed organization, if known
- Nature of the proposed activities

All contractual costs are for Project Operators. Their allocation is listed on the Project Operator forms. Details of the expenditures are described in the Budget Narrative (attachment).

Other: Provide a detailed explanation of the cost components of the planned cost for Other.

See attached budget narrative.

Indirect Charges: Provide an explanation of the cost components of the planned costs for Indirect Charges.

See attached budget narrative and indirect cost letter.

Additional Budget Information

See attached budget narrative.

date printed: 01/30/2018

page 8 of 17

GRANTEE LEVEL

		% of time on	# of months on	
Personnel	Monthly Salary	project	project	Total
Admin. Support	4,500.00	5.0%		•
GOC III	5,500.00	9.5%		•
Accountant III	5,000.00	5.0%	6 24	•
Subtotal Personnel (Admin)				23,940.00
GOC II	4,500.00	40.0%		•
SMAS	5,500.00	10.0%	6 24	•
IT Staff Cost Pool estimated \$50 per month				1,200.00
GOC II Monitor	4,500.00	2.0%	á 24	•
Subtotal Personnel (non-admin)				59,760.00
Total Personnel				83,700.00
Fringe benefits @ 36% personnel (FICA, Work	kers Comp, Retireme	nt, Health Insuranc	e, Life Insurance,	
State Disability Insurance)				30,132.00
Travel 12 trips @ \$250				3,000.00
Staff Supplies \$600 per year - General Office of	consumables and Su	pplies		1,200.00
Other Costs				
Shared Agency Overhead Costs (Bent cost no	ol allocations for uti	litias and internet	data processing)	2 912 00
Shared Agency Overhead Costs (Rent, cost po Risk Management Insurance (estimated at \$2 Total Other Costs		lities and internet,	data processing)	3,813.00 400.00 4,213.00
Risk Management Insurance (estimated at \$2		lities and internet,	data processing) % of time on	400.00
Risk Management Insurance (estimated at \$2		lities and internet, Amount of FTEs		400.00
Risk Management Insurance (estimated at \$2 Total Other Costs	00 per year)		% of time on project	400.00 4,213.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses	OO per year) Avg Cost	Amount of FTEs	% of time on project	400.00 4,213.00 3,379,620.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te	Avg Cost 9,656.06	Amount of FTEs	% of time on project	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we	Avg Cost 9,656.06	Amount of FTEs	% of time on project	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years	Avg Cost 9,656.06	Amount of FTEs	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36%	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00 99,360.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10 Staff supplies estimated at \$200 per month	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00 99,360.00 41,600.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 99,360.00 41,600.00 4,800.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10 Staff supplies estimated at \$200 per month Pooled Career Center Costs @ 15% of staff-re Admin Costs @ 10%	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00 99,360.00 41,600.00 4,800.00 63,264.00 491,624.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10 Staff supplies estimated at \$200 per month Pooled Career Center Costs @ 15% of staff-re	Avg Cost 9,656.06 emp job wages & bereks 34,500.00	Amount of FTEs 350 nefits	% of time on project) 1	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00 99,360.00 41,600.00 4,800.00 63,264.00 491,624.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10 Staff supplies estimated at \$200 per month Pooled Career Center Costs @ 15% of staff-re Admin Costs @ 10%	Avg Cost 9,656.06 emp job wages & bereks 34,500.00 04 weeks	Amount of FTEs 350 nefits	% of time on project 1 3 0.5	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00 276,000.00 99,360.00 41,600.00 4,800.00 63,264.00 491,624.00
Risk Management Insurance (estimated at \$2 Total Other Costs Contractual - Program Operator Expenses Temporary Jobs 350 @ \$9,656.06 Fringe benefits @ 15% (FICA, WC) Subcontract: Staffing Agency Fee @ 10% of te Supportive Services @50/week x 125 x 26 we 8 Case managers for two years Fringe benefits @ 36% Staff Travel 8 case managers x \$50/week x 10 Staff supplies estimated at \$200 per month Pooled Career Center Costs @ 15% of staff-re Admin Costs @ 10% Total Contractual	Avg Cost 9,656.06 emp job wages & bereks 34,500.00 04 weeks elated costs)	Amount of FTEs 350 nefits	% of time on project 1 3 0.5	400.00 4,213.00 3,379,620.00 506,943.00 388,656.00 156,000.00

Please note for the "Other Costs" section: These costs are directly charged through agency cost pools and are not duplicated indirect. The section does not contain any costs that are covered under our current indirect agreement.

