

APPROPRIATIONS CONTRACT

THIS CONTRACT is executed on _____, by the City of Pompano Beach ("City") and AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC., a Not For Profit Corporation authorized to do business in the State of Florida ("Recipient").

WHEREAS, the City of Pompano Beach has appropriated for its current Fiscal Year 2025-2026 (October 1st through September 30th), the sum of Twenty Five Thousand Dollars (\$25,000.00) to Recipient, to conduct a program entitled or activity as described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description" (collectively the "Work") attached hereto and incorporated herein by reference, for the period beginning October 1, 2025 and ending September 30, 2026; and

WHEREAS, the City Commission finds that entering into this Contract serves a valid public purpose as Recipients shall perform or provide a service that is beneficial to the residents of the City, and that the City is currently not in a position to provide such services on its own;

WHEREAS, it is in the best interest of the City to enter into this contract with Recipient to provide the Work hereunder in accordance with the terms and conditions set forth herein; and

NOW, THEREFORE, in consideration of those mutual promises and the terms and conditions set forth hereafter, the parties agree as set forth below.

1. *Contract Documents.* This Contract consists of Exhibit "A", Recipients Requirements, Contractual Responsibilities and Program Description; Exhibit "B", Payment Schedule; and Exhibit "C", Insurance Requirements attached hereto, made a part hereof and incorporated herein, and all written change orders and modifications issued and approved by the City after execution of this Contract.

2. *Term of Contract.* This Contract shall be for the period beginning October 1, 2025 and ending September 30, 2026.

3. *Renewal.* This Contract is not subject to renewal.

4. *City's Maximum Obligation.* City agrees to pay Recipient the aforementioned sum to provide the Work. Both parties agree that unless otherwise directed by City in writing, Recipient shall continue to provide the Work during the term of this Contract.

5. *Payment of Program.* City shall pay Recipient for performance of the Work in accordance with Payment Schedule set forth in Exhibit "B".

6. *Disputes.* Any factual disputes between City and the Recipient in regard to this Contract shall be directed to the City Manager for the City whose decision shall be final.

7. *Contract Administrators, Notices and Demands.*

A. *Contract Administrators.* During the term of this Contract, the City's Contract Administrator shall be the City Manager or his/her written designee and Recipient's Contract Administrator shall be Charlotte Mather-Taylor or his/her written designee.

B. *Notices and Demands.* A notice, demand or other communication hereunder by either party to the other shall be effective if it is in writing and sent via email, facsimile, registered or certified mail, postage prepaid to the representative(s) named below or is addressed and delivered to such other authorized representative at the address as that party from time to time may designate in writing and forward to the other as provided herein.

If to Recipient: Charlotte Mather-Taylor
CEO
5300 Hiatus Rd
Sunrise, FL 33351
Office: (954) 745-9567
Email: mathertaylorc@adrcbroward.org

If to City: Greg Harrison, City Manager
100 W Atlantic Blvd.
Pompano Beach, FL 33060
Office: (954) 786-4601
Email: greg.harrison@copbfl.com

8. *Ownership of Documents and Information.* All information, data, reports, plans, procedures or other proprietary rights in all items, developed, prepared, assembled or compiled by Recipient as required for the Work hereunder, whether complete or unfinished, shall be owned by City without restriction, reservation or limitation of their use and made available at any time and at no cost to City upon reasonable written request for use and/or distribution as City deems appropriate provided City has compensated Recipient in accordance with the terms set forth herein. City's re-use of Recipient's Work product shall be at its sole discretion and risk if done without Recipient's written permission. Upon completion of all Work contemplated hereunder or termination of this Contract, Recipient shall promptly provide City's Contract Administrator copies of all of the above Work documents upon written request. Recipient may not disclose, use, license or sell any Work developed, created or otherwise originated hereunder to any third party whatsoever. The rights and obligations created under this paragraph shall survive termination or expiration of this Contract.

To the extent it is necessary for Recipient to perform the Work, City shall provide any information, data and reports in its possession to Recipient free of charge.

9. *Termination.* City shall have the right to terminate this Contract, in whole or in part, for cause, default or negligence on Recipient's part, upon ten (10) business days advance written notice to Recipient. Such Notice of Termination may include City's requests for certain product documents and materials, and other provisions regarding the Program.

If there is any material breach or default in Recipient's performance of any covenant or obligation hereunder which has not been remedied within ten (10) business days after

City's written Notice of Termination, City, in its sole discretion, may terminate this Contract immediately and Recipient shall not be entitled to receive further payment from the effective date of the Notice of Termination.

In the event the City fails for any reason to appropriate funds for this Contract, it shall be deemed terminated and City shall provide Recipient with ten (10) business days written notice. Upon receipt of said notice, Recipient shall be responsible for any and all expenses and/or legal obligations made after receipt of City's written notice from the City.

10. *Force Majeure.* Neither party shall be obligated to perform any duty, requirement or obligation hereunder if such performance is prevented by fire, hurricane, earthquake, explosion, war, civil disorder, sabotage, accident, flood, acts of nature or by any reason of any other matter or condition beyond the control of either party which cannot be overcome by reasonable diligence and without unusual expense ("Force Majeure"). In no event shall economic hardship or lack of funds be considered an event of Force Majeure. Additionally, should funds not be utilized, and services or programs not provided within the specific required time period in this Contract due to circumstances outside the control of Recipient, including but not limited to, a Force Majeure event, City is under no obligation to amend or extend this Contract to provide the approved funding past the expiration of the performance period set forth in this Contract. Any amendment to this Contract for such purposes shall be at City's sole discretion, based upon its budget, available funds, and other factors it may deem relevant.

Recipient must follow all Federal, State, County, and City safety guidelines, including all CDC safety guidelines in effect during the term of the Program, including but not limited to social distancing, and personal protection equipment. Inability to conduct the Program and follow any and all required safety guidelines from the COVID-19 crisis or other similar emergency, or failure to follow such requirements, including but not limited to, social distancing, shall constitute grounds for immediate cancellation of this Agreement unilaterally by the City upon written notice, which may be provided via electronic mail.

11. *Insurance.* Recipient shall maintain insurance in accordance with Exhibit "C" throughout the term of this Contract.

12. *Indemnification.* Except as expressly provided herein, no liability shall attach to the City by reason of entering into this Contract.

A. Recipient shall at all times indemnify, hold harmless and defend the City, its officials, employees, volunteers and other authorized agents from and against any and all claims, demands, suit, damages, attorneys' fees, fines, losses, penalties, defense costs or liabilities suffered by the City arising directly or indirectly from any act, breach, omission, negligence, recklessness or misconduct of Recipient and/or any of its agents, officers, or employees hereunder, including any inaccuracy in or breach of any of the representations, warranties or covenants made by the Recipient, its agents, officers and/or employees, in the performance of Work under this Contract. Recipient agrees to investigate, handle, respond to, provide defense for, and defend any such claims at its sole expense and to bear all other costs and expenses related thereto, even if the claim(s) is/are groundless, false or fraudulent. To the extent considered necessary by City, any sums due Recipient hereunder may be retained by City until all of City's claims for indemnification hereunder have been settled or otherwise resolved, and any amount withheld shall not be subject to payment or interest by City.

B. Recipient acknowledges and agrees that City would not enter into this Contract without this indemnification of City by Recipient. The parties agree that one percent (1%) of the total compensation paid to Recipient hereunder shall constitute specific consideration to Recipient for the indemnification provided under this Paragraph and these provisions shall survive expiration or early termination of this Contract.

13. *Sovereign Immunity.* Nothing in this Contract shall be construed to affect in any way the rights, privileges and immunities of the City and its agents as set forth in §768.28, Florida Statutes. Nothing herein shall be construed as consent from either party to be sued by third parties.

14. *Non-Assignability and Subcontracting.*

A. *Non-Assignability.* This Contract is not assignable and Recipient agrees it shall not assign or otherwise transfer any of its interests, rights or obligations hereunder, in whole or in part, to any other person or entity without City's prior written consent which must be sought in writing not less than fifteen (15) days prior to the date of any proposed assignment. Any attempt by Recipient to assign or transfer any of its rights or obligations hereunder without first obtaining City's written approval shall not be binding on City and, at City's sole discretion, may result in City's immediate termination of this Contract whereby City shall be released of any of its obligations hereunder. In addition, this Contract and the rights and obligations herein shall not be assignable or transferable by any process or proceeding in court, or by judgment, execution, proceedings in insolvency, bankruptcy or receivership. In the event of Recipient's insolvency or bankruptcy, City may, at its option, terminate and cancel this Contract without any notice of any kind whatsoever, in which event all rights of Recipient hereunder shall immediately cease and terminate.

B. *Subcontracting.* Prior to subcontracting for Work to be performed hereunder, Recipient shall be required to obtain the written approval of the City's Contract Administrator. If the City's Contract Administrator, in his/her sole discretion, objects to the proposed subcontractor, Recipient shall be prohibited from allowing that subcontractor to provide any Work hereunder. Although Recipient may subcontract Work in accordance with this Paragraph, Recipient remains responsible for any and all contractual obligations hereunder and shall also be responsible to ensure that none of its proposed subcontractors are listed on the *Convicted Vendors List* in accordance with the provisions of Paragraph 26 below.

15. *Performance Under Law.* Recipient, in performance of its duties under this Contract, agrees to comply with all applicable local, state and/or federal laws and ordinances including, but not limited to, standards of licensing, conduct of business and those relating to criminal activity.

16. *Audit and Inspection Records.* Recipient shall permit authorized representatives of the City to inspect and audit all data and records of the Recipient, if any, related to the Work being funded by this Contract until three (3) years after City's final payment under this Contract. Recipient agrees that such inspections and audits may include City's authorized representatives auditing Recipient's financial affairs at any time with no advance notice by City.

Recipient further agrees to include in all subcontracts hereunder a provision to the effect that the subcontractor agrees that City or any of its duly authorized representatives shall,

until **three (3) years after City's final payment to Recipient**, have access to and the right to examine any books, documents, papers and records of such subcontractor attendant to any subcontracted Work provided hereunder.

In the event Recipient receives fifty thousand dollars (\$50,000.00) or more from the City, the City reserves the right to request a copy of a Grant Auditing Report conducted in accordance with the Government Auditing Standards issued by the United States Comptroller General and the provisions of OMB Circular A-133 issued by the Office of Management and Budget, Executive Office of the President. If such a request is made by the City, all grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. Upon City's written request, this Report shall be due within one hundred and twenty (120) days of the close of the City's fiscal year.

17. *Adherence to Law.* Both parties shall adhere to all applicable laws governing their relationship with their employees including, but not limited to, laws, rules, regulations and policies concerning worker's compensation, unemployment compensation and minimum wage requirements.

18. *Independent Contractor.* Recipient shall be deemed an independent contractor for all purposes, and employees of Recipient and all its contractors, subcontractors and the employees thereof, shall not in any manner be deemed to be employees of the City. As such, the employees of Recipient, its contractors or subcontractors, shall not be subject to any withholding for tax, social security or other purposes by City, nor shall such contractor, subcontractor or employee be entitled to sick leave, pension benefits, vacation, medical benefits, life insurance, workers or unemployment compensation or the like from City. Furthermore; nothing in this Contract shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between Recipient and City.

19. *Mutual cooperation.* Recipient recognizes its performance of Work hereunder is essential to the provision of vital public services and the accomplishment of the stated goals and mission of City. Therefore, Recipient shall be responsible to maintain a cooperative and good faith attitude in all relations with City and the public and shall actively foster a public image of mutual benefit to both parties. Recipient shall not make any statements or take any actions detrimental to this effort.

20. *Public Records.*

A. The City of Pompano Beach is a public agency subject to Chapter 119, Florida Statutes. The Recipient shall comply with Florida's Public Records Law, as amended. Specifically, the Recipient shall:

1. Keep and maintain public records required by the City in order to perform the service.

2. Upon request from the City's custodian of public records, provide the City with a copy of requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes or as otherwise provided by law.

3. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the Contract if Recipient does not transfer the records to the City.

4. Upon completion of this Contract, transfer, at no cost to City, all public records in its possession or keep and maintain public records required by the City as required hereunder. If Recipient transfers all public records to the City upon completion of this Contract, Recipient shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If Recipient keeps and maintains public records upon completion of this Contract, Recipient shall meet all applicable requirements for retaining public records. Upon request from the City's custodian of public records, all records stored electronically by Recipient must be provided to the City in a format that is compatible with the information technology systems of the City.

B. Failure of the Recipient to provide the above described public records to the City within a reasonable time may subject Recipient to penalties under §119.10, Florida Statutes, as amended.

PUBLIC RECORDS CUSTODIAN

IF THE RECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE RECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

**CITY CLERK
100 W. Atlantic Blvd., Suite 253
Pompano Beach, Florida 33060
(954) 786-4611
RecordsCustodian@copbfl.com**

21. *Governing Law; Venue.* This agreement must be interpreted and construed in accordance with and governed by the laws of the State of Florida. The exclusive venue for any lawsuit arising from, related to, or in connection with this Agreement will be in the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida. If any claim arising from, related to, or in connection with this Agreement must be litigated in federal court, the exclusive venue for any such lawsuit will be in the United States District Court or United States Bankruptcy Court for the Southern District of Florida. BY ENTERING INTO THIS AGREEMENT, THE PARTIES HEREBY EXPRESSLY WAIVE ANY RIGHTS EITHER PARTY MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.

22. *Waiver and Modification.*

A. No waiver made by either party with respect to performance, manner, time, or any obligation of either party or any condition hereunder shall be considered a waiver of that party's rights with respect to the particular obligation or condition beyond those expressly waived in writing or a waiver of any other rights of the party making the waiver or any other obligations of the other party.

B. No Waiver by Delay. The City shall have the right to institute such actions or proceedings as it may deem desirable for effectuating the purposes of this Contract provided that any delay by City in asserting its rights hereunder shall not operate as a waiver of such rights or limit them in any way. The intent of this provision is that City shall not be constrained to exercise such remedy at a time when it may still hope to otherwise resolve the problems created by the default or risk nor shall any waiver made by City with respect to any specific default by Recipient be considered a waiver of City's rights with respect to that default or any other default by Recipient.

C. Either party may request changes to modify certain provisions of this Contract; however, unless otherwise provided for herein, any such changes must be contained in a written amendment executed by both parties with the same formality of this Contract.

23. *No Contingent Fee.* Recipient warrants that other than a bona fide employee working solely for Recipient, Recipient has not employed or retained any person or entity, or paid or agreed to pay any person or entity, any fee, commission, gift or any other consideration to solicit or secure this Contract or contingent upon or resulting from the award or making of this Contract. In the event of Recipient's breach or violation of this provision, City shall have the right to terminate this Contract without liability and, at City's sole discretion, to deduct from the Payment Schedule set forth in Exhibit B or otherwise recover the full amount of such fee, commission, gift or other consideration.

24. *Attorneys' Fees and Costs.* In the event of any litigation involving the provisions of this Contract, both parties agree that the prevailing party in such litigation shall be entitled to recover from the non-prevailing party reasonable attorney and paraprofessional fees as well as all out-of-pocket costs and expenses incurred thereby by the prevailing party in such litigation through all appellate levels.

25. *No Third-Party Beneficiaries.* Recipient and City agree that this Contract and other contracts pertaining to Recipient's performance hereunder shall not create any obligation on Recipient or City's part to third parties. No person not a party to this Contract shall be a third-party beneficiary or acquire any rights hereunder.

26. *Public Entity Crimes Act.* As of the full execution of this Contract, Recipient certifies that in accordance with §287.133, Florida Statutes, it is not on the *Convicted Vendors List* maintained by the State of Florida, Department of General Services. If Recipient is subsequently listed on the *Convicted Vendors List* during the term of this Contract, Recipient agrees it shall immediately provide City written notice of such designation in accordance with Paragraph 7 above.

27. *Entire Contract.* This document incorporates and includes all prior negotiations, correspondence, conversations, contracts or understandings applicable to the matters contained herein, and the parties agree that there are no commitments, contracts or understandings

concerning the subject matter of this Contract that are not contained in this document. Accordingly, it is agreed that no deviation from the terms hereof shall be predicated upon any prior representations or contracts, whether oral or written.

28. *Headings.* The headings or titles to Articles of this Contract are not part of the Contract and shall have no effect upon the construction or interpretation of any part of this Contract.

29. *Counterparts.* This Contract may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. A photocopy, email or facsimile copy of this Contract and any signatory hereon shall be considered for all purposes as original.

30. *Approvals.* Whenever City approval(s) shall be required for any action under this Contract, said approval(s) shall not be unreasonably withheld.

31. *Absence of Conflicts of Interest.* Both parties represent they presently have no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with their performance under this Contract and that no person having any conflicting interest shall be employed or engaged by either party in their performance hereunder.

32. *Binding Effect.* The benefits and obligations imposed pursuant to this Contract shall be binding and enforceable by and against the parties hereto.

33. *Employment Eligibility.* By entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility." This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than twenty (20) calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of one (1) year after the date of termination.

34. *Severability.* Should any provision of this Contract or the applications of such provisions be rendered or declared invalid by a court action or by reason of any existing or subsequently enacted legislation, the remaining parts of provisions of this Contract shall remain in full force and effect.

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IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed the day and year hereinabove written.

CITY OF POMPANO BEACH

By: _____
REX HARDIN, MAYOR

By: _____
GREGORY P. HARRISON, CITY MANAGER

Attest:

KERVIN ALFRED, CITY CLERK (SEAL)

Dated: _____

APPROVED AS TO FORM:

MARK E. BERMAN, CITY ATTORNEY

"RECIPIENT"

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.
(Print or type name of company here)

Witnesses:

Martha Roig
MARTHA ROIG
(Print or Type Name)

Shirley Snipes
Shirley Snipes
(Print or Type Name)

By: Charlotte Mather-Taylor
Print Name: Charlotte Mather-Taylor

Title: CEO

STATE OF FLORIDA

COUNTY OF Broward

The foregoing instrument was acknowledged before me, by means of ☒ physical presence or ☐ online notarization, this 3rd day of September, 2025, by Charlotte Mather-Taylor as CEO of AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC., a Florida non for profit corporation. She is personally known to me or who has produced _____ (type of identification) as identification.

NOTARY'S SEAL:

Elizabeth Lombardo
NOTARY PUBLIC, STATE OF FLORIDA

Elizabeth L. Lombardo
(Name of Acknowledger Typed, Printed or Stamped)

HH 715104
Commission Number



**RESOLUTION
OF THE BOARD OF DIRECTORS OF THE
AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.**

March 16, 2023

A RESOLUTION OF THE BOARD OF DIRECTORS OF THE AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. AUTHORIZING THE APPROPRIATE CORPORATE OFFICIALS TO EXECUTE VOUCHERS AND CHECKS, TO MAKE DEPOSITS AND WITHDRAWALS, AND TO AUTHORIZE TRANSACTIONS, INVOICES, AND CONTRACTS PURSUANT TO THE CORPORATION'S PROCUREMENT AND CASH DISBURSEMENT POLICIES AND AS PROVIDED BY LAW; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the Board of Directors ("Board") of the Areawide Council on Aging of Broward County, Inc. ("Corporation"), has determined that in order for the business operations of the Corporation to function in a proper and efficient manner, it is necessary and prudent for this Board to delegate certain powers and control over the Corporation's affairs to certain of its Executive Committee Board members and the Chief Executive Officer ("CEO") of the Corporation;

NOW THEREFORE BE IT RESOLVED BY THE BOARD OF DIRECTORS OF THE AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. THAT:

Section 1. Effective as of March 16, 2023, the delegations made herein are approved with such modifications, amendments, or changes as may be required from time to time.

Section 2. The President, any Vice President, the Treasurer, the Secretary, and the Chief Executive Officer of the Corporation shall be considered an "Authorized Officer," and collectively, the "Authorized Officers," for the purposes of this Resolution.

Section 3. Authorization shall be designated to the appropriate Authorized Officer(s) as more particularly set forth herein below to be empowered and directed in the name of and on behalf of the Corporation to take or cause to be taken all actions, and to make, execute, and deliver, or cause to be made, executed, and delivered, all such agreements, undertakings, documents, instruments, deeds or certificates in the name and on behalf of the Corporation and to prepare, execute and file, or cause to be prepared, executed and filed, with any federal, state, local, foreign or other regulatory agencies any forms, reports, filings, applications or other documents, and to incur and pay, or cause to be incurred and paid, such expenses, fees and taxes as shall be deemed necessary, advisable or appropriate, in the opinion of such Authorized Officer(s), and the taking of any such action or the preparation, delivery, execution or filing by any Authorized Officer(s) of any of the foregoing or the payment of any such expenditures shall conclusively establish authority therefor from and the approval of the Corporation to effectuate or carry out fully the purpose and intent of this Resolution.

**AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. BOARD OF DIRECTORS
MOTION FOR A RESOLUTION AUTHORIZING SIGNATORY AUTHORITY**

MARCH 16, 2023

WILLIAM EDELSTEIN

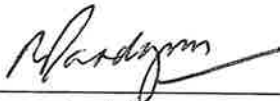
At the March 16, 2023 Board Meeting, Attorney Julie Klahr presented a draft resolution authorizing designated corporate officers to execute vouchers and checks, to make deposits and withdrawals, and to authorize transactions, invoices, and contracts. Copies of the Resolution were emailed to the Board Members prior to the March 16 meeting.

I now make a motion that we approve the 2023 Resolution of the Board of Directors of the Areawide Council on Aging of Broward County, Inc. approving the persons being authorized as signatories on the account.

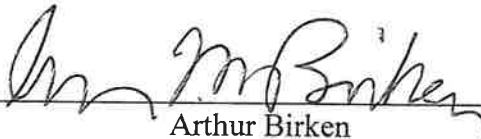
Section 4. Any financial institution authorized by law and in accordance with by the Articles and Bylaws of the Corporation, are hereby designated as the official depositories of the Corporation, and that any and all funds therein contained shall be subject to withdrawal upon checks, notes, drafts, bills of exchange, acceptances, undertakings, or other orders for the payment of money by said Corporation, signed by any of the Authorized Officers.

Section 5. Designated financial institutions shall be and they are hereby authorized and requested to accept, honor, and pay without further inquiry, and until the delivery to them of written notice of the revocation of the authority hereby granted, all checks, transactions on investments, and other orders for the payment or withdrawal of money deposited with said financial institutions in the name of the Corporation, including checks or other orders for money, shall be signed or endorsed in the name of the Corporation by any of the Authorized Officers as set forth herein.

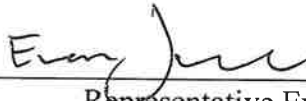
Section 6. As of the date of this Resolution, the following are the named persons and their signatures holding the office designated after their names, to wit:



Naushira Pandya, M.D.
PRESIDENT



Arthur Birken
FIRST VICE PRESIDENT



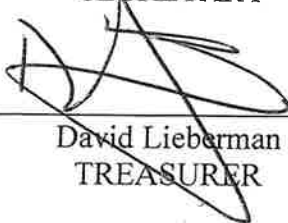
Representative Evan Jenne
SECOND VICE PRESIDENT



Senator Nan Rich
THIRD VICE PRESIDENT



Timothy G. Curtin
SECRETARY



David Lieberman
TREASURER


Charlotte Mather-Taylor
CHIEF EXECUTIVE OFFICER

Section 7. The authority of the Authorized Officers named herein and authorized to sign checks, withdrawals, drafts or other order for payment upon one or more of the accounts of the Corporation maybe restricted from time to time. The aforesaid banks or associations shall not be bound by such restrictions unless and until they have actually received a written certificate made by the Corporation notifying them of such restrictions.

