NOTIFICATION OF GRANT AWARD UNDER TITLE III-B OF THE OLDER AMERICANS ACT

| Name and Address of Area Agency: | | | Name and Address of Sponsoring Agency/Payee | | | |
|---|------------------|---|---|---|---------------------------------------|--|
| Albany County Department for Aging 162 Washington Avenue, 6th Floor | | | Albany County | | | |
| Albany, NY 12210-2304 | • | | | | | |
| | | | | | | |
| Program Year - Beginning: 1/1/2021 Ending: 12/31/2021 | | | | | | |
| Fiscal Year from which funds are awarded: 2021 | | Federal C | Federal CFDA No 93.044 This award is New | | | |
| Section I - Cost Categories | | Section II - Grantee Budget - Federal and Matching Funds: | | | | |
| | Amount | | | | | |
| Personnel | \$95.000.00 | | Federal Share (see remark 1) Combined matching Share A. In-Kind | | \$387,029.35 | |
| Fringe Benefits | 0.00 | | | | \$0.00 | |
| Equipment | 0.00 | B. Cash C. Volunteer Match 3. Net Cost | | | \$66,337.65 | |
| Travel | 0.00 | | | | · · · · · · · · · · · · · · · · · · · | |
| Maint. & Operations | 35,802.00 | | | | \$0.00 | |
| Other Expenses | 9,198.00 | | | | \$453,367.00 | |
| Subcontracts | 332,543.00 | | | | | |
| Approved Costs | \$472,543.00 | · A | A. Carryover | | \$120.359.35 | |
| Less: | Ψ472,343.00 | | B. Base Allocation | | 267,342.00 | |
| Anticipated Income | 19,176.00 | | C. III-C-1 Transfer D. III-C-2 Transfer | | 0.00 0.00 | |
| Net Cost | \$453,367.00 | li i | E. Supplement | • | 0.00 | |
| Net Cost | \$433,307.00 | | * Federal Funds Ceiling (see remark 1) | | \$387,701.35 | |
| Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award: (XX) 1. Federal reimbursement is limited to the lower of the "Federal Share" in Section II or the "Federal Funds Ceiling" in Section III of this award notice. (XX) 2. Receipt of federal funds (either through advance or reimbursement) does not constitute earning of these funds. The federal share of the project cost is earned only when allowable costs have been incurred and paid; and the non-federal share of the costs has been contributed. (XX) 3. The federal share will not exceed 75% of the cost of Area Agency Administrative Activities and the federal share will not exceed 90% of the cost of Supportive Services. | | | | | | |
| () 4. Federal funds carried over from the prior year are estimated. Actual carryover depends on prior year closeout and will be confirmed upon closeout. | | | | | | |
| () 5. Other: | | | | | | |
| | | | | | | |
| Name and Title of Authorizing (| Official: Signat | ture: | | | Date: | |
| Karen Jackuback Deputy Director | | Kan | Jochelack | | July 20,2021 | |