Statement of Work

The following application is for a grant modification request. This cover page summarizes what was changed from the last approved application.

Modification Details

Project ID: FL-23

Descriptive Title: FL-Hurricane Matthew

Project Type: Disaster

Application Number: NDW-FL-ST-16-001.3 **Grant Number:** EM-30114-16-60-A-12

MODIFICATION EXPLANATION	This modification reflects the incremental release of funds.
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Modification Type(s)	Reflect Initial Increment Only/Total Funding Request Reduced
Funding	The Total Federal Funding Amount on this application (\$5,545,203) is different from the approved up-to amount for this grant (\$2,345,203). Narrative: We requested the release of funds to continue clean-up projects that had been started but could not be completed for lack of funds.
Funding (Temporary Jobs)	The total funding amount for Temporary Jobs has been reduced.
Participation	The Cost-Per-Participant on this application (\$15,843.44) is different from the approved calculated Cost-Per-Participant for this grant (\$6,700.58).

page 1 of 17 date printed: 01/30/2018



Project Synopsis Form

National Dislocated Worker Grants Electronic Application System

State of FL	Amount of Fund	ding Request \$5	,545,203	Amount Approved by DOL \$
	Temporay Jobs	Workforce Development	Total	
a. Federal	\$ 5,545,203	\$ 0	\$ 5,545,203	
b. Applicant	\$ 0	\$ 0	\$ 0	
c. State	\$ 0	\$ 0	\$ 0	
d. Local	\$ 0	\$ 0	\$ 0	
e. Other	\$ 0	\$ 0	\$ 0	
f. Program Income	\$ 0	\$ 0	\$ 0	
g. Total	\$ 5,545,203	\$ 0	\$ 5,545,203	

Project Name: FL-Disaster~FL-Hurricane Matthew

Project Type: Disaster

Application Type: Full

(If Emergency) reason:

Description of Activities to be Provided: Temporary jobs for clean-up, restoration and humanitarian aid.

Date of FEMA Declaration of Eligibility for Public Assistance: 10/08/2016

Date of Emergency or Disaster Situation of National Importance:

Name of Federal Agency Declaring Disaster Event (if other than FEMA):

Target Groups (check all that apply):

X Unemployed due to Disaster

x Long-Term Unemployed

X Dislocated Workers

Evacuees From a Declared Disaster Area

Applicant Contact Person: Isabelle Potts
Street Address 1: The Caldwell Building

Street Address 2: 107 East Madison Street MSC G-229

City: Tallahassee State: FL Zip Code: 32399-4134

Telephone: (850) 921-3148

Fax: (850) 921-3826

Email: isabelle.potts@deo.myflorida.com

	Temporary Jobs	Workforce Deveoplment	Total				
Planned Number of Participants:	350	0	350	Planned Entered Employment Rate: 90%			
Planned Cost per Participant:	\$15843.44	\$0	\$15843.44	Actual Cost per Participant in Prior PY: \$2350			
% of Planned Participants Receiving NRPs: 0				Planned Earnings: 17621			

Counties included in Project Service Area: FL-Baker County, FL-Brevard County, FL-Clay County, FL-Duval County, FL-Flagler County, FL-Indian River County, FL-Martin County, FL-Nassau County, FL-Putnam County, FL-St. Johns County, FL-St. Lucie County, FL-Volusia

Project Operator Listing: CareerSource Brevard, CareerSource Flager Volusia, CareerSource Northeast Florida, CareerSource Research Coast

<u>Public Burden Statement:</u> Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9106 (March 2004)