Section 8. Any and all actions heretofore taken by any Authorized Officer(s) in connection with the matters contemplated hereby on or prior to the date on which the Board adopted these resolutions be, and they hereby are ratified, confirmed and approved; and

Section 9. If any clause, section, or other part or application of this Resolution shall be held by any court of competent jurisdiction to be unconstitutional or invalid, such unconstitutional or invalid part or application shall be considered as eliminated and so not affecting the validity of the remaining portions or applications remaining in full force and effect.

Section 10. All Resolutions or parts of Resolutions in conflict herewith be and the same are hereby repealed to the extent of such conflict.

Section 11. This Resolution shall become effective immediately upon its passage and adoption. An executed copy of this Resolution shall be filed with the minutes of the Board.

PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC., THIS 16 DAY OF MARCH, 2023.

**AREAWIDE AGENCY ON AGING OF
BROWARD COUNTY, INC.**



Naushira Pandya, M.D., President

RESOLUTION
OF THE BOARD OF DIRECTORS OF THE
AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

March 16, 2023

A RESOLUTION OF THE BOARD OF DIRECTORS OF THE AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. AUTHORIZING THE APPROPRIATE CORPORATE OFFICIALS TO EXECUTE VOUCHERS AND CHECKS, TO MAKE DEPOSITS AND WITHDRAWALS, AND TO AUTHORIZE TRANSACTIONS, INVOICES, AND CONTRACTS PURSUANT TO THE CORPORATION'S PROCUREMENT AND CASH DISBURSEMENT POLICIES AND AS PROVIDED BY LAW; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the Board of Directors ("Board") of the Areawide Council on Aging of Broward County, Inc. ("Corporation"), has determined that in order for the business operations of the Corporation to function in a proper and efficient manner, it is necessary and prudent for this Board to delegate certain powers and control over the Corporation's affairs to certain of its Executive Committee Board members and the Chief Executive Officer ("CEO") of the Corporation;

NOW THEREFORE BE IT RESOLVED BY THE BOARD OF DIRECTORS OF THE AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. THAT:

Section 1. Effective as of March 16, 2023, the delegations made herein are approved with such modifications, amendments, or changes as may be required from time to time.

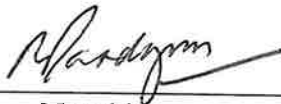
Section 2. The President, any Vice President, the Treasurer, the Secretary, and the Chief Executive Officer of the Corporation shall be considered an "Authorized Officer," and collectively, the "Authorized Officers," for the purposes of this Resolution.

Section 3. Authorization shall be designated to the appropriate Authorized Officer(s) as more particularly set forth herein below to be empowered and directed in the name of and on behalf of the Corporation to take or cause to be taken all actions, and to make, execute, and deliver, or cause to be made, executed, and delivered, all such agreements, undertakings, documents, instruments, deeds or certificates in the name and on behalf of the Corporation and to prepare, execute and file, or cause to be prepared, executed and filed, with any federal, state, local, foreign or other regulatory agencies any forms, reports, filings, applications or other documents, and to incur and pay, or cause to be incurred and paid, such expenses, fees and taxes as shall be deemed necessary, advisable or appropriate, in the opinion of such Authorized Officer(s), and the taking of any such action or the preparation, delivery, execution or filing by any Authorized Officer(s) of any of the foregoing or the payment of any such expenditures shall conclusively establish authority therefor from and the approval of the Corporation to effectuate or carry out fully the purpose and intent of this Resolution.


Section 4. Any financial institution authorized by law and in accordance with by the Articles and Bylaws of the Corporation, are hereby designated as the official depositories of the Corporation, and that any and all funds therein contained shall be subject to withdrawal upon checks, notes, drafts, bills of exchange, acceptances, undertakings, or other orders for the payment of money by said Corporation, signed by any of the Authorized Officers.

Section 5. Designated financial institutions shall be and they are hereby authorized and requested to accept, honor, and pay without further inquiry, and until the delivery to them of written notice of the revocation of the authority hereby granted, all checks, transactions on investments, and other orders for the payment or withdrawal of money deposited with said financial institutions in the name of the Corporation, including checks or other orders for money, shall be signed or endorsed in the name of the Corporation by any of the Authorized Officers as set forth herein.

Section 6. As of the date of this Resolution, the following are the named persons and their signatures holding the office designated after their names, to wit:



Naushira Pandya, M.D.
PRESIDENT



Arthur Birken
FIRST VICE PRESIDENT



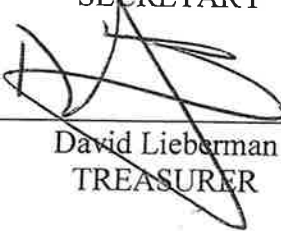
Representative Evan Jenne
SECOND VICE PRESIDENT



Senator Nan Rich
THIRD VICE PRESIDENT



Timothy G. Curtin
SECRETARY



David Lieberman
TREASURER


Charlotte Mather-Taylor
CHIEF EXECUTIVE OFFICER

Section 7. The authority of the Authorized Officers named herein and authorized to sign checks, withdrawals, drafts or other order for payment upon one or more of the accounts of the Corporation maybe restricted from time to time. The aforesaid banks or associations shall not be bound by such restrictions unless and until they have actually received a written certificate made by the Corporation notifying them of such restrictions.

Section 8. Any and all actions heretofore taken by any Authorized Officer(s) in connection with the matters contemplated hereby on or prior to the date on which the Board adopted these resolutions be, and they hereby are ratified, confirmed and approved; and


Section 9. If any clause, section, or other part or application of this Resolution shall be held by any court of competent jurisdiction to be unconstitutional or invalid, such unconstitutional or invalid part or application shall be considered as eliminated and so not affecting the validity of the remaining portions or applications remaining in full force and effect.

Section 10. All Resolutions or parts of Resolutions in conflict herewith be and the same are hereby repealed to the extent of such conflict.

Section 11. This Resolution shall become effective immediately upon its passage and adoption. An executed copy of this Resolution shall be filed with the minutes of the Board.

PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC., THIS 16 DAY OF MARCH, 2023.

**AREAWIDE AGENCY ON AGING OF
BROWARD COUNTY, INC.**



Naushira Pandya, M.D., President

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. BOARD OF DIRECTORS
MOTION FOR A RESOLUTION AUTHORIZING SIGNATORY AUTHORITY
MARCH 16, 2023

WILLIAM EDELSTEIN

At the March 16, 2023 Board Meeting, Attorney Julie Klahr presented a draft resolution authorizing designated corporate officers to execute vouchers and checks, to make deposits and withdrawals, and to authorize transactions, invoices, and contracts. Copies of the Resolution were emailed to the Board Members prior to the March 16 meeting.

I now make a motion that we approve the 2023 Resolution of the Board of Directors of the Areawide Council on Aging of Broward County, Inc. approving the persons being authorized as signatories on the account.

Exhibit “A”

Recipients Requirements, Contractual Responsibilities and Program Description

1. RECIPIENT agrees to do as follows:

- a) To accept the funds as appropriated in accordance with the terms of this Contract; and
- b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, the CITY reserves the right to request a copy of the matching fund contract along with a financial report; and
- c) Prior to the award of any CITY funds, RECIPIENT shall provide documentation substantiating that RECIPIENT’s corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code and a W9 form; and
- d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Contract shall be resolved in favor of the more restrictive guidelines; and
- e) To utilize allotted funds under this Contract for the sole purpose set forth in this Contract – FRAUDULENT USE OF CITY FUNDS SHALL RESULT IN THE TERMINATION OF THIS CONTRACT AND THE RECIPIENT SHALL BE OBLIGATED TO RETURN ALL THE FUNDS AWARDED BY THIS CONTRACT. IN ADDITION, THE CITY RESERVES ANY AND ALL RIGHTS AFFORDED UNDER THE LAW INCLUDING PROSECUTION FOR SUCH FRAUDULENT USE OF CITY FUNDS IN A COURT OF COMPETENT JURISDICTION. ALL UNSPENT FUNDS MUST BE RETURNED TO THE CITY; and
- f) To return to the CITY within fifteen (15) days of demand all CITY funds paid to said RECIPIENT under the terms of this Contract upon the finding that the terms of any contract executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
- g) To return to the CITY all funds expended for disallowed expenditures as determined by the CITY which includes, but not limited to:
 - i. Personal digital assistants (PDAs), cell phones, smartphones, and similar devices
 - ii. Service costs to support PDAs, cell phones, smartphones, and similar devices such as wireless services and data plans
 - iii. Proposal preparation including the costs to develop, prepare or write the proposal

- iv. Pre-award costs
- v. Out-of-state travel; non-local travel expenses
- vi. Gift cards
- vii. Purchase/lease of facilities or vehicles (e.g., buildings, buses, vans, cars)
- viii. Rentals – one day only (written justification and approval needed for additional time)
- ix. Entertainment – exceptions shall be made for community events (written justification and approval needed prior)
- x. Land acquisition
- xi. Furniture
- xii. Honorariums for presenters/speakers and any costs associated with travel expenses
- xiii. Kitchen appliances (e.g., refrigerators, microwaves, stoves, tabletop burners)
- xiv. Tuition/Scholarships
- xv. Capital improvements and permanent renovations (e.g., playgrounds, buildings, fences, wiring)
- xvi. Clothing or uniforms (written justification and approval needed)
- xvii. Project banquets/luncheons
- xviii. Costs for items/services already covered by indirect costs allocation (supplanting)
- xix. Out of state college tours
- xx. Out of county field trips
- xxi. Alcohol
- xxii. Airfare
- xxiii. Boat rentals
- xxiv. Family incentives
- xxv. Car mileage
- xxvi. Stipends
- xxvii. Payroll taxes
- xxviii. Laboratory fees
- xxix. Computers
- xxx. Health benefits
- xxxi. Appliances and home goods (written justification and approval needed)
- xxxii. Digital Cameras
- xxxiii. Plaques
- xxxiv. Hotel Costs
- xxxv. Housing - (written justification and approval needed based on programming)

- h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the CITY under this Contract; and

- 2) RECIPIENT agrees to provide the City Manager's Office or designee with a quarterly narrative and financial progress report, if applicable, on the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

RECIPIENT shall receive the first wave of funding upon approval by the City Commission. A narrative and financial report shall be due on the dates listed below, as applicable.

However, following the completion of the first narrative and financial report and as indicated in Exhibit "B" Payment Schedule, the remaining distribution payment to the RECIPIENT shall be contingent upon prior receipt of the required progress narrative and financial report which is due during the preceding quarter. Narrative and financial reports for recipients receiving quarterly or monthly payments as indicated in Exhibit "B" Payment Schedule shall be due no later than the following dates:

- 1st Quarterly Narrative & Financial Report (October/November/December) - February 1st
- 2nd Quarterly Narrative & Financial Report (January/February/March) - May 1st
- 3rd Quarterly Narrative & Financial Report (April/May/June) - August 1st
- 4th Quarterly Narrative & Financial Report (July/August/September) - September 30th

If RECIPIENT receives a lump sum payment for a one-time event or an award amount of five thousand dollars (\$5,000.00) or less, then the RECIPIENT shall be required to submit their narrative and financial report on a due date above as assigned by the CITY at a later date. The due date shall occur after the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description has concluded.

However, if any of the above dates fall on a weekend, then the due date shall be extended to the next business day, thereafter, as long as it does not exceed the term of this contract.

When submitting the quarterly narrative reports, RECIPIENT shall track and report to the CITY the following:

- a. Current and final outcomes for the program based on the objectives provided in the RECIPIENT's grant application

- b. Include all available statistics and/or numbers regarding the demographics of individuals served by the program; such as the number of CITY of Pompano Beach residents served (include tracking method used)
 - i. Age
 - ii. Race
 - iii. Gender
 - iv. Zip Codes
 - v. Household income (if applicable)
- c. Describe accomplishments of the program to date
- d. Summary of the impact the program has had on its intended target audience; to include challenges faced, photographs of the project and success stories (How did the CITY's funding make a difference in a resident/recipient's life?)

Failure to provide the quarterly narrative reports shall render an organization ineligible to receive future payouts.

- 3) The approved budget for the RECIPIENT, included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.

RECIPIENT shall submit financial reports with all required documentation of expenditures (including original receipts/proofs of payments and itemized list).

Failure to provide a narrative and financial report as assigned by the CITY and/or failure to utilize all of the prior allocated funds from the first six months of the contract shall render an organization ineligible to receive additional payouts and render the organization ineligible for current and future funding from the CITY.

Failure from the RECIPIENT to provide a Quarterly or Lump Sum narrative and financial report shall forfeit all outstanding project funding and shall render the RECIPIENT ineligible for additional funding from the CITY.

- 4) RECIPIENT agrees that any funds provided by the CITY for the operation of the program or activity during the current CITY's fiscal year, which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be returned to the CITY.
- 5) RECIPIENT shall not use the CITY's logo, materials, or testimony for promotion of the RECIPIENT's program without written authorization from the CITY Manager or its designee.

- 6) RECIPIENTS shall attend a mandatory Orientation provided by the CITY at a date to be determined by the CITY. Failure to attend said Orientation shall be grounds for termination of the contract.
- 7) In cases where a contract is terminated by the CITY for default by RECIPIENT, the CITY reserves the right to deny RECIPIENT's future applications for new funding for a time to be determined by the City Manager, and/or his or her designee, and/or the City Commission.
- 8) For contracts awarded for multiple projects, RECIPIENT shall provide separate reports for each project as outlined under Paragraph 2 above. CITY reserves the right to withhold payment if RECIPIENT fails to provide the reports as requested.

Organization Name: AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

Program Funded: Fair Share 2026

Amount Funded: \$25,000.00

Program Description: The ACABC, which administers the Aging & Disability Resource Center (ADRC), is the prime planning, coordinating, and funding source for our network of more than 40 service providers. Our goal is to prevent or delay premature institutionalization of elders. We will use the funding from this award to meet the 10% match requirements for the Federal Older Americans Act (OAA) and State Community Care for the Elderly (CCE) programs, targeting the needs of older residents and their caregivers in Pompano Beach. Our comprehensive suite of services includes, but is not limited to, Congregate and Home Delivered Meals, Adult Day Care, In-home Services (Personal Care, Homemaking, and Respite), Case Management, Emergency Alert Response, In-Facility Respite, Alzheimer's Programs, Minor Home Repairs, Chore Services, Health Support, Recreation, Specialized Medical Equipment, Legal Assistance, Counseling, Health & Wellness Classes, Caregiver Training and Support, Technology, Information, Telephone Reassurance, Screening and Assessment, and Referral Services. These services are designed to improve the well-being and quality of life for seniors and caregivers, helping them maintain independence in a supportive community environment.

Form Name:	City of Pompano Beach Nonprofit Partnership Application
Submission Time:	May 2, 2025 10:18 am
Browser:	Chrome 135.0.0.0 / Windows
IP Address:	12.22.11.2
Unique ID:	1340428843
Location:	25.8295, -80.2927

About Your Organization

Which Fiscal Year Is Your Organization Applying For?	2025-2026
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Full Name of Nonprofit:	Areawide Council on Aging of Broward County, Inc.
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Mission of Nonprofit:	<p>The Areawide Council on Aging of Broward County, Inc. (ACABC) mission is to empower older adults to live independently, safely, and with dignity in their own homes and communities. With over five decades of leadership, ACABC continues to be a driving force in planning, coordinating, funding, and advocating for aging services throughout Broward County.</p> <p>Our mission is fulfilled by providing more than 30 essential services, including home-delivered meals, in-home care, adult day care, caregiver support, legal assistance, transportation, and technology-based programs, all delivered through our Aging and Disability Resource Center (ADRC) and our network of over 40 service providers.</p> <p>Our services prioritize low-income, vulnerable, and socially isolated individuals, ensuring that residents aged 60+ and adults aged 18+ with dementia in Pompano Beach and throughout Broward County receive the support they need to thrive. By improving access, reducing isolation, and promoting community engagement, ACABC helps seniors age with dignity and purpose.</p>
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Brief Overview of Nonprofit:

The Areawide Council on Aging of Broward County, Inc. (ACABC) is a 501(c)(3) nonprofit organization dedicated to enhancing the lives and well-being of seniors in Broward County, Florida. Serving over 473,000 year-round residents, ACABC plays a pivotal role in fostering a community where older adults can thrive. Our focus is on individuals aged 60 and older, as well as caregivers and those with disabilities from low-income households.

Since our founding in 1972 and incorporation in 1974, ACABC has been a leader in coordinating and funding essential services to ensure that seniors have access to resources that improve their quality of life. Through a strategic network of over 40 community-based service providers across 31 municipalities in Broward County, we address critical needs ranging from healthcare and nutrition to housing support and social services. Our work ensures that seniors live with dignity, independence, and safety in their homes and communities.

The services provided include but are not limited to Congregate and Home Delivered Meals, Adult and Senior Day Care, In-home services (Personal Care, Homemaking & Respite), Case Management, Emergency Alert Response, In-Facility Respite, Home Repairs, Chore, Health Support, Recreation, Specialized Medical Equipment, Legal Assistance, Technology, Counseling, Health & Wellness Classes, Information, Telephone Reassurance, Transportation, and Grandparent Support Program. We also offer Caregiver Training and Support classes, Fall Prevention programs, Fraud and Abuse Prevention programs, and an intergenerational program which pairs a senior with a college student for companionship.

We provide Medicare health insurance information, counseling and assistance through the SHINE program and FPL utility bill assistance through the EHEAP program. We also have technology available for seniors and their caregivers to ease isolation, provide companionship and allow homebound seniors to participate in online communities for fellowship and recreation. We are driven by a vision of an inclusive, accessible community where older adults can continue to contribute, remain engaged, and experience a fulfilling life, regardless of the challenges they may face.

Type of Organization:	Human Services
Nonprofit Website:	www.adrcbroward.org
Federal Tax ID Number:	59-1529419

Which funding priority/sub pillar does your nonprofit qualify for?

Community Excellence: Senior Services

How does your program/event(s) fit the funding priority/sub pillar?

The ACABCs coordinated comprehensive service delivery system directly aligns with the funding priority of senior assistance outlined in this sponsorship application. The Fair Share Program is critical for securing the required 10% match funding under the Federal Older Americans Act (OAA) and the State Community Care for the Elderly (CCE) Grant. These funds are vital to addressing the growing needs of the 30,418 residents aged 60 and older in the City of Pompano Beach, including those with dementia and their caregivers.

As the senior population increases, so does the demand for essential supportive services. Funding will be used to provide meals, transportation, in-home care, exercise and wellness programs, and opportunities for social engagement-services that help seniors maintain their independence, dignity, and quality of life. These offerings not only enrich daily living but also play a key role in preventing early institutionalization, which supports both seniors and the broader community.

Statement of Need:

According to the Florida Department of Elder Affairs 2024 County Profiles Data, seniors aged 60 and older make up 25% of Broward County's population. Within this demographic, approximately 85,878 individuals aged 65 and older (17%) are medically underserved, and 56,965 (11%) live with at least one disability. Many older adults face increased vulnerability due to mobility limitations, lack of transportation, and financial hardship, all of which contribute to social isolation.

Mental health is another pressing concern: minor depression affects 15% to 20% of community-dwelling older adults. This condition often results from physical decline, the loss of loved ones, or diminished independence, and it significantly reduces quality of life while acting as a barrier to accessing needed services.

In the City of Pompano Beach, the 60+ population numbers 30,418. While many older adults remain independent, a growing portion are experiencing increased frailty, loss of income, or absence of family support. These factors have led to more seniors seeking assistance with basic needs such as food, transportation, social interaction, and in-home support. Meeting these needs is essential to helping seniors age in place safely and with dignity.

Program/Event Information #1

Will your organization be hosting the program/event on City property? No

Which are you applying for? (Program/Event) Program

Program/Event Name: Fair Share 2026

Type of Program/Event: Nonprofit Program/Seminar/Workshop

Share an executive summary of the program/event: The ACABC, which administers the Aging & Disability Resource Center (ADRC), is the prime planning, coordinating, and funding source for our network of more than 40 service providers. Our goal is to prevent or delay premature institutionalization of elders. We will use the funding from this award to meet the 10% match requirements for the Federal Older Americans Act (OAA) and State Community Care for the Elderly (CCE) programs, targeting the needs of older residents and their caregivers in Pompano Beach. Our comprehensive suite of services includes, but is not limited to, Congregate and Home Delivered Meals, Adult Day Care, In-home Services (Personal Care, Homemaking, and Respite), Case Management, Emergency Alert Response, In-Facility Respite, Alzheimer's Programs, Minor Home Repairs, Chore Services, Health Support, Recreation, Specialized Medical Equipment, Legal Assistance, Counseling, Health & Wellness Classes, Caregiver Training and Support, Technology, Information, Telephone Reassurance, Screening and Assessment, and Referral Services. These services are designed to improve the well-being and quality of life for seniors and caregivers, helping them maintain independence in a supportive community environment.

Elaborate on your program/event goals and objectives. How do you plan on using the funding to solve the problem?

The overarching goal of the ACABC's coordinated service delivery system is to enhance the quality of life for older adults and their caregivers in Pompano Beach by providing essential services that support independence, health, and community connection. Our primary objective is to prevent or delay premature institutionalization by offering a comprehensive, person-centered network of care.

Funding from this award will be used to secure the required 10% match for Federal Older Americans Act (OAA) and State Community Care for the Elderly (CCE) funds. These matching funds are critical to unlocking federal and state dollars that directly support a wide range of services for seniors in the City of Pompano Beach.

Our program objectives is to ensure comprehensive access to services through a network of over 40 service providers that address nutritional, medical, social, legal, and emotional needs of older adults and their caregivers. The OAA Program services include home-delivered and congregate meals; adult day care; transportation; minor home repairs; legal assistance; health and wellness programs; telephone reassurance; technology training; and information, referral, screening, and assessment services. The CCE Program services include case management, homemaking, personal care, respite care, emergency alert systems, specialized medical supplies, and intake and screening. We also provide support for individuals with dementia and their families. Services include case management, caregiver training and respite, consumable supplies, and other assistance to families caring for loved ones with Alzheimer's disease or other dementias, ensuring caregivers are not overwhelmed and care recipients receive appropriate support.

As the designated entry point for the Statewide Medicaid Managed Care Program, we screen and assist qualifying seniors and adults with disabilities aged 18-64, guiding them through the eligibility and enrollment process.

We enhance financial support and healthcare literacy through programs such as EHEAP (Emergency Home Energy Assistance for the Elderly Program) and SHINE (Serving Health Insurance Needs of Elders) assist seniors with utility bills, Medicare counseling, and appeals, helping them navigate complex systems and maintain essential services.

We promote social inclusion and reduce isolation with our caregiver services and technology programs provide meaningful engagement, especially for socially isolated seniors and their caregivers, helping them stay connected and supported. By strengthening our service provider network through leadership, training, and technical assistance, we ensure a responsive, sustainable system that adapts to the evolving needs of our aging population and will have a positive long term impact. This funding directly addresses systemic challenges such as

service access, social isolation, and caregiver burden,
empowering seniors to age in place with dignity.

What are the proposed outcomes of your program/event?

Through this program, we anticipate serving over 800 older adults in the City of Pompano Beach by leveraging our extensive network of community partners to deliver high-impact, person-centered services. The 2026 Pompano Beach Fair Share funding will sustain a coordinated and comprehensive delivery system that supports aging in place and improves quality of life for seniors and their caregivers.

Our expected outcomes include improved nutrition and food security. Pompano Beach seniors will gain access to nutritious meals through emergency, congregate, and home-delivered meal programs. We expect a reduction in food insecurity and related health issues among the low-income and homebound seniors that we serve. Another anticipated outcome is increases social engagement and reduced isolation a Pompano Beach seniors participate in adult day care, health and wellness classes, exercise programs, lectures, and other recreational activities that will enhance their mental and emotional well-being and reduce loneliness and depression.

By providing access to assistance with activities of daily living, such as homemaking, personal care, and respite services, we expect Pompano Beach seniors will have increased independence. Additionally, by offering minor home improvements technology and chore services we aim to reduce fall risks and improve overall home safety. Pompano Beach seniors will also benefit from legal assistance, access to technology, and education on online community resources, thereby improving digital literacy and connectivity for seniors who may feel lonely or isolated. Our programs offer strong caregiver support services and caregivers will receive training and support designed to reduce stress and reduce caregiver burnout.

Overall, these outcomes will contribute to healthier, safer, and more connected lives for Pompano Beach seniors and their caregivers, while also reducing demand for institutional care and interventions.

Share the primary methodology by which you will measure the outcomes of your program/event:

The ACABC measures the success of its programs using an outcome evaluation model established by the Florida Department of Elder Affairs (DOEA). All services provided county-wide by our network of service providers are tracked monthly through the Enterprise Client Information and Registration Tracking System (eCIRTS). This system allows us to monitor essential data, including assessments, service delivery, hours of service, units provided, and the cost associated with each service. In addition, our service providers are required to submit quarterly narrative reports detailing the Outreach they have conducted letting the public know about the services available and how to access them as well as the events and programs offered. These reports are consolidated and data is submitted annually to the DOEA. Our service providers also conduct annual satisfaction surveys that are used to assure the quality of the services being delivered. Quarterly, the ACABC will provide the City of Pompano Beach with a comprehensive summary report detailing the services delivered to Pompano Beach residents. These reports will also include a breakdown of services by zip code to ensure that we are meeting the needs of all areas within the city.

Estimated total number of individuals expected to attend your program/event:

10,001+

Please specify the number of City of Pompano Beach residents your organization will serve if the program/event is funded:

800

Describe the demographics of the population you are impacting with this program/event:

In FY23-24, the ACABC served 808 residents in the City of Pompano Beach. 69% of participants are female and 31% are male.

The average age of the participants in the City of Pompano Beach utilizing our services is 77 years old. 35% are between 65-74, 34% are 75-84, 21% are 85 and older, 9% are 60-64, and 1% are under 60 years of age with dementia or a disability.

Within the City of Pompano Beach 37% of participants live alone, 23% live with a caregiver, 25% live with someone other than a caregiver, and 15% did not disclose their living situation.

Within Pompano Beach 35% of participants are at or below the poverty level. Additionally 41% of participants are Black/African American, 5% are Multi-Racial and 54% are White. 19% are of Hispanic or Latino ethnicity and 29% have limited English proficiency.

ACABC's programs are designed to serve all seniors aged 60 and older, regardless of socioeconomic background. However, both Federal OAA and State CCE funding give priority to individuals with the greatest economic or social need, including low-income seniors, minority elders, and seniors with limited English proficiency, those at risk of institutionalization, and individuals residing in underserved areas

By targeting these populations, ACABC ensures that resources are directed where they are most needed to promote independence, safety, and quality of life among Pompano Beach's aging residents.

Include a description of the geographic area your program/event(s) will serve and how it will impact the area:

The Aging & Disability Resource Center (ADRC) is our Helpline and entry point for older adults aged 60 and over across Broward County, Florida which is the second most populous county in the state. Broward County is predominantly urban and encompasses 31 municipalities and 55 ZIP codes, making it one of the most diverse and densely populated regions in Florida.

The focus of this program is on the City of Pompano Beach, which spans 18 ZIP codes (including 33060-33069, 33071-33077, 33093, and 33097). Pompano Beach includes a mix of residential and unincorporated areas, including neighborhoods where some of the county's most economically disadvantaged seniors reside. Many of these communities fall within Broward's central corridor, which extends from the northern to southern ends of the county and contains a high concentration of older adults in need of support services.

The program will have a direct and measurable impact on Pompano Beach by improving access to essential services (e.g., meals, in-home care, and transportation) for over 800 older residents annually. The program will aim to reduce social isolation and health disparities in underserved and economically disadvantaged neighborhoods. It will also provide support to caregivers and family members through education, training, and respite services. Finally, it will enhance community equity, especially in unincorporated or resource-limited areas.

By providing targeted assistance in a high-need urban area such as Pompano Beach, the program strengthens the local services provided in the area and ensures that vulnerable seniors can age in place with dignity, safety, and independence.

How does your organization specifically market your program/event to City of Pompano Beach residents?

The ACABC has a strong capacity to reach populations and communities with the greatest economic and social needs, through our targeted outreach strategies and tailored programs that address the unique challenges faced by older adults, especially those in multicultural and historically marginalized groups. We regularly provide community outreach and presentations throughout the community, send out regular updates through newsletters, flyers, health fairs, in-person visits and social media.

In 2024, we launched the Tailored Caregiver Assessment & Referral program, which has already served over 160 caregivers. This program connects caregivers to the resources they need while providing tailored support. We also host an Annual Caregiver Conference, which annually reaches over 400 caregivers and older adults, offering valuable education and networking opportunities that address the unique needs of our community.

To further promote access to services, we provide multilingual resources, including information in Spanish, Haitian Creole, and English. Additionally, we conduct in-home assessments to help families connect with resources that improve home accessibility. These efforts proved particularly effective as 21% of our clients reported limited English proficiency. This multilingual approach ensures that we can reach a broad spectrum of clients, ensuring that everyone has access to the services they need.

Our extensive network of service providers, community collaborations, advisory board, and local government partnerships positions us to identify and address gaps in resources and services for older adults. In 2024, with over 3,500 volunteer hours, we are able to reach underserved communities through mobile office hours, wellness fairs, and other outreach efforts across 31 local municipalities. These initiatives allow us to meet people where they are, providing support and services directly to those who need them most.

Additionally, our AAABC digital newsletter, which reaches over 5,000 recipients each month, keeps the community informed about important issues, upcoming services, and programs. One example of this is our promotion of the Lyft Transportation program, launched in late 2024. By using flyers, newsletters, social media, and our website, we were able to rapidly promote this new program. Within just six months, we saw a 100% increase in usage, demonstrating the growing need for transportation services among older adults and our ability to meet that need.

Through these various efforts, AAABC ensures that older adults and caregivers in our community, especially those from economically disadvantaged or marginalized backgrounds, have access to the resources and services they need to thrive. Our commitment to addressing their unique needs through culturally

relevant programs, multilingual outreach, and community-based engagement has significantly improved their quality of life. All of these efforts are targeted to Pompano Beach residents and throughout Broward County.

How does a City of Pompano Beach resident access the services/program your nonprofit provides?

Pompano Beach resident access our services in a variety of ways including:

1) Aging and Disability Resource Center (ADRC): ACABC's Helpline is a critical resource for elders, caregivers, and community members in Broward. The Helpline connects people with services, makes referrals, and assists with addressing challenges experienced by older adults. In 2024, the Helpline processed 37,213 hours of service calls with clients and they will be critical to connecting the client to the project team.

2)Local Agencies and Service Providers: ACABC has over 40 community partner agencies that provide various services and programs to older adults, ranging from healthcare to housing and transportation assistance.

3)ACABC website and social media allow Pompano Beach residents to learn about our programs and services and directly sign up for services such as various technology and other areas of interest and need.

3)ACABC Outreach and SHINE team of volunteers are actively in the Pompano Beach community providing Mobile Office Hours at the Pompano Beach Library, attending Health Fairs, and providing presentations on Medicare, Elder Abuse and Health and Wellness classes.

Start Date of Program/Event:	Oct 01, 2025
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End Date of Program/Event:	Sep 30, 2026
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Does your program/event have a start time/end time?	No
------------------------------------------------------------	----

Name of Program/Event Venue:	Fair Share 2026
-------------------------------------	-----------------

Address of Program/Event Venue Location:	5300 Hiatus Rd Sunrise, FL 33351
-------------------------------------------------	-------------------------------------

Attire of Program/Event (select the one that best applies):	Business Casual
--------------------------------------------------------------------	-----------------

List any benefits or partnership opportunities the City of Pompano Beach receives:

Through its partnership with the Area Agency on Aging of Broward County (ACABC), the City of Pompano Beach receives extensive benefits that directly support its aging population and strengthen the community as a whole.

Some of these benefits include meals (home-delivered, congregate, and emergency) to vulnerable seniors, many of whom are isolated and living alone. Residents benefit from access to a wide array of supportive services that promote independence, safety, and quality of life. Residents have opportunities for social activities, technology access, companionship services, all of which help to reduce isolation and help Pompano Beach seniors stay connected. Residents also benefit from free Medicare and Benefits Counseling through the SHINE (Serving Health Insurance Needs of Elders) program. They receive assistance with public benefits such as Emergency Home Energy Assistance Program (EHEAP) and Medicaid Managed Care Long Term Care applications. All of these program are aimed at preventing premature institutionalization, reducing hospitalizations, and promoting healthier, more active aging. The City and ACABC together have continued collaboration and active participation on community initiatives, special events, and outreach programs.

The Pompano Beach Fair Share partnership with ACABC is aligned to deliver critical services to Pompano Beach residents and it helps the City meet its responsibilities under federal and state elder care funding mandates and reinforces the City of Pompano Beach's commitment to its senior residents.

Attached is a detailed Fair Share Report showing the benefits residents of Pompano Beach have received from this long established partnership.

Total dollar amount of the overall program/event budget:	19443042
-----------------------------------------------------------------	----------

Total dollar amount being requested from the City:	97033
-----------------------------------------------------------	-------

How will your organization use the City of Pompano Beach funding?

Funding for this program is critical to addressing the needs of the 36,956 residents of the City of Pompano Beach who are aged 60 and older, as well as adults with dementia and their caregivers. As the senior population in Pompano Beach continues to grow, the demand for supportive services increases, making this program essential in meeting those needs. The most heavily utilized services we provide include home-delivered and congregate meals, personal care, homemaker services, home modifications, technology assistance, in-home respite, and in-facility respite care. These services play a pivotal role in helping seniors and caregivers maintain their independence and dignity, ensuring they can continue to live safely and comfortably in their homes and communities.

Without these services, many seniors would face increased risks of isolation, poor nutrition, and deteriorating health, which could lead to unnecessary hospitalizations or institutionalization. For caregivers, the support provided by respite services and caregiver training is vital in preventing burnout and ensuring they are equipped to care for their loved ones effectively.

By addressing these critical needs, the program enhances the quality of life for both seniors and their caregivers, fostering a sense of community and reducing the likelihood of premature institutionalization. Ultimately, the program helps create a safer, healthier, and more supportive environment for Pompano Beach's aging population.□

In FY23-24, we provided Pompano Beach residents with \$1,837,329 in services. Attached is a detailed Fair Share Report showing the benefits residents of Pompano Beach have received.

Are you applying for a second program/event?

No

Additional Activities

Are there any additional activities associated with the primary sponsorship event (Examples include VIP event, Kickoff event, Awards Ceremony, Thank You/Recognition Party, etc...)

No

Additional Information

What are your organization's credentials? Tell us why your organization does it better than anyone else.

AACABC has served as a trusted, results-driven leader in aging services for over 50 years, helping older adults and adults with disabilities maintain independence, dignity, and quality of life. Since our founding in 1974, we have grown from working with just two service providers to partnering with over 40 trusted service providers, delivering more than 30 essential services across Broward County.

Our long-standing success is anchored in our core strengths: 1) proven experience and leadership, 2) client centered model of care, 3) community partnerships, and 4) innovation and advocacy.

ACABC has a strong history of managing large-scale, federally and state-funded programs through the Florida Department of Elder Affairs (DOEA), including the Older Americans Act (OAA) and Community Care for the Elderly (CCE) initiatives.

Our Chief Executive Officer, Ms. Charlotte Mather-Taylor, leads an experienced senior management team with expertise in Programs, Planning, Finance, Grants, and Outreach. This leadership ensures accountability and high quality service delivery.

Unlike many organizations, we offer a client centered model of care, addressing the full spectrum of needs including nutrition and case management to legal assistance, caregiver support, and technology-driven companionship. Our services are intended to meet the physical, emotional, and social needs of seniors, enabling them to age safely in their own homes.

We work collaboratively with the 31 municipalities of Broward County, including the City of Pompano Beach, ensuring a localized and culturally aware service delivery. Our strong relationships with service providers and local community organization which enables us to respond rapidly and effectively to the changing needs of the aging population.

ACABC is committed to innovation. We launched several technology services designed to provide companionship and socialization for isolated seniors. We started a TCARE® and online caregiver support services to reduce caregiver stress and we piloted a Lyft transportation service, providing seniors with reliable access to doctor's appointments and social activities. Our deep experience, broad community reach, and innovative approach distinguish ACABC as the most capable and committed organization in Broward County for delivering aging services that empowers older adults to thrive.

Other than the program/event you are applying for, how is your organization serving the residents of the City of Pompano Beach?

In addition to the Fair Share program for which we are requesting funding, ACABC serves Pompano Beach residents with a wide variety of services including our ADRC Helpline which is dedicated to helping seniors, their families and their caregivers by providing information, referral services and screening clients for funded programs. We serve as the entry point for the Statewide Medicaid Managed Care Long Term Care Program and assist residents to apply for Medicaid to access in home support or institutional care when necessary. Our dedicated SHINE Volunteers provide one on one counseling regarding Medicare benefits and when needed help them to file appeal. Our technology programs allow elders to have robotic pet companions, Ring doorbell for safety, fall detection devices, or online connection to health and wellness classes. In addition, our Caregiver Navigators assists caregivers as they navigate through healthcare coverage, caregiving duties, and locating the resources they need to care for their loved one. Our United Way Empowered Partners program provides intergenerational support with one on one connection between seniors and college students, monthly meal packages, and Lyft transportation services. These programs reflect ACABC's continued commitment to supporting our seniors in Pompano Beach.

Any other information you wish to share?

While this funding request specifically seeks matching funds to support our Federal Older Americans Act (OAA) and State Community Care for the Elderly (CCE) programs, it is important to note that Pompano Beach seniors benefit from a broader range of services provided through ACABCs other funding streams that are not match-dependent. During FY23-24, Pompano Beach residents received services of \$1,837,329. However, this amount does not include additional services delivered through our partnerships with United Way Empowered Partners program or other private grants and local community collaborations. These investments underline the deep commitment we bring to the community. They also demonstrate the City of Pompano Beach's strong return on investment in supporting the Fair Share Program, for every \$9 provided by the OAA and CCE funding, the City provides \$1 in matching services. This ensures that Pompano Beach seniors continue to receive the high-quality services they deserve.

City of Pompano Beach Funding History

Has your organization been funded before by City of Pompano Beach?	Yes
If yes, when was the most recent year?	2025
What was the name of program/event funded?	Fair Share 2025
How much was the funding for this program/event?	40000

Requested Budget Information

What is your organization's operational budget?	33843644
What is the total value your nonprofit is applying for?	97033
If you are not awarded the full funding requested for your program/event(s), will you be able to complete your project?	Yes

About Your Staff and Leadership

Total Number of Employees:	67
Full Name of President/CEO/Executive Director:	Charlotte Mather-Taylor

**Include your
President/CEO/Executive
Director's biography:**

Charlotte Mather-Taylor serves as the Chief Executive Officer of the Area Agency on Aging of Broward County (ACABC), where she leads the nonprofit organization responsible for planning, coordinating, monitoring, funding, and providing vital services that support the aging population of Broward County. Under her leadership, ACABC delivers a broad range of programs aimed at helping older adults maintain independence, dignity, and a high quality of life. Ms. Mather-Taylor is a respected leader at the state and national levels. She is the President of the Florida Area Agency on Aging State Association, Chair of the Center for Workforce Inclusion, a national board promoting employment for low-income seniors, Chair of the Florida Association of Area Agencies on Aging Technology Committee, member of the Southeastern Association of Area Agencies on Aging Board and member of the USAging Technology Task Force and expert on the USAging ring pilot program. Locally, she is the Chair of the Broward County Dementia Care and Cure Initiative Task Force, which addresses dementia-related challenges and enhances care options. She is the treasurer of the Coordinating Council of Broward, and she serves on multiple community-focused boards and councils, including the Alzheimer's Association Southeast Florida Chapter, Association of Nonprofits, Broward Alliance Entrepreneurship Council, United Way Public Policy Committee, and the Broward County Parks Foundation Board. Ms. Mather-Taylor previously served as CEO of the Ann Storck Center, overseeing services for individuals with developmental disabilities, and as Vice President of Government Relations, Community & Public Affairs for Broward Health, where she led policy and advocacy initiatives. She holds a Master of Business Administration from Nova Southeastern University and a Bachelor of Arts from the University of Florida. Ms. Mather-Taylor brings a unique combination of executive leadership, policy expertise, and community engagement, making her a powerful advocate for older adults and a driving force behind innovative aging services in Broward County.

About Your Board of Directors

Total Board Members:	13
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**How many board members
contribute financially to the
organization?** 0

**Is there a formal give/get policy
for board members?** No

About Your Partnerships and Contributors

Does your organization have any programmatic collaborations with other community partners? If so, please list them and provide a brief description of their involvement with your organization.

The ACABC is deeply committed to collaborating with a variety of community organizations, agencies, and partners to provide comprehensive support for older adults. These collaborations ensure that our programs and services are effective, accessible, and impactful, allowing them to better serve the needs of the community.

Our community collaborations and partnerships include, but are not limited to:

1. ☐ United Way - We partner with United Way through the Empowered Partners Program to provide isolated seniors with college companions, monthly meal boxes, and Lyft transportation.
2. ☐ ACABC Advisory Council: We have a 28 member advisory council that meets quarterly to address various issues impacting the community and find ways for the ACABC to be actively involved.
3. ☐ Local Agencies and Service Providers: ACABC has over 40 community partner agencies that provide various services and programs to older adults, ranging from healthcare to housing and transportation assistance.
4. ☐ Coordinating Council of Broward: ACABC actively participates in this council, which addresses a wide range of community issues, including homelessness, mental health, food insecurity, and loneliness among older adults.
5. ☐ Emergency Medical Services (EMS): ACABC's staff collaborate closely with local EMS, healthcare organizations, and non-profits to support high-risk older adults, ensuring they receive critical care.
6. ☐ Broward Aging Alliance: As an active member, ACABC works with this alliance to improve services and resources for older adults in Broward County.
7. ☐ Broward County Dementia Care & Cure Initiative Task Force: ACABC chairs this initiative, addressing dementia-related challenges and improving care options for affected individuals.
8. ☐ Geriatric Workforce Enhancement Program: This collaboration supports training and resources to improve the quality of care for older adults through better-equipped healthcare providers.
9. ☐ Florida Council on Aging: AABC is an active member advocate on state-level initiatives and best practices for aging services.
10. ☐ Broward Coalition on Aging: This coalition helps connect ACABC with other aging services providers in the region to strengthen the network of care for older adults.
11. ☐ Florida Power & Light: Through a partnership, ACABC helps provide financial assistance to low-income elders via the Emergency Home Energy Assistance for the Elderly Program, ensuring that vulnerable older adults can maintain essential utilities like heating and air conditioning.
12. ☐ Alzheimer's Association Board: Through this collaboration, ACABC strengthens support for those living with Alzheimer's

disease and their caregivers.

13. □Community Outreach and Presentations: ACABC engages with local groups in the 31 municipalities of Broward County to offer presentations about agency services, raising awareness about the available support options and how to access them.

Through these various partnerships, we ensure that our services are comprehensive and reach all corners of Broward. These collaborations not only help extend the reach of our services but also foster a community-based approach to aging, where resources are shared, and older adults can access the support they need to thrive in their homes and communities.

What other funders have supported your organization within the past year? Please include their levels of contribution.

United Way.....\$255,305
Amazon Ring.....\$10,000

Financial Information

How does your nonprofit organization currently undergo financial scrutiny and assurance? Please select from one of the applicable options:

External Financial Audit conducted by an professional auditing firm

Upload your documents: All items in this section are mandatory.

Itemized Program/Event Budget - Please provide a budget ONLY for the program/event you are applying for.

<https://www.formstack.com/admin/download/file/17948921222>

Agency Operational Budget

<https://www.formstack.com/admin/download/file/17948921224>

Agency External or Internal Audit and/or a combined PDF with your organization's Balance Sheet and P&L.

<https://www.formstack.com/admin/download/file/17948921226>

W9

<https://www.formstack.com/admin/download/file/17948921229>

IRS 501(c)(3) Determination Letter

<https://www.formstack.com/admin/download/file/17948921233>

Articles of Incorporation

<https://www.formstack.com/admin/download/file/17948921237>

Most Recent 990 Form

<https://www.formstack.com/admin/download/file/17948921239>

List of Board of Directors

<https://www.formstack.com/admin/download/file/17948921242>

Matching Gift Documentation

Does Your Organization Receive Matching Funds?

Yes

Please indicate one or more matching gift options below:

One or more donors will match the City's contribution for the proposed program/event in this application.

Matching Gift Documentation Supporting Your City of Pompano Beach Event/Program

<https://www.formstack.com/admin/download/file/17948921250>

Is your matching gift supporting your event/program \$1/\$1 or capped at a specific amount? If capped, please include the cap amount.

Federal dollars are provided to the ACABC through the OAA Legislation. State dollars are allocated by the CCE Act. Both the Federal and State dollars must be matched locally on a 90-10% ratio. This means that for every \$9 provided by the Federal and State Governments, we must raise \$1 in Broward County.

President/CEO/Executive Director Contact Information

Name	Charlotte Mather-Taylor
Title	CEO
Email	mathertaylorc@adrcbroward.org
Phone Number	(954) 745-9567
Mailing Address	5300 Hiatus Rd Sunrise, FL 33351

Primary Nonprofit Contact

Name	Shahnaaz Yasin
Title	Chief Grants Officer
Email	yasins@adrcbroward.org
Phone Number	(954) 745-9567

Certification and Authorization

**I HEREBY CERTIFY BY READING
AND SELECTING EACH
STATEMENT LISTED BELOW THAT
THE:**

Applicant certifies that information contained in this application is complete and accurate. = Select to Agree

Applicant certifies that their organization is a Not For Profit Corporation authorized to do business in the State of Florida. = Select to Agree

Applicant has read and understands the application instructions and requirements of the program. = Select to Agree

Applicant agrees that if recommended for funding, the nonprofit will attend the Mandatory Nonprofit Orientation Workshop and that they will participate in a Nonprofit Program Services Fair as required by the City. = Select to Agree

Applicant certifies that the awarded program/event(s) will serve City of Pompano Beach residents. = Select to Agree

Applicant acknowledges that a recommended award letter is subject to commission approval. = Select to Agree

Applicant acknowledges that only an executed contract with the City authorizes the initiation of program/event services or activities and incurring expenditures. = Select to Agree

Applicant acknowledges that narrative and financial reporting will be required and the organization will meet the assigned deadlines as set forth by the City. = Select to Agree

Applicant acknowledges that the program/event(s) will be completed by the end of the contract term. = Select to Agree

Applicant certifies that the organization has the capacity to comply with all requirements of the program/event(s). = Select to Agree

Applicant will not use funds for disallowed expenditures as set forth by the City. = Select to Agree

Applicant confirms that the organization has an anti-discrimination policy. = Select to Agree

Applicant acknowledges that the program/event(s) submitted will not be eligible to receive funding for if the program/event(s) receives a separate grant from the City for the same program. = Select to Agree

Applicant acknowledges that current policies for general liability, sexual molestation, automobile and workers compensation insurance are required to contract with the City. = Select to Agree

Applicant understands that the submission of their funding request does not guarantee the organization will be selected to receive funding. = Select to Agree

Applicant acknowledges that all information submitted in the partnership application along with any email or correspondence you provide to the City of Pompano Beach becomes a public record and may be subject to disclosure to anyone who requests it under the State's Public Records Laws, to another government agency as required by state or federal law; and/or in response to a court or administrative order, subpoena or search warrant. Your application may be subject to inspection and copying by the public, unless an exception in law exists. = Select to Agree



Department of the Treasury
Internal Revenue Service
Cincinnati Service Center
CINCINNATI OH 45999-0038

In reply refer to: 0256554941
Apr. 23, 2019 LTR 4168C 0
59-1529419 000000 00
00016791
BODC: TE

AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC
5300 N HIATUS RD
SUNRISE FL 33351



022882

Employer ID number: 59-1529419
Form 990 required: Y

Dear Taxpayer:

We're responding to your request dated Apr. 16, 2019, about your tax-exempt status.