OMB Approval No. 1205-0439

Expiration date: 9/30/2019

EM-30114_Mod 3_page 16 date printed: 01/30/2018 EM-30114_Mod 3_page 9 of 17

date printed: 01/30/2018



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Project Operator Data Form

National Dislocated Worker Grants Electronic Application System

Project Operator: CareerSource Brevard		•				
Street Address 1: 297 Barnes Blvd.						
Street Address 2:						
City: Rockledge	y: Rockledge State: FL Zip Code: 32955					
Contact Person: Marci Murphy						
Telephone: (321) 394-0507						
FAX: (321) 504-2065						
Email: mmurphy@careersourcebrevard.com						
Duration of Project Operator Agreement:	Start: 10/08/2016	End: 09/30/2018				
	Temporary Jobs	Workforce Development	Total			
Funding Level:	\$4,818,496	\$0	\$4,818,496			
Number of Participants:	303	0	303			
Counties included in Project Operator Service Are	ea: FL-Brevard County	·	•			

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9107 (March 2004)

EM-30114_Mod 3_page 17



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Project Operator Data Form

National Dislocated Worker Grants Electronic Application System

Project Operator: CareerSource Flager Volusia		•					
Street Address 1: Speedway Business Center							
Street Address 2: 329 Bill France Blvd.							
City: Daytona Beach	y: Daytona Beach State: FL Zip Code: 32114						
Contact Person: Robin King							
Telephone: (386) 323-7074							
FAX: (386) 523-2095							
Email: robinking@careersourcefv.com							
Duration of Project Operator Agreement:	Duration of Project Operator Agreement: Start: 10/08/2016 End: 09/30/2018						
	Temporary Jobs	Workforce Development	Total				
Funding Level:	\$284,511	\$0	\$284,511				
Number of Participants:	20	0	20				
Counties included in Project Operator Service Are	a: FL-Flagler County, FL-Volusia	a County					

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9107 (March 2004)

date printed: 01/30/2018 page 11 of 17



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Project Operator Data Form

National Dislocated Worker Grants Electronic Application System

Project Operator: CareerSource Northeast Florida	I					
Street Address 1: 1845 Town Center Blvd., Suite	250					
Street Address 2:						
City: Fleming Island	State: FL Zip Code: 32003					
Contact Person: Bruce Ferguson	·					
Telephone: (904) 213-3800 2800						
FAX: (904) 924-1725						
Email: bferguson@careersourcenortheastflorida.c	com					
Duration of Project Operator Agreement:	Duration of Project Operator Agreement: Start: 10/08/2016 End: 09/30/2018					
	Temporary Jobs	Workforce Development	Total			
Funding Level:	\$172,100	\$0	\$172,100			
Number of Participants:	12	0	12			
Counties included in Project Operator Service Are County	ea: FL-Clay County, FL-Duval Co	unty, FL-Nassau County, FL-Putr	nam County, FL-St. Johns			

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9107 (March 2004)

date printed: 01/30/2018 page 12 of 17

date printed: 01/30/2018



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Project Operator Data Form

National Dislocated Worker Grants Electronic Application System

Project Operator: CareerSource Research Coast		The Application System				
Street Address 1: 584 NW University Blvd., Ste. 100						
Street Address 2:						
City: Port St. Lucie	ty: Port St. Lucie State: FL Zip Code: 34986					
Contact Person: Richard Stetson						
Telephone: (866) 335-3835						
FAX: (954) 202-3620						
Email: rstetson@careersourcerc.com						
Duration of Project Operator Agreement: Start: 10/08/2016 End: 09/30/2018						
	Temporary Jobs	Workforce Development	Total			
Funding Level:	\$132,760	\$0	\$132,760			
Number of Participants:	15	0	15			
Counties included in Project Operator Service Area: FL-Ir	ndian River County, FL-Mart	in County, FL-St. Lucie County	,			

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9107 (March 2004)

EM-30114_Mod 3_page 20



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Planning Form (Disaster - Temp. Jobs) (page 1 of 2)

National Dislocated Worker Grants Electronic Application System

All quarterly entries are CUMULATIVE over all previous quarters.