We issued you a determination letter in March 1975, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(03).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0256554941
Apr. 23, 2019 LTR 4168C 0
59-1529419 000000 00
00016792

AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC
5300 N HIATUS RD
SUNRISE FL 33351

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,

A handwritten signature in dark ink, appearing to read "K. A. Billups". The signature is fluid and cursive, with the first name "Kim" and last name "Billups" clearly distinguishable.

Kim A. Billups, Operations Manager
Accounts Management Operations 1

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Areawide Council on Aging of Broward County, Inc.	
	2 Business name/disregarded entity name, if different from above. Area Agency on Aging of Broward County	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) 501(C)(3) Organization	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 5300 Hiatus Rd 6 City, state, and ZIP code Sunrise, FL 33351 7 List account number(s) here (optional)	Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-						
or									
Employer identification number									
5	9	-	1	5	2	9	4	1	9

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Charles P. Matha-Tam</i>	Date <i>1/3/24</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

STATE OF FLORIDA

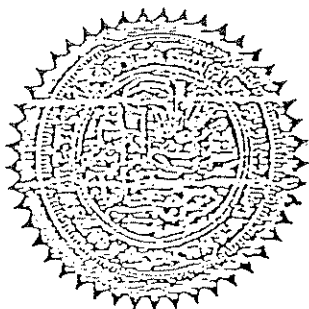
DEPARTMENT OF STATE



I, BRUCE A. SMATHERS, Secretary of State of the State of Florida, do hereby

certify that the following is a true and correct copy of

Certificate of Amendment to Certificate of Incorporation
of AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC., a
corporation not for profit, organized and existing under
the laws of the State of Florida, amending Article IV,
filed on the 17th day of March, A. D., 1975, as shown by
the records of this office.



GIVEN under my hand and the Great
Seal of the State of Florida, at
Tallahassee, the Capital, this the
17th day of March,
A.D., 1975

Bruce A. Smathers

SECRETARY OF STATE

STATE OF FLORIDA

DEPARTMENT OF STATE



I, RICHARD (DICK) STONE, Secretary of State of the State of Florida, do hereby
certify that the following is a true and correct copy of

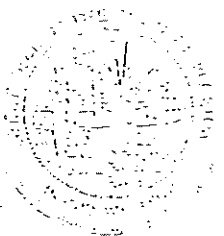
CERTIFICATE OF INCORPORATION

OF

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

a corporation not for profit organized and existing under the Laws of the State of
Florida, filed on the 28th day of February, A.D., 1974,
as shown by the records of this office.

GIVEN under my hand and the Great
Seal of the State of Florida, at
Tallahassee, the Capital, this the
28th day of February,
A.D., 1974.



Richard (Dick) Stone
SECRETARY OF STATE

CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF INCORPORATION

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.,

Florida non-profit corporation, under its corporate seal and the hands of its President, David Keating, and its Secretary, Mrs. Abram Hoffman, hereby certifies that:

1. The Board of Directors of said corporation, at a meeting called and held on March 6, 1975, adopted the following resolution:

BE IT RESOLVED by the Board of Directors of the Areawide Council on Aging of Broward County, Inc.,

Section 1: That the Articles of Incorporation of the Areawide Council on Aging of Broward County, Inc., be, and the same are hereby, amended by adding thereto the following new section to Article IV:

Section B.

Notwithstanding any other provision of these Articles, this corporation shall not carry on any other activities not permitted to be carried on by a) a corporation exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provision of any future United States Internal Revenue Law, or b) a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1954, or any other corresponding provision of any future United States Revenue Law.

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

MAR 17 11 28 AM '75

FILED

Section 2: That all other portions of the Articles of Incorporation of the Areawide Council on Aging of Broward County, Inc., shall remain in full force and effect.

IN WITNESS WHEREOF, said corporation has caused this certificate to be signed in its name by its President and its corporate seal to be hereunto affixed and attested by its Secretary, this 6th day of MARCH, 1975.

AREAWIDE COUNCIL ON AGING OF BROWARD
COUNTY, INC.

By David Keating
David Keating, President

Attest:

Mrs. Abram Hoffman
Mrs. Abram Hoffman, Secretary

ARTICLES OF INCORPORATION

OF

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

WE, the undersigned, hereby certify that we have associated ourselves together for the purpose of forming a charitable association, not for profit, under a Charter as follows:

ARTICLE I.

The name of the corporation is:

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

ARTICLE II.

The object of the corporation is to plan, coordinate, monitor, evaluate and fund various groups, agencies, organizations and projects relating to the elderly in Broward County, Florida; to plan, plan for, promote, provide for and provide services and activities for elderly people in Broward County, Florida; to encourage participation and involvement of volunteers, professionals and all other persons interested in the welfare and well-being of the elderly in Broward County, Florida.

ARTICLE III.

The corporation shall have perpetual existence. The principal place of business and location of the corporation is 13 South-West 16th Street, Fort Lauderdale, Broward County, Florida, 33315.

ARTICLE IV.

The corporation shall have the power to do all things legal and necessary to accomplish its objectives as set forth in Article II of these Articles of Incorporation including, but not limited to, the following:

1. To make donations, gifts, contributions and loans from the income or assets of the corporation;
2. To accept by gift, devise, bequest, grant or other lawful means, property of every kind and description, without limit as to amount;

FILED
FEB 20 12 49 PM 1974
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3. To borrow or solicit funds from any lawful source available;

4. To administer and manage the donations, gifts, devises, bequests, grants and the property of the corporation of every kind and description;

5. To purchase, acquire, hold, invest, use, mortgage, pledge, sell, assign, transfer or otherwise dispose of both real and personal property of every kind and description, or any interest whatsoever in any real or personal property, and to exercise all rights and all privileges in respect to ownership of any and all personal or real property;

6. To employ such staff and personnel necessary and proper to effectuate the powers of the corporation.

ARTICLE V.

The affairs of the corporation shall be managed by a President, three Vice-Presidents, Secretary, Treasurer and such other Officers as may be authorized from time to time by the By-laws of the corporation and by a Board of Directors consisting of not less than five (5) nor more than fifteen (15) to be elected as set forth in the By-laws of the corporation.

ARTICLE VI.

The names and post office addresses of the subscribers and officers who shall hold office until the first annual election are as follows:

Mayor David Keating	President
Box 2207, Hollywood, Fla. 33022	
Rev. Kenneth Crossman	Vice-President
100 E. Las Olas Blvd., Ft. Lauderdale, Fla. 33301	
Hon. Leroy H. Moe	Vice-President
201 S.E. 6 St., Ft. Lauderdale, Fla. 33301	
Dr. Franklin Saunders	Vice-President
2601 E. Oakland Pk. Blvd., Ft. Lauderdale, Fla. 33306	
Mrs. Abram Hoffman	Secretary
5560 Cypress Road, Plantation, Florida 33313	
Mrs. Luise Tworoger	Treasurer
1044 N. North Lake Dr., Hollywood, Fla. 33020	

ARTICLE VII.

The names of the Board of Directors are as follows:

Mayor David Keating, Box 2207, Hollywood, Fla. 33022
Rev. Kenneth Crossman, 100 E. Las Olas Blvd., Ft. Lauderdale, Fla. 33301
Hon. Leroy H. Moe, 201 S.E. 6 St., Ft. Lauderdale, Fla. 33301
Dr. Franklin Saunders, 2601 E. Oakland Pk. Blvd., Ft. Lauderdale, Fla.
Mrs. Abram Hoffman, 5560 Cypress Rd., Plantation, Fla. 33313 (33306)
Mrs. Luise Tworoger, 1044 N. North Lake Dr., Hollywood, Fla. 33020

ARTICLE VIII.

The By-laws of the corporation are to be made, altered or rescinded by vote of the members of the association in accordance with the By-laws.

ARTICLE IX.

The private property of the members of this corporation and the directors and officers of this corporation shall be forever exempt from corporate debts and obligations of any kind whatsoever.

ARTICLE X.

Upon dissolution of this organization, all of its assets remaining after payment of all costs and expenses of such dissolution shall be distributed to organizations which have qualified for exemption under Section 501 (c) (3) of the Internal Revenue Code, or to the Federal Government, or to a State or local government, for a public purpose, and none of the assets will be distributed to any member, officer or director of this organization.

ARTICLE XI.

The membership of this corporation shall constitute all persons hereinafter named as Directors and such other persons as from time to time hereafter may become members, by approval of the Board of Directors their qualification being their interest and ability to assist the corporation as determined by the Board. No part of the Corporation's net income will inure to the benefit of its Directors, shareholders, or members. Said members of the corporation shall at no time enjoy any benefit in the nature of a private interest. The corporation will not, as a substantial part of its activities, attempt to influence legislation, or participate to any extent in a political campaign for or against any candidate for public office.

ARTICLE XII.

The Amendments to the Articles of Incorporation may be proposed and adopted by two-thirds (2/3) vote of the Board of Directors of the Corporation present at a legally constituted meeting.

IN WITNESS WHEREOF, we have hereunto subscribed our names
this 26th day of February, 1974.

David R Keating
Kenneth Crossman
Leroy H. Moe
Franklin F. Saunders
Mrs. Abram Hoffman
Luise Tworoger

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day personally appeared MAYOR
DAVID KEATING, REV. KENNETH CROSSMAN, HON. LEROY H. MOE, DR. FRANKLIN
SAUNDERS, MRS. ABRAM HOFFMAN and MRS. LUISE TWORÖGER, before me,
and they acknowledged before me that they subscribed the foregoing
Articles of Incorporation freely and voluntarily and for the purposes
therein expressed this the 26th day of February, A.D.,
1974.

Virginia A. Dineen
NOTARY PUBLIC

NOTARY PUBLIC, STATE OF FLORIDA of LARGE
MY COMMISSION EXPIRES MAY 13, 1974
BONDED THROUGH FRED W. DIESTELHORST

**AREAWIDE COUNCIL ON AGING
OF BROWARD COUNTY, INC.
BOARD OF DIRECTORS
January 1, 2025 – December 31, 2025**

OFFICERS

**Senator Nan Rich
President**

**David Lieberman
Vice President**

**Timothy Curtin
Treasurer**

**Lisa Zucker
Secretary**

MEMBERS

Grace Carrington

Irma Diaz

George Glasser

Todd Holt

Denise Lettau, JD

Judge Ari Porth

Honorable Ronald Rothschild

Joseph Scott

Nahun Sobrino

AUXILIARY BOARD

Alan B. Brass, C.P.A

William Edelstein

Evan Jenne

Naushira Pandya, M.D

Kenneth S. Rubin, Esq.

Manuel Synalovski, AIA

Form **990**Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023
Open to Public
Inspection
A For the 2023 calendar year, or tax year beginning , and ending**B Check if applicable:**☐ Address change☐ Name change☐ Initial return☐ Final return/terminated☐ Amended return☐ Application pending
C Name of organization AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

5300 HIATUS ROAD

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

SUNRISE

FL 33351

D Employer identification number

59-1529419

E Telephone number

954-745-9567

G Gross receipts \$ 35,955,419**F Name and address of principal officer:**

CHARLOTTE MATHER-TAYLOR

5300 HIATUS ROAD

SUNRISE

FL 33351

H(a) Is this a group return for subordinates? ☐ Yes ☒ No**H(b) Are all subordinates included?** ☐ Yes ☐ No

If "No," attach a list. See instructions

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** ADCRCBROWARD.ORD**H(c) Group exemption number****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other**L Year of formation:** 1974**M State of legal domicile:** FL**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities:		
	TO PLAN, COORDINATE, MONITOR, EVALUATE, AND FUND VARIOUS GROUPS, AGENCIES, ORGANIZATIONS AND PROJECTS RELATING TO THE ELDERLY OF BROWARD COUNTY, FLORIDA.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	13	
	4	13	
	5	96	
	6	15	
Revenue	7a	0	
	7b	0	
	b Net unrelated business taxable income from Form 990-T, Part I, line 11		
Expenses	8 Contributions and grants (Part VIII, line 1h)		
	29,807,229		
	9 Program service revenue (Part VIII, line 2g)		
	0		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	279,347		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	234,694		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
	30,321,270		
Net Assets or Fund Balances	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	19,275,066		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	0		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	4,303,364		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	0		
	b Total fundraising expenses (Part IX, column (D), line 25)		
	0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			
5,490,876			
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
29,069,306			
19 Revenue less expenses. Subtract line 18 from line 12			
1,251,964			
20 Total assets (Part X, line 16)			
24,281,182			
21 Total liabilities (Part X, line 26)			
4,206,264			
22 Net assets or fund balances. Subtract line 21 from line 20			
20,074,918			

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date	
	CHARLOTTE MATHER-TAYLOR		10/14/24	
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date
	W. ED MOSS JR.		W. ED MOSS JR.	10/11/24
	Firm's name		Firm's EIN	PTIN
	MOSS, KRUSICK & ASSOCIATES, LLC		59-3017072	P00531414
Firm's address		Phone no.		
501 S NEW YORK AVE STE 100		407-644-5811		
WINTER PARK, FL 32789-4241				

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.
DAA

Form 990 (2023)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒**1** Briefly describe the organization's mission:**TO PLAN, COORDINATE, MONITOR, EVALUATE, AND FUND VARIOUS GROUPS, AGENCIES, ORGANIZATIONS AND PROJECTS RELATING TO THE ELDERLY OF BROWARD COUNTY, FLORIDA.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **33,602,375** including grants of \$ **27,049,182**) (Revenue \$)
SEE SCHEDULE O**4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **33,602,375**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38 X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 40	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Yes No

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	96			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X	
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X	
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	13	1b	13	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b Enter the number of voting members included on line 1a, above, who are independent						
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?						X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?						X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						X
6 Did the organization have members or stockholders?						X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a The governing body?					X	
b Each committee with authority to act on behalf of the governing body?					X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.						X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?		X
14 Did the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **FL**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

CHARLOTTE MATHER-TAYLOR
SUNRISE

5300 HIATUS ROAD

FL 33351

954-745-9567

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHARLOTTE MATHER-TAYLOR	40.00									
EXECUTIVE DIRECTOR	0.00			X				192,990	0	0
(2) NAUSHIRA PANDYA	0.25									
PRESIDENT	0.00	X						0	0	0
(3) ARTHUR BIRKEN	0.25									
FIRST VP	0.00	X						0	0	0
(4) EVAN JENNE	0.25									
SECOND VP	0.00	X						0	0	0
(5) NAN RICH	0.25									
THIRD VP	0.00	X						0	0	0
(6) DAVID LIEBERMAN	0.25									
TREASURER	0.00	X						0	0	0
(7) TIMOTHY CURTIN	0.25									
SECRETARY	0.00	X						0	0	0
(8) PAULINE GRANT	0.25									
PAST PRESIDENT	0.00	X						0	0	0
(9) ALAN BRASS	0.25									
DIRECTOR	0.00	X						0	0	0
(10) WILLIAM EDELSTEIN	0.25									
DIRECTOR	0.00	X						0	0	0
(11) RON ROTHSCHILD	0.25									
DIRECTOR	0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) KENNETH RUBIN										
(12) DIRECTOR	0.25 0.00	X						0	0	0
(13) MANUEL SYNALOVSKI										
(13) DIRECTOR	0.25 0.00	X						0	0	0
(14) LISA ZUCKER										
(14) DIRECTOR	0.25 0.00	X						0	0	0
(15) ROSARIO MENDEZ RUBIO										
(15) CFO	40.00 0.00					X		114,921	0	0
(16) SHAHNAAZ YASIN										
(16) EMPLOYEE	40.00 0.00					X		109,262	0	0
(17)										
(18)										
(19)										
1b Subtotal								417,173		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								417,173		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PADRINOS FORT LAUDERDALE FL 33304	1135 N FEDERAL HWY MEALS	511,802
NATIONS MARKET, LLC HOLLYWOOD FL 33020	2050 MCKINLEY ST MEALS	262,977

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **2**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	33,086,830			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,194,422			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 3,150			
	h	Total. Add lines 1a-1f.		35,281,252			
Program Service Revenue	Business Code						
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f.						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		542,800			542,800
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	6a				
	b	Less: rental expenses	6b				
	c	Rental inc. or (loss)	6c				
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	7a				
	b	Less: cost or other basis and sales exps.	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	52,336			
	b	Less: direct expenses	8b	53,633			
	c	Net income or (loss) from fundraising events		-1,297			-1,297
	9a	Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	c	Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
	11a	MISCELLANEOUS REVENUE		79,031	79,031		
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d		79,031				
12	Total revenue. See instructions			35,901,786	79,031	0	541,503

Part IX Statement of Functional Expenses*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,228,351	22,228,351		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	4,820,831	4,820,831		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	192,990	186,368	6,622	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,442,796	3,324,657	118,139	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	807,944	807,944		
10 Payroll taxes	259,786	248,403	11,383	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	210,065	189,515	20,550	
12 Advertising and promotion	132,129	130,753	1,376	
13 Office expenses	120,833	114,506	6,327	
14 Information technology				
15 Royalties				
16 Occupancy	89,680	86,949	2,731	
17 Travel	40,738	39,298	1,440	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	104,438	104,438		
23 Insurance	51,986	51,678	308	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM SUPPLIES	1,131,188	1,131,188		
b MISCELLANEOUS	61,001	8,907	52,094	
c TELEPHONE	51,921	51,180	741	
d DUES & SUBSCRIPTIONS	51,314	48,550	2,764	
e All other expenses	37,352	28,859	8,493	
25 Total functional expenses. Add lines 1 through 24e	33,835,343	33,602,375	232,968	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	11,225,012	1	8,311,632
	2 Savings and temporary cash investments	548,922	2	553,543
	3 Pledges and grants receivable, net	6,065,118	3	9,138,861
	4 Accounts receivable, net	16,151	4	-16,701
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	27,416	9	757,668
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,225,084		
	b Less: accumulated depreciation	10b 2,670,988		
		1,658,534	10c	1,554,096
	11 Investments—publicly traded securities	4,738,088	11	8,333,813
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	1,941	15	1,941	
16 Total assets. Add lines 1 through 15 (must equal line 33)	24,281,182	16	28,634,853	
Liabilities	17 Accounts payable and accrued expenses	778,001	17	651,377
	18 Grants payable	3,092,712	18	5,152,035
	19 Deferred revenue	335,551	19	303,913
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	4,206,264	26	6,107,325
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	19,251,067	27	21,712,263
	28 Net assets with donor restrictions	823,851	28	815,265
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	20,074,918	32	22,527,528
	33 Total liabilities and net assets/fund balances	24,281,182	33	28,634,853

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,901,786
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,835,343
3	Revenue less expenses. Subtract line 2 from line 1	3	2,066,443
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,074,918
5	Net unrealized gains (losses) on investments	5	386,167
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	22,527,528

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<input checked="" type="checkbox"/>
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		<input checked="" type="checkbox"/>
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	<input checked="" type="checkbox"/>	
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<input checked="" type="checkbox"/>	

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	24,295,769	32,836,338	35,416,393	29,807,229	35,281,252	157,636,981
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	24,295,769	32,836,338	35,416,393	29,807,229	35,281,252	157,636,981
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						157,636,981

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	24,295,769	32,836,338	35,416,393	29,807,229	35,281,252	157,636,981
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	318,915	168,376	259,490	279,347	542,800	1,568,928
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	51,454	67,812	50,746	65,377	52,336	287,725
11 Total support. Add lines 7 through 10						159,493,634
12 Gross receipts from related activities, etc. (see instructions)					12	302,274

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	98.84 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	99.00 %
16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests — 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
- b A family member of a person described on line 11a above?
- c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME DETAIL

\$ 235,389

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☐
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33
- ¹
- /
- ₃
- % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000
- exclusively*
- for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions
- exclusively*
- for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an
- exclusively*
- religious, charitable, etc., purpose. Don't complete any of the parts unless the
- General Rule**
- applies to this organization because it received
- nonexclusively*
- religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

PAGE 1 OF 1

Page 2

Name of organization

AREAWIDE COUNCIL ON AGING OF

Employer identification number

59-1529419

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORIDA DEPARTMENT OF ELDER AFFAIRS 4040 ESPLANADE WAY TALLAHASSEE FL 32399	\$ 17,519,801	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange program
 e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
 b Permanent endowment %
 c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations?
 (ii) Related organizations?

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		616,188		616,188
b Buildings		3,080,054	2,176,134	903,920
c Leasehold improvements				
d Equipment		528,842	494,854	33,988
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,554,096

Part VII Investments – Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments – Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1.	
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	37,659,283
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	386,167
b	Donated services and use of facilities	2b	1,317,697
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	53,633
e	Add lines 2a through 2d	2e	1,757,497
3	Subtract line 2e from line 1	3	35,901,786
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	35,901,786

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	35,206,673
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,317,697
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	53,633
e	Add lines 2a through 2d	2e	1,371,330
3	Subtract line 2e from line 1	3	33,835,343
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	33,835,343

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X - FIN 48 FOOTNOTE

THE COUNCIL ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. THE COUNCIL HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AS ITS ONLY SIGNIFICANT TAX POSITION. HOWEVER, THE COUNCIL HAS DETERMINED THAT SUCH TAX POSITIONS DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. THE COUNCIL IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING

Part XIII Supplemental Information (continued)

JURISDICTION. THE COUNCIL'S FEDERAL RETURNS ARE GENERALLY OPEN FOR
EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

F/R EXP NETTED WITH REV \$ 53,633

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

F/R EXP NETTED WITH REV \$ 53,633

**SCHEDULE G
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		FUNDRAISING (event type)	(event type)	NONE (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	52,336			52,336
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	52,336			52,336
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	53,633			53,633
	10 Direct expense summary. Add lines 4 through 9 in column (d)				53,633
11 Net income summary. Subtract line 10 from line 3, column (d)				-1,297	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: ☐ Yes ☐ No

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$
- c If "Yes," enter name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	BEST LIFE CARE, IN 2500 E HALLANDALE BEACH HALLANDALE BEACH FL 33009	86-2791589		52,800				ELDERLY SERVICES
(2)	BROWARD COUNTY ELDERLY & VETERAN 2995 N DIXIE HWY FORT LAUDERDALE FL 33334	59-6000531		10,280,527				ELDERLY SERVICES
(3)	BROWARD COUNTY MINORITY BUILDER'S 665 SW 27 AVE FORT LAUDERDALE FL 33312	23-7170674		424,586				ELDERLY SERVICES
(4)	CANTORS SENIOR CENTER 5000 N NOB HILL RD SUNRISE FL 33351	65-0245068		297,987				ELDERLY SERVICES
(5)	CATHOLIC CHARITIES 1503 NW 26 ST WILTON MANORS FL 33305	59-1279497		221,311				ELDERLY SERVICES
(6)	CITY OF DEERFIELD BEACH 227 NW 2 ST DEERFIELD BEACH FL 33441	59-6000305		470,707				ELDERLY SERVICES
(7)	CITY OF HALLANDALE BEACH 750 NW 8 AVE HALLANDALE FL 33009	59-6000333		90,209				ELDERLY SERVICES
(8)	CITY OF HOLLYWOOD 2030 POLK ST HOLLYWOOD FL 33020	59-6000338		232,686				ELDERLY SERVICES
(9)	CITY OF LAUDERDALE LAKES 4300 NW 36TH ST LAUDERDALE LAKES FL 33319			251,780				ELDERLY SERVICES

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

SCHEDULE I
(Form 990)**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.

OMB No. 1545-0047

2023**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceGo to www.irs.gov/Form990 for the latest information.

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	CITY OF PEMBROKE PINES 301 NW 103 AVE PEMBROKE PINES FL 33026	59-0908106		709,977				ELDERLY SERVICES
(2)	COAST TO COAST LEGAL PO BOX 120910 FORT LAUDERDALE FL 33312	90-0089501		392,687				ELDERLY SERVICES
(3)	DIRECT SERVICES 14640 SW 148 COURT MIAMI FL 33196	65-0697132		2,933,980				ELDERLY SERVICES
(4)	EASTER SEALS SOUTH FLORIDA 1475 NW 14TH AVE MIAMI FL 33125	59-0722783		21,551				ELDERLY SERVICES
(5)	FLORIDA INTRODUCES PHYSICAL 2860 W STATE RD 84 DANIA BEACH FL 33312	87-0743538		348,946				ELDERLY SERVICES
(6)	HUMAN SERVICES NETWORK 451 N STATE ROAD 7 PLANTATION FL 33317	59-2450043		1,413,077				ELDERLY SERVICES
(7)	IT'S NEVER TOO LATE, LLC 5889 GREENWOOD PLAZA BLVD GREENWOOD VILLAGE CO 80111	84-1507580		287,844				ELDERLY SERVICES
(8)	JEWISH ADOPTION & FOSTER CARE 4200 UNIVERSITY DR SUNRISE FL 33351	20-0898587		100,029				ELDERLY SERVICES
(9)	JEWISH COMMUNITY CENTER 5850 S PINE ISLAND RD DAVIE FL 33328	59-2075982		304,676				ELDERLY SERVICES

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

**SCHEDULE I
(Form 990)**Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	MIRAMAR SATELLITE SENIOR CENTER 2300 CIVIC CENTER PLACE MIRAMAR FL 33025			710,595				ELDERLY SERVICES
(2)	NORTHWEST FEDERATED WOMEN'S CLUB 2185 NW19 ST FORT LAUDERDALE FL 33311	23-7113192		335,394				ELDERLY SERVICES
(3)	NORTHWEST FOCAL POINT 6009 NW 10TH ST MARGATE FL 33063			402,736				ELDERLY SERVICES
(4)	OFFERDAHL'S HANDS OFF 2749 NE 37TH DRIVE FORT LAUDERDALE FL 33308	45-4645993		251,011				ELDERLY SERVICES
(5)	PICKETT FENCES 1798 CR 721 LOOP MOORE HAVEN FL 33471	46-0793251		20,918				ELDERLY SERVICES
(6)	PONDER & ASSOCIATES 611 NW 31ST AVE POMPANO BEACH FL 33069	65-0868245		121,267				ELDERLY SERVICES
(7)	REBUILDING TOGETHER 4836 NE 12 AVE OAKLAND PARK FL 33334	86-1065925		389,607				ELDERLY SERVICES
(8)	SENIOR PROOF 300 S. PINE ISLAND RD PLANTATION FL 33324	86-1797121		511,119				ELDERLY SERVICES
(9)	SUNSHINE SOCIAL SERVICES 1480 SW 9 AVE FORT LAUDERDALE FL 33315	01-0582371		373,452				ELDERLY SERVICES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

DAA

SCHEDULE I
(Form 990)Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	CITY OF WEST PARK 1965 S STATE RD 7 HOLLYWOOD FL 33023	26-0111664		272,070				ELDERLY SERVICES
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

DAA

Part III can be duplicated if additional space is needed.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 HOME CARE FOR THE ELDERLY		459,060			
2 OAA		841,180			
3 NON DOEA		2,713,248			
4 ARP		329,665			
5 ALZHEIMER DISEASE INITIAT		237,259			
6 EHEAP		240,419			
7					

Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.
----------------	--------------------------------------------------------------------------------------------------------------------------------------------------

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated EmployeesComplete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection**AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**

Employer identification number

59-1529419**Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CHARLOTTE MATHER-TAYLOR	(i) 168,990	(ii) 0	(iii) 24,000	0	0	192,990	0
1 EXECUTIVE DIRECTOR	(ii) 0	(iii) 0		0	0	0	0
2	(i)	(ii)	(iii)				
3	(i)	(ii)	(iii)				
4	(i)	(ii)	(iii)				
5	(i)	(ii)	(iii)				
6	(i)	(ii)	(iii)				
7	(i)	(ii)	(iii)				
8	(i)	(ii)	(iii)				
9	(i)	(ii)	(iii)				
10	(i)	(ii)	(iii)				
11	(i)	(ii)	(iii)				
12	(i)	(ii)	(iii)				
13	(i)	(ii)	(iii)				
14	(i)	(ii)	(iii)				
15	(i)	(ii)	(iii)				
16	(i)	(ii)	(iii)				

59-1529419

Schedule J (Form 990) 2023 AREAWIDE COUNCIL ON AGING OF

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Area with horizontal dotted lines for supplemental information.

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023Open to Public
InspectionName of the organization **AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC**Employer identification number
59-1529419**FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT**

THE ORGANIZATION CONTRACTS WITH PROVIDERS TO OFFER A WIDE RANGE OF SERVICES TO CLIENTS. THE OLDER AMERICANS ACT (OAA) IS A FEDERAL PROGRAM THAT PROVIDES ASSISTANCE TO OLDER PERSONS AND CAREGIVERS AND IS THE ONLY FEDERAL SUPPORTIVE SERVICES PROGRAM DIRECTED SOLELY TOWARD IMPROVING THE LIVES OF OLDER ADULTS EACH YEAR. HOWEVER, IN RESPONSE TO COVID-19 THE FEDERAL GOVERNMENT ALSO PROVIDED FUNDS THROUGH THE CARES ACT AND FAMILIES FIRST GRANTS AND THE OAA FUNDING. THE ALZHEIMER'S DISEASE INITIATIVE (ADI) ENSURES THAT PERSONS AFFILIATED WITH ALZHEIMER'S DISEASE AND OTHER FORMS OF DEMENTIA, ARE GIVEN ESSENTIAL SERVICES TO HELP THEM AGE IN PLACE, IN AN ELDER FRIENDLY ENVIRONMENT, WITH SECURITY, DIGNITY AND PURPOSE. THE PROGRAM ALSO PROVIDES SUPPORT TO FAMILY MEMBERS AND CAREGIVERS AFFECTED BY ALZHEIMER'S DISEASE. THE FLORIDA COMMUNITY CARE FOR THE ELDERLY (CCE) PROVIDES ASSISTANCE TO SENIORS WHO ARE AT RISK FOR NURSING HOME PLACEMENT AND WHO ARE NOT QUALIFIED TO RECEIVE SERVICES FROM MEDICAID. CCE ALSO PROVIDES ESSENTIAL SERVICES TO HELP THEM AGE IN PLACE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FINANCE DIRECTOR REVIEWS THE FORM 990 IN COOPERATION WITH THE EXECUTIVE DIRECTOR FOR ACCURACY PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
BOARD MEMBERS ASSESS AND ACKNOWLEDGE CONSIDERATION OF CONFLICT OF INTEREST ANNUALLY.

Name of the organization

Employer identification number

AREAWIDE COUNCIL ON AGING OF

59-1529419

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE EXECUTIVE DIRECTOR'S ANNUAL EVALUATION IS COMPLETED BY THE BOARD OF
DIRECTORS AND IS SUBMITTED TO THE CHAIR OF THE PERSONNEL COMMITTEE WHO
COMPILES A SUMMARY OF ALL EVALUATIONS SUBMITTED. THE FINANCE COMMITTEE
REVIEWS THE EVALUATIONS TO DETERMINE ANNUAL INCREASES AND THEY ARE
SUBMITTED TO THE BOARD FOR APPROVAL.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE FINANCE COMMITTEE RECOMMENDS A PERCENTAGE FOR ANNUAL INCREASE WHICH ARE
APPROVED BY THE BOARD OF DIRECTORS. TOP MANAGEMENT PERSONNEL ARE EVALUATED
ANNUALLY BY THE EXECUTIVE DIRECTOR WHO DETERMINES COMPENSATION WITHIN THE
BOARD APPROVED ANNUAL INCREASE PER THE BUDGET.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
DOCUMENTS ARE AVAILABLE UPON REQUEST

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

F/R EXP NETTED WITH REV	\$ 53,633
F/R EXP NETTED WITH REV	\$ -53,633

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization

AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY INC

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

59-1529419

OMB No. 1545-0047

2023

Open to Public
Inspection

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(1) Name, address, and EIN (if applicable) of disregarded entity	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(1) Name, address, and EIN of related organization	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	AREAWIDE HOUSING FOR THE ELDERLY 5300 HIATUS RD SUNRISE FL 33351	HUD SEC 8	FL	501C3	7	N/A		X
(2)								
(3)								
(4)								
(5)								

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispro- portionate alloc.?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
(1)							Yes No		Yes No	
(2)										
(3)										
(4)										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1)								Yes No
(2)								
(3)								
(4)								

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VII	Supplemental Information. Provide additional information
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Supplemental information. Provide additional information for responses to questions on Schedule R. See instructions.



Area Agency on Aging
of Broward County

2025 Budget Proposal

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.
FY 2025 Budget Worksheet

	<u>2023 Actual</u>	<u>Approved 2024 Budget</u>	<u>Projected 2024 Actual</u>	<u>Proposed 2025 Budget</u>	
Operating Revenue					
Grant Revenue					
FEDERAL GRANT REVENUE	12,792,117	12,000,000	13,494,759	11,439,959	
STATE GRANT REVENUE	17,519,801	15,231,571	17,314,704	14,921,783	
GRANT REVENUE	417,114	1,021,249	1,340,734	1,005,305	
VA GRANT	2,774,912	2,650,000	3,356,719	3,391,719	
Total Grant Revenue	33,503,945	30,902,820	35,506,916	30,758,766	(A)
Contributions					
FAIR SHARE CONTRIBUTIONS	1,640,460	1,520,000	1,767,295	1,520,000	(B)
PRIVATE CONTRIBUTIONS	133,698	101,200	20,104	22,007	
MISCELLANEOUS INCOME	66,031	-	134	-	
Total Contributions	1,840,188	1,621,200	1,787,534	1,542,007	
Other Income					
SPECIAL EVENT REVENUE	62,836	82,800	144,327	174,390	
IN-KIND SERVICES/GOODS REVENUE	1,278,433	1,088,578	1,393,114	1,368,481	
Total Other Income	1,341,269	1,171,378	1,537,441	1,542,871	
Total Operating Revenue	36,685,402	33,695,398	38,831,890	33,843,644	
Expenditures					
Personnel Expenses	4,469,045	5,597,201	4,635,032	5,198,592	(C)
Program Expenses	29,762,322	26,068,360	32,230,998	27,125,006	
Professional Fees	163,179	105,471	71,430	71,430	
Supplies	46,169	33,759	21,673	21,914	
Telephone	35,623	34,996	49,812	31,800	(D)
Postage & Shipping	36,478	28,914	17,106	15,600	(E)
Occupancy	92,984	99,440	89,082	91,121	
Maintenance & Repairs	38,892	23,121	26,388	61,995	(F)
Technology	43,201	25,450	33,662	34,437	
Conferences, Conventions & Meetings	15,542	17,554	21,987	30,000	
Printing & Publications	1,851	7,559	5,263	5,384	
Dues & Subscriptions	50,675	48,263	60,821	62,220	
Miscellaneous					
Advertising	132,129	100,000	95,291	95,291	
VA MAINS'L Payroll Fee	24,362	23,256	25,715	27,360	
Insurance	51,986	60,000	67,263	50,991	(G)
Event Expenses	53,633	120,000	129,128	110,628	(H)
Bad Debt	-	-	77,262	45,000	(I)
Bank Fees	8,913	20,000	19,312	19,312	
Others Miscellaneous	30,341	15,002	14,285	15,000	
Depreciation Expenses	104,439	108,584	108,584	115,484	(J)
Total Expenditures	35,161,762	32,536,929	37,800,096	33,228,564	
Net Operating Income (Loss)	1,523,640	1,158,469	1,031,795	615,080	
Non-Operating Income (Loss)					
Investment Income					
INTEREST	257,674	200,000	544,783	200,000	(K)
REALIZED GAIN/LOSS ON INVESTMENTS	-	-	-	-	
UNREALIZED GAIN/LOSS ON INVESTMENTS	398,779	-	745,455	-	
DIVIDENDS	261,420	115,000	115,222	115,000	
Total Investment Income	917,873	315,000	1,405,461	315,000	
Net Income	2,441,513	1,473,469	2,437,256	930,080	

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.
FY 2025 Budget Worksheet

(A)- **Federal:** The budget reflects the amount provided in the 2025 OAA contract and does not include carryforward funds. The ARP funding expired in September 2024, and all applicable services were transitioned back into the OAA program.

State: EHCE (home modification) funding ended in 2024 and is no longer available for 2025. The budget assumes similar utilization levels for the regular General Revenue Contracts as seen in 2024.

Grants: In 2024, special grants were received for technology. The 2025 budget includes \$750,000 from the Broward County Meal program and \$255,000 from United Way, which is a reduction compared to the prior year.

VA: The budget accounts for services provided to 60 clients.

(B)- **Fair Share:** Some cities grant funds on a quarterly basis aligned with the Federal Fiscal Year starting in October. Due to the implementation of the Fair Share billing process, there was a catch-up this year for October–December 2024 revenues, which in past years were recorded as the following year’s revenue. As a result, revenue was higher in 2024, but we expect a similar amount to what was budgeted for 2023 and 2024 to be received in 2025.

(C)- **Salaries:** Salaries are forecasted assuming all positions are staffed and include up to a 3% merit increase. Additionally, the budget reflects a projected 10% increase in insurance costs.

(D)- **Telephone:** In 2024, one-time payments were required to transition AVAYA to the cloud. This transition eliminates the need for services previously provided by Net2fone and AT&T, resulting in projected savings for 2025 compared to 2023 and 2024.

(E)- **Postage:** Postage costs are slightly lower than in prior years, despite the increase in services. This reduction is due to the transition from checks to electronic payments, which saves approximately 400 envelopes per month.

(F)- **Maintenance:** Forecasted higher as a \$35,000 reserve has been included for potential expenses in the upcoming year.

(G)- **Insurance:** Property insurance was duplicated in 2024, but after switching to a new agency, we received a quote for 2025 that is 55% cheaper, resulting in savings of \$25,000. Additionally, cyber security insurance has been added.

(H)- **Fund Raising Events:** In 2025, we will host an additional Caregiver conference, bringing the total to five events for the year. However, since we have dedicated staff for fundraising, we will not need to outsource these services, resulting in lower expenses for 2025.

(I)- **Bad Debt:** In 2024, we integrated Fair Share into our financial system’s billing process, resulting in revenue being recognized upon invoicing the cities for the full calculated amount, even though some have historically not honored these requests in full. If a city pays less than requested or does not pay, the shortfall is recognized as bad debt. This new process led to recognizing the entire requested revenue in our books, along with bad debt for cities that traditionally pay less or fail to fulfill their obligations. The balance between the two aligns with the total amount budgeted for Fair Share. To mitigate this risk and adopt a conservative approach, a reserve is being established for 2025 to account for potential bad debt.

(J)- **Depreciation Expenses:** In 2025, we will need to replace 21 computers due to the Microsoft Office 365 mandated conversion. These computers will have a lifespan of 5 years, and we are adding the portion of depreciation corresponding to 2025.

(K)- **Interest Rates:** Despite the interest gains in 2024, we are maintaining a conservative approach for 2025, anticipating that interest rates will decrease.

Program Expense Description Expense	Expense	Other Funding Sources	Total Request
Total Matching Funds Needed	\$ 2,260,338.00		
Fair Share other Cities & County		\$ 2,163,305.00	
Fair Share Pompano Beach			\$ 97,033.00
TOTAL	\$ 2,260,338.00	\$ 2,163,305.00	\$ 97,033.00



Area Agency on Aging of Broward County

Charlotte Mather-Taylor, Chief Executive Officer

March 12, 2025

AREAWIDE COUNCIL ON AGING BOARD OF DIRECTORS

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The Honorable Rex Hardin
City of Pompano Beach
100 W. Atlantic Boulevard
Pompano Beach, Florida 33060

Dear Mayor Hardin,

The Areawide Council on Aging of Broward County, Inc., which administers the Aging and Disability Resource Center, is the prime planning, coordinating, funding and advocacy body for projects and services benefitting the needs of over 473,215 year round Broward residents, 60 years of age and over.

Since our incorporation, as a nonprofit 501(c)(3) organization, in 1974, we have utilized a Fair Share Methodology to secure the required match monies from local municipalities and the County Commission.

Each year, the Areawide Council on Aging determines the required match and then develops separate reports for each city or town. The reports include records noting numbers of participants, services rendered, the associated financial costs, and the amount sought to reach the total mandated match.

Since the Federal Older Americans Act and State Community Care for the Elderly Appropriations require a local match, we utilize the base budget and any increases in these funds are reflected in the following year's Fair Share Report. These factors, plus changes in Broward's population, over 60 years of age, are demonstrated in the Fair Share computations.

We do not employ Alzheimer's Disease Initiative, Home Care for the Elderly, and Respite for Elders Living in Everyday Families figures for compiling the Fair Share Request since the Fair Share figures are developed only to meet mandated Federal and State appropriations. Alzheimer's Disease Initiative, Home Care for the Elderly, and Respite for Elders Living in Everyday Families data are informational only.

5300 Hiatus Road, Sunrise, Florida 33351 **Elder Helpline: (954-745-9779)** Administration: (954-745-9567) Fax: (954-745-9584)

The Aging & Disability Resource Center of Broward County is administered by the Areawide Council on Aging of Broward County, Inc. and funded by Older Americans Act, Florida Community Care for the Elderly, Alzheimer Disease Initiative and Medicaid Waiver Legislation through the State Department of Elder Affairs.

Mayor Hardin
City of Pompano Beach
March 12, 2025
Page 2

For the 2026 Fair Share request, we are employing the latest population figures using U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates.

Our request for 2026 is \$97,033. In Fiscal Year 2023-2024, we provided your residents with \$1,837,328 in services.

For each dollar we are seeking, in match, the Areawide Council on Aging supplied \$18.94 in assistance to your constituents.

We are available to discuss Fair Share and other elder related matters with you at your earliest convenience. Please call our office, at 954-745-9603, to calendar a meeting.

The Areawide Council is well aware of the economic challenges being faced by our municipalities and the County. That is a prime reason for expressing both our gratitude and admiration to our elected officials. Because of your ongoing advocacy, on behalf of your senior constituency and their caregivers, we can, and will continue to partner in order to ensure the rights of older Browardians to live their retirement years with merited dignity.

Sincerely,


Charlotte Mather-Taylor
Chief Executive Officer

CMT:cd

cc: City Commission of Pompano Beach
Greg Harrison, City Manager
Allison Feurtado, Finance Director
Kervin Alfred, City Clerk

EXPLANATION OF FAIR SHARE

Federal Dollars are provided to the Areawide Council on Aging through Older Americans Act Legislation. State Dollars are allocated by the Community Care for the Elderly Act. Both the Federal and State Dollars must be matched locally on a 90-10% ratio. This means that for every nine dollars provided by the Federal and State Governments, we must raise one dollar in Broward County.

FUNDS REQUIRING LOCAL MATCH FOR 2026

Federal Older Americans Act Dollars	\$9,878,729
General Revenue	681,080
State Community Care for the Elderly	<u>8,883,233</u>
	<u>\$19,443,042</u>
Local Matching Dollars Required	\$2,160,338
Elder Abuse Prevention Program	<u>100,000</u>
Total Matching Funds Requested	<u>\$2,260,338</u>

THE FAIR SHARE FORMULA

Since 1974, the Areawide Council on Aging has utilized a Fair Share Formula to request and receive Matching Funds from Broward's Cities and the County Commission. We divide the required Matching Funds by the number of elderly in Broward County to achieve a figure representing each Broward resident 60 years of age and older.

Projected 2026 Broward Total Population 60 and Over	<u>473,215</u>
Representative Fair Share Dollar Amount per Senior Resident 60 or Over: \$2,260,338 divided by 473,215	<u>\$ 4.78</u>

We request each City to pay 2/3 of the Fair Share Dollars for their senior constituency and the County to pay 1/3. We further ask the County to pay the Full Fair Share for each senior resident of the unincorporated areas.

Fair Share Request per Senior Resident:			<u>\$ 4.78</u>
City Share Request per Senior Resident:	$\$4.78 \times (2/3)$	=	<u>\$ 3.19</u>
County Share Request per Senior Resident:	$\$4.78 \times (1/3)$	=	<u>\$ 1.59</u>
			<u>\$ 4.78</u>

FAIR SHARE REQUEST FROM POMPANO BEACH

Number of Residents over 60 in Your City	30,418
Fair Share Request per Senior Resident in Your City	<u>x 3.19</u>
TOTAL FAIR SHARE REQUEST	\$97,033

In Fiscal Year 2023-2024, the Areawide Council on Aging provided Your City
with Services Totaling Over: \$1,837,328

Areawide Council on Aging of Broward County



Fiscal Year 2023-2024

Services Provided to Senior Citizens

in the

City of Pompano Beach

Program	Service Provided	Clients	Units Provided	Avg Unit Cost	Total Cost
OLDER AMERICANS ACT					
	ADULT DAY CARE	2	128.25	47.12	6,043.17
	ARTHRITIS FOUNDATION TAI CHI	*	2.00	3700.68	7,401.36
	ASSURANCE (TELEPHONE & IN-PERSON)	*	27.00	9.45	255.15
	CHORE	23	466.25	57.32	26,726.57
	CONGREGATE MEALS	253	18,841.00	8.77	165,325.93
	CONGREGATE MEALS - GUEST	1	4.00	8.86	35.44
	CONGREGATE MEALS - SCREENING	210	233.75	59.31	13,863.78
	COUNSELING - INDIVIDUAL	9	85.75	48.51	4,159.64
	EDUCATION/TRAINING - GROUP	*	7.00	128.07	896.47
	HEALTH SUPPORT - INDIVIDUAL	6	2.25	45.17	101.63
	HOME DELIVERED MEALS	69	11,100.00	6.11	67,875.30
	HOME DELIVERED MEALS - FROZEN	5	190.00	6.87	1,305.30
	HOUSING IMPROVEMENT	20	363.00	58.01	21,058.23
	INFORMATION	*	1,261.00	13.51	17,036.11
	LEGAL ASSISTANCE	*	537.25	72.99	39,212.46
	NUTRITION EDUCATION	235	994.00	11.14	11,075.20
	OUTREACH	14	14.00	44.16	618.23
	REFERRAL	*	207.00	79.24	16,402.68
	SCREENING & ASSESSMENT	28	97.00	76.20	7,391.82
	TAILORED CAREGIVER ASSESSMENT	5	5.25	0.00	0.00
	TECHNOLOGY - EQUIPMENT	2	5.00	139.58	697.90
	TECHNOLOGY - INSTALL	3	10.00	225.00	2,250.00
	Program Totals:		34,580.75		\$409,732.37

AMERICAN RESCUE PLAN

	A MATTER OF BALANCE	*	2.00	3101.54	6,203.08
	ADULT DAY CARE	1	33.00	42.04	1,387.32
	ARTHRITIS FOUNDATION TAI CHI	*	2.00	4070.75	8,141.50
	CHORE	6	58.25	70.00	4,077.50
	CONGREGATE EMERG SHELF MEALS	123	2,480.00	4.58	11,358.40
	EMERG HOME DEL SHELF MEALS	62	1,300.00	4.58	5,954.00
	EMERGENCY ALERT RESPONSE	10	10.00	624.00	6,240.00
	HOME DELIVERED MEALS	88	16,330.00	6.41	104,661.00

*** Client specific information is not captured for these services.**

Program	Service Provided	Clients	Units Provided	Avg Unit Cost	Total Cost
	HOME DELIVERED MEALS - FROZEN	9	1,400.00	6.87	9,618.00
	HOUSING IMPROVEMENT	1	1.50	70.00	105.00
	INFORMATION	*	182.00	9.83	1,789.06
	LEGAL ASSISTANCE	*	164.25	74.06	12,164.36
	NUTRITION EDUCATION	63	231.00	0.44	100.49
	OUTREACH	2	2.00	48.27	96.54
	REFERRAL	*	63.00	65.49	4,125.87
	SCREENING & ASSESSMENT	28	90.00	82.21	7,398.87
	TAILORED CAREGIVER ASSESSMENT	2	2.00	0.00	0.00
	TECHNOLOGY	*	114.31	240.26	27,463.65
	TECHNOLOGY - EQUIPMENT	103	475.00	291.37	138,402.12
	TECHNOLOGY - INSTALLATION	31	36.00	183.75	6,615.00
	TRANSPORTATION	1	2.00	10.58	21.16
	Program Totals:		22,978.31		\$355,922.92

COMMUNITY CARE FOR THE ELDERLY

	ADULT DAY CARE	1	88.25	109.57	9,669.55
	CASE AIDE	28	69.75	36.02	2,512.40
	CASE MANAGEMENT	47	481.50	63.85	30,743.78
	EMERGENCY ALERT RESPONSE	7	136.00	1.16	157.76
	HOME DELIVERED MEALS	5	2,300.00	5.89	13,550.90
	HOMEMAKER	28	5,093.00	26.38	134,353.34
	INFORMATION	*	306.00	13.51	4,134.06
	INTAKE	268	379.25	88.09	33,408.13
	MEDICATION MANAGEMENT - IND	2	9.00	43.24	389.16
	OTHER SERVICES	5	5.00	100.00	500.00
	PERSONAL CARE	23	4,096.50	26.48	108,475.32
	REFERRAL	*	75.00	79.24	5,943.00
	RESPIRE IN-HOME	4	1,412.00	26.29	37,121.48
	SPECIALIZED MEDICAL EQUIPMENT	2	15.00	81.11	1,216.60
	Program Totals:		14,466.25		\$382,175.48

ALZHEIMER'S DISEASE INITIATIVE

	CAREGIVER TRNG & SUP - IND	5	10.00	35.87	358.66
	CASE AIDE	7	40.75	36.02	1,467.82
	CASE MANAGEMENT	27	222.50	54.87	12,207.59
	RESPIRE IN-FACILITY	14	9,775.25	12.18	119,018.22
	RESPIRE IN-FACILITY SPC ADC	1	48.75	7.53	367.09
	RESPIRE IN-HOME	9	5,040.25	24.62	124,114.66
	SPECIALIZED MEDICAL EQUIPMENT	6	53.00	140.97	7,471.61
	Program Totals:		15,190.50		\$265,005.65

* Client specific information is not captured for these services.