PERFORMANCE FACTOR	PROGRAM YEAR QUARTER					
	ADMIN	PROGRAM	QTR1 12/31/2016	QTR2 03/31/2017	QTR3 06/30/2017	QTR4 09/30/2017
PLANNED PARTICIPANTS						
Employed In Temporary Disaster Relief Assistance			16	66	115	115
Receiving Intensive Services			1	9	19	19
Receiving Supportive Services			0	42	75	89
Completed NDWG Services			6	6	13	33
Employed at Completion of NDWG Services			6	7	8	21
Total Planned Participants			17	75	117	124
Planned Grantee Expenditures						
Administrative	38,558		336	1,741	6,340	8,399
Other*		98,778	3,562	7,473	11,390	15,829
Total: Program Management And Oversight	38,558	98,778	3,898	9,214	17,730	24,228
Indirect* (This line does not add into the subtotal)	15,091	0	336	1,101	5,071	6,101
Total Expenditures: Grantee Level	38,558	98,778	3,898	9,214	17,730	24,228
Planned Project Operator Expenditures					-	
Participant Wages		3,379,620	7,374	228,729	1,090,117	1,274,496
Participant Fringe Benefits		506,943	0	0	0	0
Career Services		0	0	0	0	0
Supportive Services		156,000	1,301	52,572	121,685	122,409
Other*		873,680	4,445	176,017	592,001	623,577
Administrative	491,624		847	59,880	194,631	229,336
NRP Processing*	0		0	0	0	0
Total: Program Management And Oversight	491,624	4,916,243	13,967	517,198	1,998,434	2,249,818
Total Expenditures: Project Operator Level	491,624	4,916,243	13,967	517,198	1,998,434	2,249,818
Total Expenditures: Grantee And Project Operator Level	530,182	5,015,021	17,865	526,412	2,016,164	2,274,046

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9103-2a (March 2004)

date printed: 01/30/2018 page 14 of 17



OMB Approval No. 1205-0439 Expiration date: 9/30/2019

Planning Form (Disaster - Temp. Jobs) (page 2 of 2)

National Dislocated Worker Grants Electronic Application System

All quarterly entries are CUMULATIVE over all previous quarters.

PERFORMANCE FACTOR	ı	PROGRAM YEAR QUARTER			
	QTR5 12/31/2017	QTR6 03/31/2018	QTR7 06/30/2018	QTR8 09/30/2018	
PLANNED PARTICIPANTS	·				
Employed In Temporary Disaster Relief Assistance	210	290	350	350	
Receiving Intensive Services	35	60	75	75	
Receiving Supportive Services	150	175	200	265	
Completed NDWG Services	50	120	225	350	
Employed at Completion of NDWG Services	45	108	200	315	
Total Planned Participants	210	290	350	350	
Planned Grantee Expenditures					
Administrative	17,088	22,462	30,836	38,558	
Other*	34,293	52,758	75,222	98,778	
Total: Program Management And Oversight	51,381	75,220	106,058	137,336	
Indirect* (This line does not add into the subtotal)	9,079	11,083	13,087	15,091	
Total Expenditures: Grantee Level	51,381	75,220	106,058	137,336	
Planned Project Operator Expenditures					
Participant Wages	1,824,119	2,343,619	2,861,119	3,379,620	
Participant Fringe Benefits	202,778	304,167	405,556	506,943	
Career Services	0	0	0	0	
Supportive Services	134,755	141,837	148,919	156,000	
Other*	626,600	705,626	789,652	873,680	
Administrative	303,294	366,070	428,846	491,624	
NRP Processing*	0	0	0	0	
Total: Program Management And Oversight	3,091,546	3,861,319	4,634,092	5,407,867	
Total Expenditures: Project Operator Level	3,091,546	3,861,319	4,634,092	5,407,867	
Total Expenditures: Grantee And Project Operator Level	3,142,927	3,936,539	4,740,150	5,545,203	

Public Burden Statement: Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits (PL: 113-128 sec 170). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0439).

ETA 9103-2a (March 2004)

Narrative Statements

Project Type: Disaster

GENERAL EXPLANATION: Please enter any information that would benefit the reviewers who will approve or deny this application. Use this area to explain items and concepts that you feel need additional information, items that need DOL specialist attention during the review process, or any information on how the program is meeting demand-driven goals.

(from NDW-FL-ST-16-001.2) An additional attachment, entitled, Brevard County Projects, has been attached to identify projects with the highest level of need and demonstrate the need for the remainder of the grant funding.

This project will provide temporary jobs to assist with humanitarian and clean-up recovery activities to the counties affected by Hurricane Matthew. Clean-up may include debris removal and sanitation of facilities.

The bulk of the grant funds will be used to provide temporary jobs to storm-affected and other dislocated workers for needed recovery activities, including long-term recovery efforts.