Program	Service Provided	Clients	Units Provided	Avg Unit Cost	Total Cost
ENHANCED HOME CARE FOR THE ELDERLY					
	CASE MANAGEMENT	56	79.00	250.95	19,825.00
	HOME MODIFICATION	27	27.00	4263.16	115,105.30
	TECHNOLOGY - EQUIPMENT	29	38.00	2376.18	90,294.95
	TECHNOLOGY - INSTALLATION	6	12.00	105.00	1,260.00
	Program Totals:		156.00		\$226,485.25
HOME CARE FOR THE ELDERLY					
	BASIC SUBSIDY	10	99.00	160.00	15,840.00
	CASE AIDE - VENDOR PAYMENT	12	173.00	63.85	11,046.05
	CASE AIDE - VENDOR	9	13.00	36.02	468.26
	SPECIALIZED MED EQUIP - VENDOR	2	13.00	125.09	1,626.20
	Program Totals:		298.00		\$28,980.51
LOCAL SERVICE PROGRAM					
	CASE MANAGEMENT	5	33.25	34.00	1,130.50
	CONGREGATE MEALS	3	196.00	8.83	1,729.99
	HOMEMAKER	5	321.75	24.00	7,722.00
	MATERIAL AID	21	86.00	61.59	5,297.06
	PERSONAL CARE	5	587.00	24.00	14,088.00
	TRANSPORTATION	33	4,136.00	5.59	23,126.24
	Program Totals:		5,360.00		\$53,093.79
NON-DOEA PROGRAM					
	ADULT DAY CARE	5	301.00	109.57	32,980.57
	CASE MANAGEMENT	7	67.00	63.85	4,277.95
	EMERGENCY ALERT RESPONSE	10	80.00	26.00	2,080.00
	HOME DELIVERED MEALS	34	8,930.00	4.84	43,221.20
	Program Totals:		9,378.00		\$82,559.72
EHEAP					
	EHEAP	38	65.00	371.65	24,157.30
	Program Totals:		65.00		\$24,157.30
SHINE					
	SHINE	170	291.55	31.61	9,215.88
	Program Totals:		291.55		\$9,215.88

* Client specific information is not captured for these services.

Program	Service Provided	Clients	Units Provided	Avg Unit Cost	Total Cost
Totals:			102,764.36		\$1,837,328.87

In Fiscal Year 2023-2024, our Project Family provided Pompano Beach's seniors with \$1,837,328 in services.

The Areawide Council on Aging's 2026 Match Request for Pompano Beach is \$97,033.

For every \$1 we are seeking, the Areawide Council on Aging (Area Agency on Aging) provided Pompano Beach with \$18.94 in services.

Our figures are secured from the annual service cost reports obtained from our Projects.

* Client specific information is not captured for these services.

Exhibit “B” Payment Schedule

A. AWARD DISBURSEMENTS

The awards disbursement process will begin in October, 1 and end in September, 30 for the fiscal year that this contract is approved.

B. PAYMENT SCHEDULE

The total amount awarded for the AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. for Fair Share 2026 for the current fiscal year is: Twenty Five Thousand Dollars (\$25,000.00).

There will be four (4) payout/s during the period (depending on the amount awarded to each organization):

1. The first (1st) will equal twenty-five percent (25 %) of the total allocation or Six Thousand Two Hundred and Fifty Dollars (\$6,250.00); be issued in advance. For any funds advanced the RECIPIENT agrees to provide the CITY with an itemization of how funds advanced were spent, along with invoices and proof of payment. Such an accounting must be provided to the CITY in the quarterly narrative and financial report as indicated in Exhibit “A” Recipients Requirements, Contractual Responsibilities and Program Description. Failure to comply with this requirement may result in the denial of the future requests for payments.
2. The second (2nd) will equal twenty-five percent (25%) of the total allocation or Six Thousand Two Hundred and Fifty Dollars (\$6,250.00); will be issued upon receipt AND approval of the second quarterly narrative and financial report (including any additional requested documents);
3. The third (3rd) payout will equal twenty-five percent (25%) of the total allocation or Six Thousand Two Hundred and Fifty Dollars (\$6,250.00); will be issued upon receipt AND approval of the third quarterly narrative and financial report (including any additional requested documents);
4. The fourth (4th) payout will be the final twenty-five percent (25%) of the total allocation or Six Thousand Two Hundred and Fifty Dollars (\$6,250.00) and will be issued in upon receipt AND approval of the final quarterly narrative and financial report (including any additional requested documents).

All payments and reporting requirements apply for each project which is a part of the awarded contract. Payments and reports shall be handled separately for each project.

EXHIBIT C

INSURANCE REQUIREMENTS: NON PROFIT ORGANIZATION

ORGANIZATION shall not commence services under the terms of this Agreement until certification or proof of insurance detailing terms and provisions has been received and approved in writing by the CITY's Risk Manager. If you have questions regarding the insurance requirements hereunder, please contact the City's Purchasing Department at (954) 786-4098. If the contract has already been awarded, please direct any queries and proof of the requisite insurance coverage to City staff responsible for oversight of the subject project/contract.

ORGANIZATION is responsible to deliver to the CITY for timely review and written approval/disapproval Certificates of Insurance which evidence that all insurance required hereunder is in full force and effect and which name on a primary basis, the CITY as an additional insured on all such coverage. Such policy or policies shall be issued by United States Treasury approved companies authorized to do business in the State of Florida. The policies shall be written on forms acceptable to the City's Risk Manager, meet a minimum financial A.M. Best and Company rating of no less than Excellent, and be part of the Florida Insurance Guarantee Association Act. No changes are to be made to these specifications without prior written approval of the City's Risk Manager.

Throughout the term of this Agreement, CITY, by and through its Risk Manager, reserve the right to review, modify, reject or accept any insurance policies required by this Agreement, including limits, coverages or endorsements. CITY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of poor financial condition or failure to operate legally.

Failure to maintain the required insurance shall be considered an event of default. The requirements herein, as well as CITY's review or acceptance of insurance maintained by ORGANIZATION, are not intended to and shall not in any way limit or qualify the liabilities and obligations assumed by ORGANIZATION under this Agreement.

Throughout the term of this Agreement, ORGANIZATION and all subcontractors or other agents hereunder, shall, at their sole expense, maintain in full force and effect, the following insurance coverages and limits described herein, including endorsements.

A. Worker's Compensation Insurance covering all employees and providing benefits as required by Florida Statute, Chapter 440, regardless of the size of the company (number of employees) or the state in which the work is to be performed or of the state in which the ORGANIZATION is obligated to pay compensation to employees engaged in the performance of the work. ORGANIZATION further agrees to be responsible for employment, control and conduct of its employees and for any injury sustained by such employees in the course of their employment.

B. Liability Insurance.

(1) Naming the City of Pompano Beach as an additional insured as City's interests may appear, on General Liability Insurance only, relative to claims which arise from

ORGANIZATION'S negligent acts or omissions in connection with Contractor's performance under this Agreement.

(2) Such Liability insurance shall include the following checked types of insurance and indicated minimum policy limits.

Type of Insurance

Limits of Liability

GENERAL LIABILITY:

Minimum \$1,000,000 Per Occurrence and
\$2,000,000 Per Aggregate

* Policy to be written on a claims incurred basis

XX	comprehensive form	bodily injury and property damage
XX	premises - operations	bodily injury and property damage
—	explosion & collapse hazard	
—	underground hazard	
XX	products/completed operations hazard	bodily injury and property damage combined
XX	contractual insurance	bodily injury and property damage combined
XX	broad form property damage	bodily injury and property damage combined
XX	independent contractors	personal injury
XX	personal injury	
XX	sexual abuse/molestation	Minimum \$1,000,000 Per Occurrence and Aggregate
—	liquor legal liability	Minimum \$1,000,000 Per Occurrence and Aggregate

AUTOMOBILE LIABILITY:

Minimum \$10,000/\$20,000/\$10,000

XX comprehensive form
XX owned
XX hired
XX non-owned

REAL & PERSONAL PROPERTY

— comprehensive form Agent must show proof they have this coverage.

EXCESS LIABILITY

Per Occurrence Aggregate

—	other than umbrella	bodily injury and property damage combined	\$1,000,000	\$1,000,000
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PROFESSIONAL LIABILITY

Per Occurrence Aggregate

— * Policy to be written on a claims made basis \$1,000,000 \$1,000,000

(3) If Professional Liability insurance is required, Contractor agrees the indemnification and hold harmless provisions of Section 12 of the Agreement shall survive the termination or expiration of the Agreement for a period of three (3) years unless terminated sooner by the applicable statute of limitations.

C. Employer's Liability. ORGANIZATION and all subcontractors shall, for the benefit of their employees, provide, carry, maintain and pay for Employer's Liability Insurance in the minimum amount of One Hundred Thousand Dollars (\$100,000.00) per employee, Five Hundred Thousand Dollars (\$500,000) per aggregate.

D. Policies. Whenever, under the provisions of this Agreement, insurance is required of the ORGANIZATION, the ORGANIZATION shall promptly provide the following:

- (1) Certificates of Insurance evidencing the required coverage;
- (2) Names and addresses of companies providing coverage;
- (3) Effective and expiration dates of policies; and
- (4) A provision in all policies affording CITY thirty (30) days written notice by a carrier of any cancellation or material change in any policy.

E. Insurance Cancellation or Modification. Should any of the required insurance policies be canceled before the expiration date, or modified or substantially modified, the issuing company shall provide thirty (30) days written notice to the CITY.

F. Waiver of Subrogation. ORGANIZATION hereby waives any and all right of subrogation against the CITY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then ORGANIZATION shall notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy which includes a condition to the policy not specifically prohibiting such an endorsement, or voids coverage should ORGANIZATION enter into such an agreement on a pre-loss basis.



Area Agency on Aging
of Broward County

APPROVED *Daniel Beecher*
By Daniel Beecher at 2:31 pm, Aug 19, 2025

August 15, 2025

In regards to Sexual Molestation Coverage-

The Areawide Council on Aging of Broward County does not interact with children under the age of 18.

Area Agency on Aging of Broward County 5300 Hiatus Road, Sunrise, Florida 33351

Elder Helpline: (954-745-9779) Administration: (954-745-9567) Fax: (954-745-9584) Website: Adrcbroward.org

The Aging & Disability Resource Center of Broward County is administered by the Areawide Council on Aging of Broward County, Inc. and funded by Older Americans Act, Florida Community Care for the Elderly, Alzheimer Disease Initiative and Medicaid Waiver Legislation through the State Department of Elder Affairs.

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**FLORIDA DEPARTMENT OF ELDER AFFAIRS
STANDARD CONTRACT**

THIS CONTRACT is entered into between the Florida Department of Elder Affairs (Department or DOEA) and Areawide Council on Aging of Broward County, Inc. (Contractor), collectively referred to as the “Parties.”

WITNESSETH THAT:

WHEREAS, the Department has determined that it is in need of certain services as described herein; and

WHEREAS, the Contractor has demonstrated that it has the requisite expertise and ability to faithfully perform such services as an independent Contractor of the Department.

NOW THEREFORE, in consideration of the services to be performed and payments to be made, together with the mutual covenants and conditions set forth herein, the Parties agree as follows:

1. Purpose of Contract:

The purpose of this contract is to provide services in accordance with the terms and conditions specified in this contract including all attachments, forms, and exhibits which constitute the contract document.

2. Incorporation of Documents within the Contract:

The contract will incorporate attachments, proposal(s), state plan(s), grant agreements, relevant Department handbooks, manuals and/or desk books, as an integral part of the contract, except to the extent that the contract explicitly provides to the contrary. In the event of conflict in language among any of the documents referenced above, the specific provisions and requirements of the contract document(s) shall prevail over inconsistent provisions in the proposal(s) or other general materials not specific to this contract document and identified attachments.

3. Term of Contract:

This contract shall begin at twelve (12:00) A.M., Eastern Standard Time **January 1, 2025**, or on the date the contract has been signed by the last party required to sign it, whichever is later. It shall end at eleven fifty-nine (11:59) P.M., Eastern Standard Time **December 31, 2025**.

4. Contract Amount:

The Department agrees to pay for contracted services according to the terms and conditions of this contract in an amount not to exceed **\$10,238,384.00**, subject to the availability of funds. Any costs or services paid for under any other contract or from any other source are not eligible for payment under this contract.

5. Renewals:

By mutual agreement of the Parties, in accordance with Section 287.058(1)(g), Florida Statutes (F.S.), the Department may renew the contract for a period not to exceed three years, or the term of the original contract, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original contract and contingent upon satisfactory performance evaluations by the Department and the availability of funds.

6. Compliance with Federal Law:

6.1 If this contract contains federal funds this section shall apply.

6.1.1 The Contractor shall comply with the provisions of 45 Code of Federal Regulations (CFR) Part 75 and/or 45 CFR Part 92, 2 CFR Part 200, and other applicable regulations.

6.1.2 If this contract contains federal funds and is over \$100,000.00, the Contractor shall comply with all applicable standards, orders, or regulations issued under Section 306 of the Clean Air Act as amended (42 United States Code (U.S.C.) § 7401, et seq.), Section 508 of the Federal Water Pollution Control Act as amended (33 U.S.C. § 1251, et seq.), Executive Order 11738, as amended, and, where applicable, Environmental Protection Agency regulations 2 CFR Part 1500. The Contractor shall report any violations of the above to the Department.

6.1.3 Neither the Contractor nor any agent acting on behalf of the Contractor may use any federal funds received in connection with this contract to influence legislation or appropriations pending before Congress or any state legislature. The Contractor must complete all disclosure forms as required, specifically the

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Certification and Assurances Attachment, which must be completed and returned to the Contract Manager prior to the execution of this contract.

- 6.1.4** In accordance with Appendix II to 2 CFR Part 200, the Contractor shall comply with Executive Order 11246, Equal Employment Opportunity, as amended by Executive Order 11375 and others, and as supplemented in Department of Labor regulations 41 CFR Part 60 and in Department of Health and Human Services regulations 45 CFR Part 92, if applicable.
- 6.1.5** A contract award with an amount expected to equal or exceed \$25,000.00 and certain other contract awards will not be made to parties listed on the government-wide Excluded Parties List System, in accordance with the Office of Management and Budget (OMB) guidelines at 2 CFR Part 180 that implement Executive Orders 12549 and 12689, "Debarment and Suspension." The Excluded Parties List System contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549. The Contractor shall comply with these provisions before doing business or entering into subcontracts receiving federal funds pursuant to this contract. The Contractor shall complete and sign the Certifications and Assurances Attachment prior to the execution of this contract.
- 6.2** The Contractor shall not employ an unauthorized alien. The Department will consider the employment of unauthorized aliens a violation of the Immigration and Nationality Act (8 U.S.C. § 1324a) and the Immigration Reform and Control Act of 1986 (8 U.S.C. § 1101). Such violation will be cause for unilateral cancellation of this contract by the Department.
- 6.3** If the Contractor is a non-profit provider and is subject to Internal Revenue Service (IRS) tax exempt organization reporting requirements (filing a Form 990 or Form 990-N), and has its tax exempt status revoked for failing to comply with the filing requirements of the Pension Protection Act of 2006 or for any other reason, the Contractor must notify the Department in writing within thirty (30) days of receiving the IRS notice of revocation.
- 6.4** The Contractor shall comply with Title 2 CFR Part 175 regarding Trafficking in Persons.
- 6.5** Unless exempt under 2 CFR § 170.110(b), the Contractor shall comply with the reporting requirements of the Transparency Act as expressed in 2 CFR Part 170.
- 6.6** To comply with Presidential Executive Order 12989, as amended, and State of Florida Executive Order Number 11-116, and section 448.095(5) F.S., Contractor agrees to utilize the U.S. Department of Homeland Security's E-verify system to verify the employment of all new employees hired by Contractor during the contract term. Contractor shall include in related subcontracts a requirement that Subcontractors performing work or providing services pursuant to the state contract utilize the E-verify system to verify employment of all new employees hired by the Subcontractor during the contract term. Contractors shall require any subcontractors to provide an affidavit stating it does not employ any unauthorized aliens and has no subcontractors that employ unauthorized aliens. Contractors shall retain any affidavits from subcontractors through the term of this contract.

7. Compliance with State Law:

- 7.1** This contract is executed and entered into in the State of Florida, and shall be construed, performed, and enforced in all respects in accordance with Florida law, including Florida provisions for conflict of laws.
- 7.2** If this contract contains state financial assistance funds, the Contractor shall comply with Section 215.97, F.S., and Section 215.971, F.S., and expenditures must be in compliance with applicable laws, rules, and regulations including, but not limited to, the Department of Financial Services Reference Guide for State Expenditures.
- 7.3** The Contractor shall comply with the requirements of Section 287.058, F.S., as amended.
 - 7.3.1** The Contractor shall perform all tasks contained in Attachment I.
 - 7.3.2** The Contractor shall provide units of deliverables, including reports, findings, and drafts, as specified in Attachment I, to be received and accepted by the DOEA Contract Manager prior to payment.
 - 7.3.3** The Contractor shall comply with the criteria and final date by which such criteria must be met for completion of this contract as specified in Attachment I, Section III. Method of Payment.
 - 7.3.4** The Contractor shall submit bills for fees or other compensation for services or expenses in sufficient detail for a proper pre-audit and post-audit.

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- 7.3.5** If itemized payment for travel expenses is permitted in this contract, the Contractor shall submit invoices for any travel expenses in accordance with Section 112.061, F.S., or at such lower rates as may be provided in this contract.
- 7.4** If clients are to be transported under this contract, the Contractor shall comply with the provisions of Chapter 427, F.S., and Rule Chapter 41-2, Florida Administrative Code (F.A.C).
- 7.5** Subcontractors who are on the Discriminatory Vendor List may not transact business with any public entity, in accordance with the provisions of Section 287.134, F.S.
- 7.6** The Contractor shall comply with the provisions of Section 11.062, F.S., and Section 216.347, F.S., which prohibit the expenditure of contract funds for the purpose of lobbying the legislature, judicial branch or a state agency.
- 7.7** The Department may, at its option, terminate the Contract if the Contractor is found to have submitted a false certification as provided under Section 287.135(5), F.S., has been placed on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, the Scrutinized Companies with Activities in Sudan List, or the Scrutinized Companies that Boycott Israel List, or if the Contractor has been engaged in business operations in Cuba or Syria or is engaged in a boycott of Israel.

8. Background Screening:

The Contractor shall ensure that the requirements of Section 430.0402 and Chapter 435, F.S., as they may be amended, are met regarding background screening for all employees, volunteers, and persons seeking employment who are “direct service providers” as that term is defined in Section 430.0402(1)(b) and who are not exempted from Level 2 background screening by Section 430.0402(2). The Contractor and its direct service providers, must also comply with any applicable rules promulgated by the Department and the Agency for Health Care Administration regarding implementation of Section 430.0402 and Chapter 435, F.S. Contractor shall submit the Background Screening Attestation of Compliance-Employer (Screening Form) to the Department within thirty (30) days of execution of this contract and annually, through the term of this contract pursuant to section 435.05(3) F.S. The Contractor shall also maintain copies of the new screening forms for its direct service providers as required herein. The Contractor hereby agrees to correct all background screening deficiencies identified by the Department’s Contract Manager within thirty (30) days upon notification.

8.1 Further information concerning the procedures for background screening may be found at <https://elderaffairs.org/about-us/background-screening>

8.2 The Contractor shall submit for each employee having access to the Clearinghouse program or the background screening information obtained from the program, an executed Attestation of Compliance – Background Screening Program User form to the Department within sixty (60) days of execution of this contract for each background screening program user and annually thereafter, within forty-five (45) days of the contract anniversary date.

9. Grievance Procedures:

The Contractor shall develop, implement, and ensure that its Subcontractors have established grievance procedures to process and resolve client dissatisfaction with, or denial of, service(s) and to address complaints regarding the termination, suspension or reduction of services, as required for receipt of funds. These procedures, at a minimum, will provide for notice of the grievance procedure and an opportunity for review of the Subcontractor’s determination(s).

10. Public Records and Retention:

The Department may unilaterally cancel this contract, notwithstanding any other provisions of this contract, for refusal by the Contractor to allow public access to all documents, papers, letters, or other material made or received by the Contractor in conjunction with this contract, unless the records are exempt, or confidential and exempt, from Section 24(a) of Article I of the State Constitution and Section 119.071, F.S.

IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR’S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

**Public Records Coordinator
Florida Department of Elder Affairs**

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**4040 Esplanade Way, Suite 315
Tallahassee, Florida 32399
850-414-2151
doeapublicrecords@elderaffairs.org**

10.1 By execution of this contract, Contractor agrees to all provisions of Chapter 119, F.S., and any other applicable law, and shall:

10.1.1 Keep and maintain public records required by the Department to perform the contracted services.

10.1.2 Upon request from the Department's custodian of public records, provide the Department a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, F.S., or as otherwise provided by law.

10.1.3 Ensure that public records that are exempt, or confidential and exempt, from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract if the Contractor does not transfer the records to the Department.