Based on the current award, the State will serve 350 temporary workers for the length of the grant.

Support services will be available for transportation, child care, and safety supplies as needed by temporary workers.

Eligible temporary workers will be engaged exclusively in recovery work assisting individuals affected by Hurricane Matthew. Workers will be involved either in physical repair/restoration work on public, private non-profit properties to address damage caused by Hurricane Matthew. Temporary workers conduct such repair/restoration on the property of weatherization-eligible individuals, as permitted under this grant. In addition, some of the temporary workers will contact individuals who filed claims with FEMA and/or the State for disaster assistance due to Hurricane Matthew to assess whether they have received all services and resources to which they are entitled. The temporary workers will also assist disaster-affected individuals who have not yet received all the assistance that they require and still have unmet needs to help them access available resources to address their recovery needs.

Worksites and positions are described in a separate attachment.

The temporary positions will last less than 2,000 hours. The wages range from \$10 to \$20 (with one position at \$34) based on prevailing wages for those positions at the worksite. Consequently, the average cost of temporary wages, benefits, supportive services, and staffing agency fees for each position through the end of the grant period is estimated at \$16,480.

Worksite agreements will limit the work of these positions to recovery activities for Hurricane Matthew and will incorporate the award requirements. Ongoing monitoring will take place to ensure that grant funds are only being used in accordance with the Dislocated Worker Grant requirements.

Planned monitoring and oversight activities are carried out in accordance with DEO's monitoring plan. The purpose of the programmatic monitoring reviews is to assess whether the State's 24 LWDBs are complying with applicable laws, regulations, state plans, and all contract and agreement terms in administering their workforce programs. As such, DEO, in consultation with CareerSource Florida (CSF), annually develops and implements a process for monitoring RWBs and for follow-up of findings which require corrective action.

DEO annually conducts both programmatic and financial monitoring of the LWDBs. DEO's Division of Workforce Services, Bureau of One-Stop and Program Support, carries out programmatic monitoring and DEO's Division of Finance and Administration, Financial Monitoring & Accountability carries out financial monitoring.

Grant Modifications

Modification Explanation:

This modification reflects the incremental release of funds.

Grant Modification: Please provide justification for changing the approved grant amount.

We requested the release of funds to continue clean-up projects that had been started but could not be completed for lack of funds.

Project Overview

Please explain why the planned cost per participant exceeds the cost under the formula program.

Planned cost per participant is higher than formula program costs during a disaster event.

Project Plan

Please delineate the cost components of the planned cost in Admin. Excluding NRP Processing - Program Management and Oversight (Grantee Level).

(from NDW-FL-ST-16-001.2) see budget narrative

Please explain the basis of providing a value in Other-Program Management and Oversight (Grantee Level).

(from NDW-FL-ST-16-001.2) see budget narrative.

Please explain the basis of providing a value in Other (Project Operator Level).

(from NDW-FL-ST-16-001.2) see budget narrative

Please delineate the cost components of the planned cost in Admin. Excluding NRP Processing (Project Operator Level).

(from NDW-FL-ST-16-001.2) Estimated at 10% of program operator expenses. Will be based on approved indirect rate which varies by subgrantee.

EM-30114 Mod 3 page 23 date printed: 01/30/2018 page 16 of 17 Brevard County has many unfinished or not started Hurricane Matthew recovery jobs / projects that are planned and ready to go if additional funding becomes available. If funding were available they would start with the following:

- 1. Complete the reconstruction of boardwalks at the Cape Canaveral National Seashore that were damaged and/or destroyed during Hurricane Matthew
 - a. This project was partially completed using the funding received
- Complete the reconstruction of the boardwalk at the Merritt Island National wildlife refuge.
 - a. Removal of the damage boardwalk was completed but they were unable to complete the reconstruction
- 3. Complete the repair of 180,000 linear feet of damaged levees at Merritt Island National Wildlife Refuge
 - a. Only 2,200 linear feet of damage dikes at the Merritt Island National Wildlife Refuge were completed before funding was exhausted
- 4. Complete the repair of 47 culverts that divert water to hundreds of thousands of acres at the Merritt Island National Wildlife Refuge. These culverts were damaged by Hurricane Matthew and are currently a factor in the areas ability to naturally control the mosquito population that affects the surrounding areas including the city of Titusville. If these culverts are not repaired it forces mosquito control to use chemicals to control mosquito populations rather than the natural resources that are normally used via the culverts to control mosquito populations. This is not only a health hazard but is an additional cost that was not budgeted for and would not have been necessary if not for the damage caused by Hurricane Matthew.
 - a. The repair of 12 culverts was completed before exhausting the funding initially received
- 5. Complete the manufacture of replacement signs and replace 1200 street signs at the city of Cocoa Beach that were damaged by Hurricane Matthew
 - a. Approximately 70% of this project was completed before initial funding was exhausted
- 6. Remove debris from approximately 2 miles at the Greenway connecting area of the Sebastian River for the Marine Resource Council
- Repair 2,500 feet of damaged boardwalk and trails at Sebastian River for the Marine Resource Council
- Remove damaged building material from 1,500 square-foot educational building, replace drywall carpeting ceiling tiles and windows to complete this restoration for the Marine Resource Council

- 9. Remove damaged building material from the 1,000 square-foot mangrove greenhouse for the Marine Resource Council
- 10. Repair and restore damaged buildings at the city of Palm Bay
 - a. Police Department
 - b. City Hall
 - c. City Hall Annex
 - d. Police Gun Range
 - e. Water Treatment plan
- 11. Brevard County Natural Resource Management Department Mosquito Impoundment areas to repair hurricane damage to 66,000 linear feet of levees/dikes and 38 culverts in the areas of:
 - a. Little C2
 - b. Jefferson March
 - c. Marsh harbor
 - d. Hall Road
 - e. Crystal Lake's
 - f. North Groves
 - g. Long point
 - h. Honest John's
 - i. Campbell Cove
- 12. The Brevard County Natural Resource Management Department Mosquito Impoundment areas require repair of the dikes/levees and the culverts controlling water flow control points that were damaged by Hurricane Matthew. These areas, just as in the north, utilized flood control of marshland to mitigate mosquito populations and other hazardous species. The inability to repair these areas will force mosquito control to utilize insecticides and chemicals to control mosquito populations in the south area of Brevard County rather than the natural means normally utilized with dikes/levees and culverts which use wetland management to control these populations.

The scope of these projects provide 35 to 85 jobs that include carpentry, heavy equipment operators, construction workers, and general laborers to complete these industrial projects utilizing skilled labor and heavy equipment at remote jobsites. These are land management projects that were located in the direct path and closet point of land when Hurricane Matthew impacted Brevard County. The damage is substantial in these areas and where this damage has occurred is vast e.g. hundreds of square miles. The additional money, if provided, will go a long way to repairing these land management areas which Brevard has been entrusted to be the stewards of. It will also allow us to use the natural prevention methods that control hazardous populations of invasive species of insects and plant life. Failure to restore these vast land management areas will have a substantial and long-range impact if not corrected with additional emergency funding that was previously designated for this purpose.

These projects will use all the funds requested by 30 Sept 2018.

Just a few pictures of the dikes/levees, dune fencing and walkway/ pier work we have already repaired and restored.

Brevard County has exhausted all of the initial funding provided and as such has closed six projects that were not completed. Additionally they were forced to lay off 46 workers / program participants. Many of these workers have not found employment and are ready and willing to go back to work on these projects if funding is made available.

Indirect Cost Rate

NEGOTIATED INDIRECT COST RATE AGREEMENT (NICRA) STATE DEPARTMENT/AGENCY

DEPARTMENT/AGENCY:

EIN: 36-4706134

State of Florida Department of Economic Opportunity (DEO)

Caldwell Building, 107 East Madison Street

Tallahassee, Florida 32399-4120

DATE: October 31, 2016

FILE REF: This replaces

the agreement dated November 6, 2015

The indirect cost rate(s) contained herein are for use on grants and contracts with the Federal Government. 2 CFR Part 200, Subpart E applies subject to the limitations contained in Section II, A, below. The rate(s) were negotiated between the State of Florida, Department of Economic Opportunity (DEO) and the U. S. Department of Labor in accordance with the authority contained in 2 CFR Part 200, Appendix VII, D.1.