10.1.4 Upon completion of the contract, the Contractor will either transfer, at no cost to the Department, all public records in possession of the Contractor to the Department or will keep and maintain public records required by the Department. If the Contractor transfers all public records to the Department upon completion of the contract, Contractor shall destroy any duplicate public records that are exempt, or confidential and exempt, from public records disclosure requirements. If the Contractor keeps and maintains public records upon completion of the contract, the Contractor shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the Department in a format that is compatible with the information technology systems of the Department.

10.2 Upon termination of this contract, whether for convenience or for cause as detailed in section 53 of this contract, the Contractor and Subcontractors shall, at no cost to the Department, transfer all public records in their possession to the Department and destroy any duplicate public records that are exempt, or confidential and exempt, from public records disclosure requirements. All records stored electronically shall be provided to the Department in a format that is compatible with the information technology systems of the Department.

11. Audits, Inspections, Investigations:

11.1 The Contractor shall establish and maintain books, records, and documents (including electronic storage media) sufficient to reflect all assets, obligations, unobligated balances, income, interest, and expenditures of funds provided by the Department under this contract. Contractor shall adequately safeguard all such assets and ensure that they are used solely for the purposes authorized under this contract. Whenever appropriate, financial information should be related to performance and unit cost data.

11.2 The Contractor shall retain and maintain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this contract for a period of six (6) years after completion of the contract, or longer when required by law. In the event an audit is required by this contract, records shall be retained for a minimum period of six (6) years after the audit report is issued or until resolution of any audit findings or litigation based on the terms of this contract, at no additional cost to the Department.

11.3 Upon demand, at no additional cost to the Department, the Contractor shall facilitate the duplication and transfer of any records or documents during the required retention period.

11.4 The Contractor shall ensure that the records described in this section will be subject at all reasonable times to inspection, review, copying, or audit by federal, state, or other personnel duly authorized by the Department.

11.5 At all reasonable times for as long as records are maintained, persons duly authorized by the Department and federal auditors, pursuant to 45 CFR Part 75, shall be allowed full access to and the right to examine any of the Contractor's contracts and related records and documents pertinent to this specific contract, regardless of the form in which kept.

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- 11.6 The Contractor shall provide a Financial and Compliance Audit to the Department as specified in this contract and ensure that all related third-party transactions are disclosed to the auditor.
- 11.7 Contractor agrees to comply with the Inspector General in any investigation, audit, inspection, review, or hearing performed pursuant to Section 20.055, F.S. Contractor further agrees that it shall include in related subcontracts a requirement that subcontractors performing work or providing services pursuant to this contract agree to cooperate with the Inspector General in any investigation, audit, inspection, review, or hearing pursuant to Section 20.055(5), F.S. By execution of this contract the Contractor understands and will comply with this subsection.
- 11.8 In accordance with Executive Order 20-44 which requires executive agencies to submit a list of entities named in statute with which a state agency must form a sole-source, public-private agreement or an entity that, through contract or other agreement with the state, annually receives 50% or more of their budget from the State or from a combination of State and Federal funds. Any Contractor that meets one or both of the criteria listed must submit an annual report, including the most recent IRS Form 990, detailing the total compensation for the entities' executive leadership teams within thirty (30) days of execution of this contract.
 - 11.8.1 The report must include total compensation including salary, bonuses, cashed-in leave, cash equivalents, severance pay, retirement benefits, deferred compensation, real-property gifts, and any other payout.
 - 11.8.2 The Contractor shall inform the agency of any changes in total executive compensation between the annual reports as those changes occur.
 - 11.8.3 All compensation reports must indicate what percent of compensation comes directly from the State or Federal allocations to the contracted entity.

12. Nondiscrimination-Civil Rights Compliance:

- 12.1 The Contractor shall execute Assurances as stated in the Assurances-Non-Construction Programs Attachment that it will not discriminate against any person in the provision of services or benefits under this contract or in employment because of age, race, religion, color, disability, national origin, marital status, or sex in compliance with state and federal law and regulations. The Contractor further assures that all Contractors, Subcontractors, Sub-grantees, or others with whom it arranges to provide services or benefits in connection with any of its programs and activities are not discriminating against clients or employees because of age, race, religion, color, disability, national origin, marital status, or sex.
- 12.2 During the term of this contract, the Contractor shall complete and retain on file a timely, complete, and accurate Civil Rights Compliance Checklist, attached to this contract.
- 12.3 The Contractor shall establish procedures pursuant to federal law to handle complaints of discrimination involving services or benefits through this contract. These procedures shall include notifying clients, employees, and participants of the right to file a complaint with the appropriate federal or state entity.
- 12.4 If this contract contains federal funds, these assurances are a condition of continued receipt of or benefit from federal financial assistance, and are binding upon the Contractor, its successors, transferees, and assignees for the period during which such assistance is provided. The Contractor further assures that all Subcontractors, Vendors, or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the any statutes, regulations, guidelines, and standards. In the event of failure to comply, the Contractor understands that the Department may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief including, but not limited to, termination of the contract and denial of further assistance.

13. Monitoring by the Department:

The Contractor shall permit persons duly authorized by the Department to inspect and copy any records, papers, documents, facilities, goods, and services of the Contractor which are relevant to this contract, and to interview any clients, employees, and Subcontractor employees of the Contractor to assure the Department of the satisfactory performance of the terms and conditions of this contract. Following such review, the Department will provide a written report of its findings to the Contractor and, where appropriate, the Contractor shall develop a Corrective Action Plan

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(CAP). The Contractor hereby agrees to correct all deficiencies identified in the CAP in a timely manner as determined by the Department's Contract Manager.

14. Provision of Services:

The Contractor shall provide services in the manner described in Attachment I.

15. Coordinated Monitoring with Other Agencies:

If the Contractor receives funding from one or more State of Florida human service agencies, in addition to the Department, then a joint monitoring visit including such other agencies may be scheduled. For the purposes of this contract, and pursuant to Section 287.0575, F.S., as amended, Florida's human service agencies shall include the Department, the Department of Children and Families (DCF), the Department of Health (DOH), the Agency for Persons with Disabilities (APD), and the Department of Veterans' Affairs (DVA). Upon notification and the subsequent scheduling of such a visit by the designated agency's lead administrative coordinator, the Contractor shall comply and cooperate with all monitors, inspectors, and/or investigators.

16. Other Contract(s) Reporting:

Pursuant to Section 287.0575, F.S., as amended, the Contractor shall complete the Contractor's State Contracts List attached to this contract. The Contractor shall notify the Department within ten (10) days of entering into a new contract with any of the four (4) state human service agencies, to include DCF, DOH, APD or DVA. The notification shall include the following information: (1) contracting state agency and the applicable office or program issuing the contract; (2) contract name and number; (3) contract start and end dates; (4) contract amount; (5) contract description and commodity or service; and (6) Contract Manager name and contact information.

17. Indemnification:

The Contractor shall be fully liable for, and fully indemnify, defend, and hold harmless the State of Florida, the Department and its officers, agents and employees from and against any and all suits, claims, damages, losses, and expenses, including attorney's fees, arising out of or resulting from any acts, actions, breaches neglect or omissions, including personal injury and/or damage to property, related to execution of this contract, any subcontracts or the performance of services caused in whole or part by the Contractor. It is understood and agreed that the Contractor is not required to indemnify the Department for claims, demands, actions, or causes of action arising solely out of the negligence of the Department.

17.1 Except to the extent permitted by Section 768.28, F.S., or other Florida law, this Section 17 is not applicable to contracts executed between the Department and state agencies or subdivisions defined in Section 768.28(2), F.S.

18. Insurance and Bonding:

18.1 The Contractor shall provide continuous adequate liability insurance coverage during the existence of this contract and any renewal(s) and extension(s) of it. By execution of this contract, unless it is a state agency or subdivision as defined by Section 768.28(2), F.S., the Contractor accepts full responsibility for identifying and determining the type(s) and extent of liability insurance coverage necessary to provide reasonable financial protections for the Contractor and the clients to be served under this contract. The limits of coverage under each policy maintained by the Contractor do not limit the Contractor's liability and obligations under this contract. The Contractor shall ensure that the Department has the most current written verification of insurance coverage throughout the term of this contract. Such coverage may be provided by a self-insurance program established and operating under the laws of the State of Florida. The Department reserves the right to require additional insurance as specified in this contract.

18.2 Throughout the term of this contract, the Contractor shall maintain an insurance bond from a responsible commercial insurance company covering all officers, directors, employees, and agents of the Contractor authorized to handle funds received or disbursed under all agreements and/or contracts incorporating this contract by reference in an amount commensurate with the funds handled, the degree of risk as determined by the insurance company, and consistent with good business practices.

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19. Confidentiality of Information:

The Contractor shall not use or disclose any information concerning a recipient of services under this contract for any purpose prohibited by state or federal law or regulations except with the written consent of a person legally authorized to give that consent or when authorized by law.

20. Health Insurance Portability and Accountability Act:

Where applicable, the Contractor shall comply with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, as well as all regulations promulgated thereunder (45 CFR Parts 160, 162, and 164).

21. Incident Reporting:

21.1 The Contractor shall notify the Department immediately, but no later than forty-eight (48) hours from the Contractor's awareness or discovery of conditions that may materially affect the Contractor's or Subcontractor's ability to perform the services required to be performed under this contract. Such notice shall be made to the Department's Contract Manager in the most efficient manner with an email or other writing to immediately follow.

21.2 The Contractor shall immediately report knowledge or reasonable suspicion of abuse, neglect, or exploitation of a child, aged person, or disabled adult to the Florida Abuse Hotline on the statewide toll-free telephone number (1-800-96ABUSE). As required by Chapters 39 and 415, F.S., this provision is binding upon the Contractor, its Subcontractors, and their employees.

22. Bankruptcy Notification:

During the term of this contract, the Contractor shall immediately notify the Department if the Contractor, its assignees, Subcontractors, or affiliates file a claim for bankruptcy. Within ten (10) days after notification, the Contractor must also provide the following information to the Department: (1) the date of filing of the bankruptcy petition; (2) the case number; (3) the court name and the division in which the petition was filed (e.g., Northern District of Florida, Tallahassee Division); and (4) the name, address, and telephone number of the bankruptcy attorney.

23. Sponsorship and Publicity:

23.1 As required by Section 286.25, F.S., if the Contractor is a non-governmental organization which sponsors a program financed wholly or in part by state funds, including any funds obtained through this contract, it shall, in publicizing, advertising, or describing the sponsorship of the program, state: "Sponsored by (Contractor's name) and the State of Florida, Department of Elder Affairs." If the sponsorship reference is in written material, the words "State of Florida, Department of Elder Affairs" shall appear in at least the same size letters or type as the name of the organization.

23.2 The Contractor shall not use the words "State of Florida, Department of Elder Affairs" to indicate sponsorship of a program otherwise financed, unless specific written authorization has been obtained by the Department prior to such use.

24. Assignments:

24.1 The Contractor shall not assign the rights and responsibilities under this contract without the prior written approval of the Department. Any sublicense, assignment, or transfer otherwise occurring without prior written approval of the Department shall constitute a material breach of the contract. In the event the State of Florida approves assignment of the Contractor's obligations, the Contractor remains responsible for all work performed and all expenses incurred in connection with this contract.

24.2 The State of Florida is, at all times, entitled to assign or transfer, in whole or part, its rights, duties, or obligations under this contract to another governmental agency in the State of Florida upon giving prior written notice to the Contractor.

24.3 This contract shall remain binding upon the successors in interest of the Contractor and the Department.

25. Subcontracts:

25.1 The Contractor is responsible for any and all work performed and for any and all commodities produced pursuant to this contract, whether actually furnished by the Contractor or its Subcontractors. Any subcontracts shall be evidenced by a written document and subject to any conditions of approval the Department deems necessary.

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The Contractor further agrees that the Department will not be liable to the Subcontractor in any way or for any reason. The Contractor, at its expense, shall defend the Department against any such claims.

- 25.2** The Contractor shall promptly pay any Subcontractors upon receipt of payment from the Department or other state agency. Failure to make payments to any Subcontractor in accordance with Section 287.0585, F.S., unless otherwise stated in the contract between the Contractor and Subcontractor, will result in a penalty as provided by statute.

26. Independent Capacity of Contractor:

It is the intent and understanding of the Parties that the Contractor and any of its Subcontractors are independent Contractors and are not employees of the Department, and that they shall not hold themselves out as employees or agents of the Department without prior specific authorization from the Department. It is the further intent and understanding of the Parties that the Department does not control the employment practices of the Contractor and will not be liable for any wage and hour, employment discrimination, or other labor and employment claims against the Contractor or its Subcontractors. All deductions for social security, withholding taxes, income taxes, contributions to unemployment compensation funds, and all necessary insurance for the Contractor are the sole responsibility of the Contractor.

27. Payment:

Payments shall be made to the Contractor for all completed and approved deliverables (units of service) as defined in Attachment I. The DOEA Contract Manager will have final approval of the Contractor's invoice submitted for payment and will approve the invoice for payment only if the Contractor has met all terms and conditions of the contract, unless the bid specifications, purchase order, or this contract specify otherwise. The approved invoice will be submitted to the Department's finance section for budgetary approval and processing. Disputes arising over invoicing and payments will be resolved in accordance with the provisions of Section 215.422, F.S. A Vendor Ombudsman has been established within the Florida Department of Financial Services and may be contacted at 800-342-2762.

28. Return of Funds:

The Contractor shall return to the Department any overpayments due to unearned funds or funds disallowed, and any interest attributable to such funds pursuant to the terms and conditions of this contract, that were disbursed to the Contractor by the Department. In the event that the Contractor or its independent auditor discovers that an overpayment has been made, the Contractor shall repay said overpayment immediately without prior notification from the Department. In the event that the Department first discovers an overpayment has been made, the DOEA Contract Manager will notify the Contractor in writing of such findings. Should repayment not be made forthwith, the Contractor shall be charged at the lawful rate of interest on the outstanding balance pursuant to Section 55.03, F.S., after Department notification or Contractor discovery.

29. Data Integrity and Safeguarding Information:

The Contractor shall ensure an appropriate level of data security for the information the Contractor is collecting or using in the performance of this contract. An appropriate level of security includes approving and tracking all Contractor employees that request system or information access and ensuring that user access has been removed from all terminated employees. The Contractor, among other requirements, must anticipate and prepare for the loss of information processing capabilities. All data and software shall be routinely backed up to ensure recovery from losses or outages of the computer system. The security over the backed-up data is to be as stringent as the protection required of the primary systems. The Contractor shall ensure all Subcontractors maintain written procedures for computer system backup and recovery. The Contractor shall complete and sign the Certification Regarding Data Integrity Compliance for Agreements, Grants, Loans, and Cooperative Agreements prior to the execution of this contract.

30. Social Media and Personal Cell Phone use:

- 30.1** Inappropriate use of social media and personal cell phones may pose risks to DOEA's confidential and proprietary information and may jeopardize compliance with legal obligations. By signing this contract, Contractor agrees to the following social media and personal cell phone use requirements.

- 30.2 Social Media Defined.** The term Social Media and /or personal cellular communication includes, but is not limited to, social networking websites, blogs, podcasts, discussion forums, RSS feeds, video sharing, SMS (including Direct Messages (DMs), iMessages, text messages, etc.); social networks like Instagram, TikTok, Snapchat, Google Hangouts, WhatsApp, Signal, Facebook, Pinterest, and Twitter or their successors; and content

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sharing networks such as Flickr and YouTube. This includes the transmission of social media through any cellular or online transmission via any electronic, internet, intranet, or other wireless communication.

- 30.3 Application to any direct or incidental DOE or other state business.** This contract applies to any DOE or other state business conducted on any of the Contractor's, Subcontractor's, or their employees' social media accounts or through personal cellular communication.
- 30.4 Application to DOE and Contractors Equipment.** This contract applies regardless of whether the social media is accessed using DOE's IT facilities and equipment or equipment belonging to Contractor, Subcontractor, or their respective employees. Equipment includes, but is not limited to, personal computers, cellular phones, personal digital assistants, smart watches, or smart tablets.
- 30.5 Florida Government in the Sunshine, Florida Public Records Law, and HIPAA.** Contractor acknowledges that any DOE or other state business conducted by social media or through personal cellular communication is subject to Florida's Government in the Sunshine Law, Florida's Public Records Law (Chapter 119, Florida Statutes), and the Health Insurance Portability and Accountability Act (HIPAA). Compliance with these laws and other applicable laws are further detailed in the contract.
- 30.6 Prohibited or Restricted Postings.** Any social media posts which include photos, videos, or names of clients, volunteers, staff, or other affiliates of DOE may only be posted when authorized by law and when any required HIPAA authorizations and any other consents or authorizations required pursuant to federal or state law are on file with the contractor's records.
- 30.7 Assist DOE with Communications.** Contractors may be asked periodically to assist in distributing certain DOE communications through their social media outlets. Any such requests should be posted in adherence to the social media requirements herein and the other provisions of this contract.

31. Conflict of Interest:

The Contractor shall establish safeguards to prohibit employees, board members, management, and Subcontractors from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest or personal gain. No employee, officer, or agent of the Contractor or Subcontractor shall participate in the selection or in the award of a contract supported by state or federal funds if a conflict of interest, real or apparent, might be involved. Such a conflict would arise when: (a) the employee, officer or agent; (b) any member of his/her immediate family; (c) his or her partner; or (d) an organization which employs, or is about to employ, any of the above individuals, has a financial or other interest in the firm being selected for award. The Contractor's or Subcontractor's officers, employees, or agents will neither solicit nor accept gratuities, favors, or anything of monetary value from Contractors, potential Contractors, or parties to Subcontracts. The Contractor's board members and management must disclose to the Department any relationship which may be, or may be perceived to be, a conflict of interest within thirty (30) calendar days of an individual's original appointment or placement in that position, or, if the individual is serving as an incumbent, within thirty (30) calendar days of the commencement of this contract. The Contractor's employees and Subcontractors must make the same disclosures described above to the Contractor's board of directors. Compliance with this provision will be monitored.

32. Public Entity Crime:

Pursuant to Section 287.133, F.S., a person or affiliate who has been placed on the Convicted Vendor List following a conviction for a public entity crime may not submit a bid, proposal, or reply on a contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply on a contract with a public entity for the construction or repair of a public building or public work; may not submit bids, proposals, or replies on leases of real property to a public entity; may not be awarded or perform work as a Contractor, Supplier, Subcontractor, or Consultant under a contract with any public entity; and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, F.S., for CATEGORY TWO for a period of thirty six (36) months following the date of being placed on the Convicted Vendor List.

33. Purchasing:

- 33.1** The Contractor shall procure products and/or services required to perform this contract in accordance with section 413.036, F.S. and the state contract with the Central Non-Profit Agency for the Blind or Other Severely Handicapped (RESPECT):

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33.1.1 IT IS EXPRESSLY UNDERSTOOD AND AGREED THAT ANY ARTICLES THAT ARE THE SUBJECT OF, OR REQUIRED TO CARRY OUT, THIS CONTRACT SHALL BE PURCHASED FROM A NONPROFIT AGENCY FOR THE BLIND OR FOR THE SEVERELY HANDICAPPED THAT IS QUALIFIED PURSUANT TO CHAPTER 413, FLORIDA STATUTES, IN THE SAME MANNER AND UNDER THE SAME PROCEDURES SET FORTH IN SECTION 413.036(1) AND (2), FLORIDA STATUTES; AND FOR PURPOSES OF THIS CONTRACT THE PERSON, FIRM, OR OTHER BUSINESS ENTITY CARRYING OUT THE PROVISIONS OF THIS CONTRACT SHALL BE DEEMED TO BE SUBSTITUTED FOR THE STATE AGENCY INsofar AS DEALINGS WITH SUCH QUALIFIED NONPROFIT AGENCY ARE CONCERNED.

33.1.2 Pursuant to sections 413.036(1) and (4), F.S., the Contractor shall not be required to procure a product or service from RESPECT if: (a) the product or service is not available within a reasonable delivery time, (b) the Contractor is required by law to procure the product or service from any agency of the state, or (c) the Contractor determines that the performance specifications, price, or quality of the product or service is not comparable to the Contractor's requirements.

33.1.3 This act shall have precedence over any law requiring state agency procurement of products or services from any other nonprofit corporation unless such precedence is waived by the Department in accordance with its rules.

33.1.4 Additional information about the designated nonprofit agency and the products it offers is available at <http://www.respectofflorida.org>.

33.2 The Contractor shall procure any recycled products or materials which are the subject of, or are required to carry out, this contract when the Department of Management Services determines that those products are available, in accordance with the provisions of section 403.7065, F.S.

33.3 The Contractor shall procure products and/or services required to perform this contract in accordance with section 946.515, F.S.

33.3.1 IT IS EXPRESSLY UNDERSTOOD AND AGREED THAT ANY ARTICLES WHICH ARE THE SUBJECT OF, OR REQUIRED TO CARRY OUT, THIS CONTRACT SHALL BE PURCHASED FROM THE CORPORATION IDENTIFIED UNDER CHAPTER 946, F.S., IN THE SAME MANNER AND UNDER THE SAME PROCEDURES SET FORTH IN SECTION 946.515(2) AND (4), F.S.; AND FOR PURPOSES OF THIS CONTRACT THE PERSON, FIRM, OR OTHER BUSINESS ENTITY CARRYING OUT THE PROVISIONS OF THIS CONTRACT SHALL BE DEEMED TO BE SUBSTITUTED FOR THIS AGENCY INsofar AS DEALINGS WITH SUCH CORPORATION ARE CONCERNED.

33.3.2 The Prison Rehabilitative Industries and Diversified Enterprises, Inc. (PRIDE) is under contract with the Department of Management Services (DMS). Additional information about PRIDE and the commodities or contractual services it offers is available at <https://pride-enterprises.org/>.

33.4 The Contractor shall provide a Certified Minority Business Subcontractor Expenditure (CMBE) Report summarizing the participation of certified suppliers for the current reporting period and project to date. The CMBE Report shall include the names, addresses, and dollar amount of each certified participant, and a copy must be forwarded to the Department, Division of Financial Administration, and must accompany each invoice submitted to the Department. The Office of Supplier Diversity (850-487-0915) will assist in furnishing names of qualified minorities. The Department's Minority Coordinator (850-414-2153) will assist with questions and answers. The CMBE Report is attached to this contract.

34. Patents, Copyrights, Royalties:

If this contract is awarded state funding and if any discovery, invention, or copyrightable material is developed or produced in the course of or as a result of work or services performed under this contract or in any way connected with this contract, or if ownership of any discovery, invention, or copyrightable material was purchased in the course of or as a result of work or services performed under this contract, the Contractor shall refer the discovery, invention, or copyrightable material to the Department to be referred to the Department of State. Any and all patent rights or copyrights accruing under this contract are hereby reserved to the State of Florida in accordance with Chapter 286, F.S. Pursuant to Section 287.0571(5)(k), F.S., the only exceptions to this provision shall be those that are clearly expressed and reasonably valued in this contract.

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- 34.1** If the primary purpose of this contract is the creation of intellectual property, the State of Florida shall retain an unencumbered right to use such property, notwithstanding any agreement made pursuant to this Section 34.
- 34.2** If this contract is awarded solely federal funding, the terms and conditions are governed by 2 CFR § 200.315 or 45 CFR § 75.322, as applicable.
- 34.3** Notwithstanding the foregoing provisions, if the Contractor or one of its Subcontractors is a university and a member of the State University System of Florida, then Section 1004.23, F.S., shall apply, but the Department shall retain a perpetual, fully-paid, nonexclusive license for its use and the use of its Contractors, Subcontractors, or Assignees of any resulting patented, copyrighted, or trademarked work products.