SECTION I: RATES

EFFEC	TIVE PER	IOD			
TYPE	FROM	TO	RATE*	LOCATION	APPLICABLE TO
Final	7/1/15	6/30/16	12.7425% (a)	All	UC
Final	7/1/15	6/30/16	.4224% (b)	All	HCP
Final	7/1/15	6/30/16	.2770% (b)	All	WIA
Final	7/1/15	6/30/16	.5330% (b)	All	WTS/FSET
Final	7/1/15	6/30/16	12.4202% (a)	All	OP
Provisional	7/1/16	6/30/18	13.0828% (a)	All	UC
Provisional	7/1/16	6/30/18	.4258% (b)	All	HCP
Provisional	7/1/16	6/30/18	.2733% (b)	All	WIA
Provisional	7/1/16	6/30/18	.5997% (b)	All	WTS/FSET
Provisional	7/1/16	6/30/18	12.8237% (a)	All	OP

See the Special Remarks section for abbreviation explanations and additional information.

*BASE

- (a) Total direct salaries and wages including all applicable fringe benefits.
- (b) Total direct salaries and wages including all applicable fringe benefits plus flow-through funding.

TREATMENT OF FRINGE BENEFITS: Fringe benefits are specifically identified to each employee and are charged individually as direct costs. The directly claimed fringe benefits are listed in the Special Remarks Section of this Agreement.

TREATMENT OF PAID ABSENCES: Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims for the cost of these paid absences are not made.

SECTION II: GENERAL

- A. <u>LIMITATIONS</u>: Use of the rate(s) contained in the Agreement is subject to all statutory or administrative limitations and is applicable to a given Federal award or contract only to the extent that funds are available. Acceptance of the rate(s) agreed to herein is predicated upon the following conditions:
 - (1) that no costs other than those incurred by the non-Federal entity or contractor were included in its indirect cost pool as finally accepted and that such incurred costs are legal obligations of the non-Federal entity and allowable under the governing cost principles,
 - (2) that the same costs that have been treated as indirect costs have not been claimed as direct costs,
 - (3) that similar types of costs have been accorded consistent treatment, and
 - (4) that the information provided by the non-Federal entity or contractor which was used as a basis for acceptance of the rate(s) agreed to herein is not subsequently found to be materially inaccurate by the Federal government. In such situations, the rate(s) may be subject to renegotiation at the discretion of the Federal government.
 - (5) The rates cited in this Agreement are subject to audit.
- B. <u>ACCOUNTING CHANGES</u>: This agreement is based on the accounting system purported by the non-Federal entity or contractor to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the Division of Cost Determination. Such changes include, but are not limited, changes in the charging of a particular type of cost from indirect to direct. Failure to obtain approval may result in cost disallowances.
- C. <u>NOTIFICATION TO FEDERAL AGENCIES</u>: A copy of this document is to be provided by the non-Federal entity or contractor to other Federal funding sources as a means of notifying them of the Agreement contained herein.
- D. **PROVISIONAL-FINAL RATES AND ADJUSTMENTS:** When seeking initial reimbursement of indirect costs using the provisional/rate methodology, provisional rates must be in established within 90 days of receiving a Federal award (financial assistance, grants, cooperative agreements, and cost reimbursable contracts) requiring to account for actual costs incurred. The non-Federal entity or contractor must submit an indirect cost rate proposal within six (6) months after the end of their fiscal year to establish a final rate.

Once a final rate is negotiated, billings and charges to federal awards must be adjusted if the final rate varies from the provisional rate. If the final rate is greater than the provisional rate and there are no funds available to cover the additional indirect costs, the non-Federal entity or contractor may not recover all indirect costs. Conversely, if the final

rate is <u>less</u> than the provisional rate, the non-Federal entity or contractor will be required to reimburse the funding agency for the excess billings.

Non-Federal entities or contractors receiving a Federal cost reimbursable contract(s) - Must adhere with FAR 52.216-7(d)(2)(v), to settle final indirect cost rates typically on annual basis:

"The contractor shall update the billings on all contracts to reflect the final settled rates and update the schedule of cumulative direct and indirect costs claimed and billed, as required in paragraph (d)(2)(iii)(I) of this sections, within <u>60</u> days after settlement of final indirect cost rates."

In addition, the contractor shall provide to the Contracting Officer the noted cumulative costs schedule within 60 days of the execution of this agreement.

If the non-Federal entity or contractor has completed performance under any of the contracts covered by this Agreement, a final invoice or voucher must be submitted no later than 120 days from the date on which this Agreement is executed, following guidance from FAR 52.216-7(d)(5) and FAR 52.216-7(h).

Non-Federal entities receiving Federal awards (financial assistance, grants, and cooperative agreements) – Note that even if Federal awards are administratively closed prior to the settlement of final indirect cost rates, non-Federal entities still must comply with the following 2 CFR Part 200 clauses stating, in part:

§200.344 Post-closeout adjustments and continuing responsibilities

- (a) The closeout of a Federal award <u>does not</u> affect any of the following:
 - (1) The right of the Federal awarding agency or pass-through entity to disallow costs and recover funds on the basis of a later audit or other review. The Federal awarding agency or pass-through entity must make any cost disallowance determination and notify the non-Federal entity within the record retention period.
 - (2) The obligation of the non-Federal entity to return any funds due as a result of later refunds, corrections, or other transactions <u>including final</u> <u>indirect cost rate adjustments</u>.

§200.345 Collection of amounts due

(a) Any funds paid to the non-Federal entity in excess of the amount to which the non-Federal entity is finally determined to be entitled under the terms of the Federal award constitute a debt to the Federal Government.

(b) Except where otherwise provided by statutes or regulations, the Federal awarding agency will charge interest on an overdue debt in accordance with the Federal Claims Collection Standards (31 CFR parts 900 through 999). The date from which interest is computed is not extended by litigation or the filing of any form of appeal.

E. SPECIAL REMARKS:

- 1. Indirect costs charged to Federal grants/contracts by means other than the rate(s) cited in the Agreement should be adjusted to the applicable rate cited herein and be applied to the appropriate base to identify the proper amount of indirect costs allocable to the program.
- 2. Contracts/grants providing for ceilings as to the indirect cost rates(s) or amount(s) which are indicated in Section I above, will be subject to the ceilings stipulated in the contract or grant agreements. The ceiling rate or the rate(s) cited in this Agreement, whichever is lower, will be used to determine the maximum allowable indirect cost on the contract or grant agreement.
- 3. The indirect cost pool consists of allowable, allocable expenses of the following:

Director's Office Chief Financial Officer
General Counsel Inspector General
Budget Management Financial Management

Human Resources Management General Services

Shared Costs Information Technology Services
Terminal Leave UC Benefits

Financial Monitoring & Accountability State-wide Cost Allocation Plan Costs

4. Fringe benefits other than paid absences consist of the following:

Retirement Social Security

Group Health Ins Life Ins

Senior Mgt. Disab. Ins Pre-Tax Benefits

5. Explanations of the abbreviations used in Section I, above, are as follows:

UC = Unemployment Compensation Programs

HCP = Housing & Community Programs

WIA = Workforce Investment Act Programs

WTS/FSET = Welfare Transition Programs & Food Stamp Employment and Training

OP = Other Programs (all agency programs not included in another rate entity)

6. The Florida Department of Economic Opportunity maintains and operates a number of state/federal-owned facilities acquired with various sources of federal and state funds. Maintenance and operating costs associated with these facilities are directly billed to users. Billing rates are designed to recover anticipated service costs on a breakeven basis. Direct billings made in accordance with the agency's "Facilities Services Rate Plan" are hereby approved.

ACCEPTANCE

BY THE COGNIZANT AGENCY ON BEHALF OF THE FEDERAL GOVERNMENT: BY THE ORGANIZATION: State of Florida Department of Economic U.S. DEPARTMENT OF LABOR Division of Cost Determination Opportunity (DEO) Caldwell Building – MSC 120 224 Westbridge Place 107 East Madison Street Mount Airy, NC 27030 Tallahassee, Florida 32399 (Grantee/Contractor) (Government Agency) (Signature) (Signature) KON Damon Steffens Victor M. Lopez (Name) (Name) Chief, Division of Cost Determination Chief Financial Officer (Title) (Title) October 31, 2016 (Date) Negotiated By: Damon L Tomchick Telephone No.: 240-475-2786