35. Emergency Preparedness and Continuity of Operations:

- 35.1** If the tasks to be performed pursuant to this contract include the physical care and control of clients, or the administration and coordination of services necessary for client health, safety, or welfare, the Contractor shall, within thirty (30) calendar days of the execution of this contract, submit to the DOEA Contract Manager, verification of an Emergency Preparedness Plan. In the event of an emergency, the Contractor shall notify the Department of emergency provisions immediately, or as soon as practicable.
- 35.2** In the event a situation results in a cessation of services by a Subcontractor, the Contractor shall remain responsible for performance under this contract and must follow procedures to ensure continuity of operations without interruption.

36. Equipment:

- 36.1** Equipment means: (a) tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the organization for the financial statement purposes, or \$10,000.00 [for federal funds - 2 CFR § 200.33 and 45 CFR § 75.2, as applicable], or (b); nonexpendable, tangible personal property of a non-consumable nature with an acquisition cost of \$10,000.00 or more per unit, and expected useful life of at least one (1) year; and hardback bound books not circulated to students or the general public, with a value or cost of \$250.00 or more [for state funds].
- 36.2** Contractors and Subcontractors who are Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations shall have written property management standards in compliance with 2 CFR Part 200 Administrative Requirements (formerly OMB Circular A-110) that include: (a) a property list with all the elements identified in the circular; (b) a procedure for conducting a physical inventory of equipment at least once every two (2) years; (c) a control system to insure adequate safeguards to prevent loss, damage, or theft of the equipment; and (d) maintenance procedures to keep the equipment in good condition. The property records must be maintained on file and shall be provided to the Department upon request. The Contractor shall promptly investigate, fully document, and notify the DOEA Contract Manager of any loss, damage, or theft of equipment. The Contractor shall provide the results of the investigation to the DOEA Contract Manager.
- 36.3** The Contractor's property management standards for equipment (including replacement equipment), whether acquired in whole or in part with federal funds and federally-owned equipment shall, at a minimum, meet the following requirements and shall include accurately maintained equipment records with the following information:
 - 36.3.1** Property records must be maintained that include a description of the equipment;
 - 36.3.2** Manufacturer's serial number, model number, federal stock number, national stock number, or other identification number;
 - 36.3.3** Source of funding for the equipment, including the federal award identification number;
 - 36.3.4** Whether title vests in the Contractor or the federal government;
 - 36.3.5** Acquisition date (or date received, if the equipment was furnished by the federal government);
 - 36.3.6** Information from which one can calculate the percentage of federal participation in the cost of the equipment (not applicable to equipment furnished by the federal government);
 - 36.3.7** Location, use and condition of the equipment and the date the information was reported;
 - 36.3.8** Unit acquisition cost; and

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- 36.3.9** Ultimate disposition data, including date of disposal and sales price or the method used to determine current fair market value where a Contractor compensates the federal awarding agency for its share.
- 36.3.10** A physical inventory must be taken, and the results reconciled with the property records at least once every two (2) years.
- 36.3.11** A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated. 45 CFR § 75.320(d)(3).
- 36.3.12** Adequate maintenance procedures must be developed to keep the property in good condition.
- 36.3.13** If the Contractor is authorized or required to sell the equipment, proper sales procedures must be established to ensure the highest possible return.
- 36.4** Equipment purchased with federal funds with an acquisition cost of \$10,000.00 or less, and equipment purchased with state funds with an acquisition cost less than \$10,000.00 is part of the cost of carrying out the activities and functions of the grant awards and title (ownership) will vest in the Contractor [for federal funds see 2 CFR § 200.313(a) and 45 CFR § 75.320(a), as applicable], subject to the conditions of 2 CFR Part 200 and/or 45 CFR Part 75. Equipment purchased under these thresholds is considered supplies and is not subject to property standards. Equipment purchased with funds identified in the budget attachments to agreements covered by this contract or identified in the sub-agreements with Subcontractors (not included in a cost methodology), is subject to the conditions of Chapter 273, F.S., rule 60A-1.017, F. A. C., and 2 CFR Part 200 and/or 45 CFR Part 75.
- 36.5** The Contractor shall not dispose of any equipment or materials provided by the Department or purchased with funds provided through this contract without first obtaining the approval of the DOEA Contract Manager. When disposing of property or equipment the Contractor must submit a written request for disposition instructions to the Department's Contract Manager. The request should include a brief description of the property, purchase price, funding source, and percentage of state or federal participation, acquisition date and condition of the property. The request should also indicate the Contractor's proposed disposition of the property (i.e., transfer or donation to another agency that administers federal programs, offer of the items for sale, destroy the items, etc.).
- 36.6** The DOEA Contract Manager will issue disposition instructions. If disposition instructions are not received within one hundred twenty (120) days of the written request for disposition, the Contractor is authorized to proceed as directed in 2 CFR § 200.313 or 45 CFR § 75.320, as applicable.
- 36.7** Real property means land (including land improvements), buildings, structures and appurtenances thereto, but excludes movable machinery and equipment. Real property may not be purchased with state or federal funds through agreements covered under this contract without the prior approval of the Department. Real property purchases from Older Americans Act funds are subject to the provisions of Title 42, Chapter 35, Subchapter III, Part A., Section 3030b United States Code (U.S.C.). Real property purchases from state funds can only be made through fixed capital outlay grants and aids appropriations and therefore are subject to the provisions of Section 216.348, F.S.
- 36.8** Any permanent storage devices (e.g.: hard drives, removable storage media) must be reformatted and tested prior to disposal to ensure no confidential information remains.
- 36.9** The Contractor must adhere to the Department's procedures and standards when purchasing Information Technology Resources (ITR) as part of any agreement(s) incorporating this contract by reference. An ITR worksheet is required for any computer related item costing \$1,000.00 or more, including data processing hardware, software, services, supplies, maintenance, training, personnel, and facilities. The completed ITR worksheet shall be maintained in the LAN administrator's file and must be provided to the Department upon request. The Contractor has the responsibility to require any Subcontractors to comply with the Department's ITR procedures.

37. PUR 1000 Form:

The PUR 1000 Form is hereby incorporated by reference and available at:

<http://dms.myflorida.com/purchasing>

In the event of any conflict between the PUR 1000 Form and any terms or conditions of this contract, the terms or conditions of this contract shall take precedence over the PUR 1000 Form. However, if the conflicting terms or

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conditions in the PUR 1000 Form are required by any section of the Florida Statutes, the terms or conditions contained in the PUR 1000 Form shall take precedence.

38. Use of State Funds to Purchase or Improve Real Property:

Any state funds provided for the purchase of or improvements to real property are contingent upon the Contractor or political subdivision granting to the state a security interest in the property at least to the amount of state funds provided for at least five (5) years from the date of purchase or the completion of the improvements or as further required by law.

39. Dispute Resolution:

Any dispute concerning performance of the contract shall be decided by the DOEA Contract Manager, who shall reduce the decision to writing and serve a copy on the Contractor.

40. Financial Consequences:

If the Contractor fails to meet the minimum level of service or performance identified in this contract, the Department shall impose financial consequences as stated in Attachment I.

41. No Waiver of Sovereign Immunity:

Nothing contained in this contract is intended to serve as a waiver of sovereign immunity by any entity to which sovereign immunity may be applicable.

42. Venue:

If any dispute arises out of this contract, the venue of such legal recourse shall be Leon County, Florida.

43. Entire Contract:

This contract contains all the terms and conditions agreed upon by the Parties. No oral agreements or representations shall be valid or binding upon the Department or the Contractor unless expressly contained herein or by a written amendment to this contract signed by both Parties.

44. Force Majeure:

The Parties will not be liable for any delays or failures in performance due to circumstances beyond their control, provided the party experiencing the force majeure condition provides immediate written notification to the other party and takes all reasonable efforts to cure the condition.

45. Severability Clause:

The Parties agree that if a court of competent jurisdiction deems any term or condition herein void or unenforceable, the other provisions are severable to that void provision and shall remain in full force and effect.

46. Condition Precedent to Contract Appropriations:

The Parties agree that the Department's performance and obligation to pay under this contract are contingent upon an annual appropriation by the Legislature.

47. Addition/Deletion:

The Parties agree that the Department reserves the right to add or to delete any of the services required under this contract when deemed to be in the State of Florida's best interest and reduced to a written amendment signed by both Parties. The Parties shall negotiate compensation for any additional services added.

48. Waiver:

The delay or failure by the Department to exercise or enforce any of its rights under this contract will not constitute or be deemed a waiver of the Department's right thereafter to enforce those rights, nor will any single or partial exercise of any such right preclude any other or further exercise thereof or the exercise of any other right.

49. Compliance:

The Contractor shall abide by all applicable current federal statutes, laws, rules, and regulations as well as applicable current state statutes, laws, rules and regulations. The Parties agree that failure of the Contractor to abide by these laws shall be deemed an event of default of the Contractor and subject the contract to immediate unilateral cancellation of the contract at the discretion of the Department.

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50. Final Invoice:

The Contractor shall submit the final invoice for payment to the Department no later than thirty (30) days after the contract ending date unless otherwise specified in Attachment I. If the Contractor fails to do so, all right to payment is forfeited and the Department shall not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this contract shall be withheld until all required documentation and reports due from the Contractor and necessary adjustments thereto have been approved by the Department.

51. Renegotiations of Modifications:

Modifications of the provisions of this contract shall be valid only when they have been reduced to writing and duly signed by both parties. The rate of payment and the total dollar amount may be adjusted retroactively to reflect price level increases and changes in the rate of payment when these have been established through the appropriations process and subsequently identified in the Department's operating budget.

52. Suspension of Work:

The Department may, in its sole discretion, suspend any or all activities under the contract or purchase order, at any time, when in the interest of the State to do so. The Department shall provide the Contractor written notice outlining the particulars of suspension. Examples of the reason for suspension include, but are not limited to, budgetary constraints, declaration of emergency, or other such circumstances. After receiving a suspension notice, the Contractor shall comply with the notice and shall not accept any purchase orders. Within ninety (90) days, or any longer period agreed to by the Contractor, the Department shall either: (1) issue a notice authorizing resumption of work, at which time activity shall resume, or (2) terminate the contract or purchase order. Suspension of work shall not entitle the Contractor to any additional compensation.

53. Termination:

53.1 Termination for Convenience. The Department, by written notice to the Contractor, may terminate this contract in whole or in part when the Department determines in its sole discretion that it is in the State's interest to do so. The Contractor shall not furnish any product after it receives the notice of termination, except as necessary to complete the continued portion of this contract, if any. The Contractor shall not be entitled to recover any cancellation charges or lost profits.

53.2 Termination for Cause. The Department may terminate this contract if the Contractor fails to: (1) deliver the product within the time specified in the contract or any extension, (2) maintain adequate progress, thus endangering performance of the contract, (3) honor any term of the contract, or (4) abide by any statutory, regulatory, or licensing requirement. The Contractor shall continue work on any work not terminated. Except for defaults of Subcontractors at any tier, the Contractor shall not be liable for any excess costs if the failure to perform the contract arises from events completely beyond the control, and without the fault or negligence, of the Contractor. If the failure to perform is caused by the default of a Subcontractor at any tier, and if the cause of the default is completely beyond the control of both the Contractor and the Subcontractor, and without the fault or negligence of either, the Contractor shall not be liable for any excess costs for failure to perform, unless the subcontracted products were obtainable from other sources in sufficient time for the Contractor to meet the required delivery schedule. If, after termination, it is determined that the Contractor was not in default, or that the default was excusable, the rights and obligations of the Parties shall be the same as if the termination had been issued for the convenience of the Department. The rights and remedies of the Department in this clause are in addition to any other rights and remedies provided by law or under the contract.

54. Electronic Records and Signature:

The Department authorizes, but does not require, the Contractor to create and retain electronic records and to use electronic signatures to conduct transactions necessary to carry out the terms of this contract. A Contractor that creates and retains electronic records and uses electronic signatures to conduct transactions shall comply with the requirements contained in the Uniform Electronic Transaction Act, Section 668.50, F.S. All electronic records must be fully auditable; are subject to Florida's Public Records Law, Chapter 119, F.S.; must comply with contract Section 29, Data Integrity and Safeguarding Information; must maintain all confidentiality, as applicable; and must be retained and maintained by the Contractor to the same extent as non-electronic records are retained and maintained as required by this contract.

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- 54.1** The Department's authorization pursuant to this section does not authorize electronic transactions between the Contractor and the Department. The Contractor is authorized to conduct electronic transactions with the Department only upon further written consent by the Department.
- 54.2** Upon request by the Department, the Contractor shall provide the Department with non-electronic (paper) copies of records. Non-electronic (paper) copies provided to the Department of any document that was originally in electronic form with an electronic signature must identify the person and the person's capacity who electronically signed the document on any non-electronic copy of the document.

55. Contract Manager:

The Department may substitute any Department employee to serve as the DOEA Contract Manager.

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56. Official Payee and Representatives (Names, Addresses, and Telephone Numbers):

a.	The Contractor name, as shown on page 1 of this contract, and mailing address of the official payee to whom the payment shall be made is:	Areawide Council on Aging of Broward County, Inc. 5300 Hiatus Road Sunrise, FL 33351
b.	The name of the contact person and street address where financial and administrative records are maintained is:	Shahnaaz Yasin, Finance Director 5300 Hiatus Road Sunrise, FL 33351
c.	The name, address, and telephone number of the representative of the Contractor responsible for administration of the program under this contract is:	Charlotte Mather-Taylor, Executive Director, 5300 Hiatus Road Sunrise, FL 33351 954-745-9567
d.	The section and location within the Department where Requests for Payment and Receipt and Expenditure forms are to be mailed is:	Florida Department of Elder Affairs Division of Financial Administration 4040 Esplanade Way, Suite 215 Tallahassee, Florida 32399-7000
e.	The name, address, and telephone number of the Contract Manager for this contract is:	Stephanie Major, FCCM 4040 Esplanade Way, Suite 335C Tallahassee, Florida 32399-7000 850-414-2344
Upon change of representatives (names, addresses, telephone numbers) by either party, notice shall be provided in writing to the other party.		

57. All Terms and Conditions Included:

This contract and its Attachments I – XVII, including any exhibits referenced in said attachments, together with any documents incorporated by reference, contain all the terms and conditions agreed upon by the Parties. There are no provisions, terms, conditions, or obligations other than those contained herein, and this contract shall supersede all previous communications, representations, or agreements, either written or verbal, between the Parties.

By signing this contract, the Parties agree that they have read and agree to the entire contract.

IN WITNESS WHEREOF, the Parties hereto have caused this one-hundred and five (105) page contract to be executed by their undersigned officials as duly authorized.

CONTRACTOR:
AREAWIDE COUNCIL ON AGING OF
BROWARD COUNTY, INC.

SIGNED BY:  _____
NAME: Nan Rich

TITLE: President of Board

DATE: 12/27/2024

STATE OF FLORIDA,
DEPARTMENT OF ELDER AFFAIRS

SIGNED BY:  _____
NAME: MICHELLE BRANHAM

TITLE: SECRETARY

DATE: 12/27/2024

Federal Tax ID: 59-1529419 001

UEI#: X81UDEEC6NBM6

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ATTACHMENT I STATEMENT OF WORK

I. *SERVICES TO BE PROVIDED*

A. Definitions of Terms

1. Contract Acronyms

Area Agency on Aging (AAA)
 Activities of Daily Living (ADL)
 Administration on Aging (AoA)
 Administration on Community Living (ACL)
 Assessed Priority Consumer List (APCL)
 Adult Protective Services (APS)
 Chronic Disease Self-Management Education (CDSME)
 Chronic Disease Self-Management Program (CDSMP)
 Dietary Reference Intake (DRI)
 Enterprise Client Information and Registration Tracking System (eCIRTS)
 Evidence-Based Disease Prevention and Health Promotion (EBDPHP)
 Florida Department of Business and Professional Regulations (DBPR)
 Florida Department of Elder Affairs (DOEA or Department)
 Florida Department of Health (DOH)
 Inform USA
 Information and Referral (I&R)
 Instrumental Activities of Daily Living (IADL)
 National Council on Aging (NCOA)
 Nutrition Services Incentive Program (NSIP)
 Older Americans Act (OAA)
 Planning and Service Area (PSA)
 State of Florida (State)
 Statewide Medicaid Managed Care Long-Term Care (SMMC LTC)
 United States Department of Agriculture (USDA)
 United States Department of Health and Human Services (USDHHS)

2. Program Specific Terms

Adult Child with a Disability: A child who is age 18 or older and is financially dependent on an older individual who is a parent of the child and has a disability.

Area Plan: A plan developed by the AAA outlining a comprehensive and coordinated service delivery system in its PSA in accordance with Section 306 of the OAA [42 United States Code (U.S.C.) § 3026] and Department instructions.

Area Plan Update: A revision to the Area Plan wherein the AAA enters OAA specific data in eCIRTS. An update may also include other revisions to the Area Plan as instructed by the Department.

Child: An individual who is not more than eighteen (18) years of age or an individual with a disability.

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Criteria: A standard which the AoA/ACL set for the Title IIID Program. AoA/ACL's standard criterion consists of three tiers: Minimal Criteria, Intermediate Criteria, and Highest- Level Criteria.

Family Caregiver: An adult family member, or another individual, who is an informal provider of in-home and community care to an older individual.

Frail: When an older individual is (1) determined to be unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision or (2) unable to perform at least three such activities without such assistance; or, (3) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.

Grandparent: A grandparent or step-grandparent of a child, or a relative of a child by blood, marriage or adoption, who: (1) lives with the child, (2) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child, and (3) has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

B. General Description

1. General Statement

The primary purpose of the OAA Program is to foster the development and implementation of comprehensive and coordinated systems to serve older individuals. These systems assist older individuals to attain and maintain maximum independence with supportive services.

The NSIP provides incentives for the effective delivery of nutritious meals to older individuals. NSIP allows programs to increase the number and/or the quality of meals served. NSIP is a cash allotment or commodity program that supplements funding or food used in meals served under the OAA. Florida has opted for cash payments in lieu of donated foods.

2. Authority

All applicable federal laws, regulations, action transmittals, program instructions, review guides and similar documentation related to the following:

- a. Catalog of Federal Domestic Assistance Nos. 93.043, 93.044, 93.045, 93.052, and 93.053;
- b. Older Americans Act of 1965, as amended 2020;
- c. 42 U.S.C. § 303 and § 604;
- d. Rule 58A-1, Florida Administrative Code (F.A.C.);
- e. Section 430.101, Florida Statutes (F.S.);
- f. Section 430.07, Florida Statutes (F.S.); and
- g. DOEA Programs and Services Handbook, which is hereby incorporated by reference, to include any subsequent revisions thereof.

3. Scope of Service

The Contractor is responsible for the programmatic, fiscal, and operational management of the OAA Title IIIB, Title IIIC1, Title IIIC2, Title IIID, and Title IIIE Programs and NSIP, within its designated PSA. The program services shall be provided in a manner consistent with the Contractor's current Area Plan, as updated and hereby incorporated by reference, and the current DOEA Programs and Services Handbook. The Contractor shall use the NSIP funding to supplement funding for food used in meals served by OAA Nutrition Program Providers.

4. Major Program Goals

The major goals of the OAA Program are to improve older individuals' quality of life, preserve their independence, and prevent or delay their need for costlier institutional care. These goals are achieved through the implementation of a comprehensive and coordinated service system that provides a continuum of service alternatives and effective delivery of nutritious meals that meet the diverse needs of elders and their caregivers.

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C. Clients to be Served**1. General Description**

The OAA Program gives preference to older individuals with greatest economic need and older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas),

2. Client Eligibility**a. OAA Title III**

Consumers shall not be dually enrolled in an OAA Program and a Medicaid capitated Long-Term Care Program, except consumers in need of OAA Legal Assistance services and OAA Congregate Nutrition Services, including transportation to and from congregate meal sites.

b. NSIP

Meals served to an elderly individual, funded in whole or in part under the SMMC LTC, Home Care for the Elderly, Community Care for the Elderly Programs, or other means tested programs may not be included in the NSIP count. OAA-funded congregate meals provided to SMMC LTC clients may be included in the NSIP count.

c. OAA Title IIIB, Supportive Services

- i. Individuals must be age sixty (60) or older; and
- ii. I&R/Assistance services are provided to individuals regardless of age.

d. OAA Titles IIIC1 and IIIC2, Nutrition Services, General

General factors that shall be considered in establishing priority for the receipt of nutrition services include those older persons who:

- i. Cannot afford to eat adequately;
- ii. Lack the skills or knowledge to select and prepare nourishing and well-balanced meals;
- iii. Have limited mobility which may impair their capacity to shop and cook for themselves;
- iv. Have a disabling illness or physical condition requiring nutritional support; or
- v. Have been screened at a high nutritional risk.

e. OAA Title IIIC1, Congregate Nutrition Services

In addition to meeting the general nutrition services eligibility requirements listed in Section I.C.2.d. above, individuals must be mobile, not homebound, and physically, mentally, and medically able to attend a congregate nutrition program. Individuals eligible to receive congregate meals include the following:

- i. Individuals age sixty (60) or older;
- ii. Any spouse (regardless of age) who attends the dining center with his/her eligible spouse;
- iii. Persons with a disability, regardless of age, who reside in a housing facility occupied primarily by older individuals where congregate nutrition services are provided;
- iv. Disabled persons who reside at home with and accompany an eligible person to the dining center; and
- v. Volunteers, regardless of age, who provide essential services on a regular basis during meal hours.

f. OAA Title IIIC2, Home Delivered Nutrition Services

In addition to meeting the general nutrition services eligibility requirements as listed in Section I.C.2.d., individuals must be homebound and physically, mentally, or medically unable to attend a congregate nutrition program. Individuals eligible to receive home delivered meals include the following:

- i. Individuals age sixty (60) or older who are incapacitated or unable to attend a congregate nutrition site due to illness, disability, isolation, or caring for a loved one who is ill at home;

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- ii. Individuals age sixty (60) or older who are unable to attend a congregate nutrition site due to teeth and/or mouth issues which makes it difficult to eat in public;
 - iii. Individuals age sixty (60) or older who are at nutritional risk who have physical, emotional, or behavioral conditions which would make their presence at congregate nutrition sites inappropriate;
 - iv. Individuals age sixty (60) or older who are at nutritional risk who are socially or otherwise isolated, including those who are self-isolating at home due to health or other reasons, and unable to attend a congregate nutrition site;
 - v. Individuals age sixty (60) or older who are unable to prepare meals due to a lack of or inadequacy of facilities; an inability to shop, cook, or prepare meals safely; a lack of funds to purchase nutritious food; or a lack of appropriate knowledge or skill;
 - vi. A home delivered meals recipient's spouse, regardless of age, if the provision of the collateral meal supports maintaining the person at home; and
 - vii. Individuals with disabilities, regardless of age, who reside at home with home delivered meals recipients and are dependent on them for care.
- g. OAA Title IIID, Disease Prevention and Health Promotion Services**
- i. Target individuals age sixty (60) or older; and
 - ii. Priority will be given to individuals residing in medically underserved areas.
- h. OAA Title IIIE, Caregiver Support Services**
- Eligibility for OAA Title IIIE, Caregiver Support Services, is as follows:
- i. Eligible individuals include:
 - (1) Family caregivers of individuals age sixty (60) or older; and
 - (2) Grandparents [age fifty-five (55) or older] or older individuals [age fifty-five (55) or older] who are relative caregivers.
 - ii. For respite and supplemental services, a family caregiver must be providing care for an older individual who meets the definition of the term "frail" as defined above.
 - iii. For Home Delivered Meals for IIIE and IIIEG, caregivers and individuals who reside in the home and are dependent on the caregiver for care.
 - iv. Priority will be given to family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction and to grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities.

II. MANNER OF SERVICE PROVISION

A. Service Tasks

To achieve the goals of the OAA Program, the Contractor shall ensure performance of the following tasks:

1. Client Eligibility Determination

The Contractor shall ensure that applicant data is evaluated to determine eligibility. Eligibility to become a client is based on meeting the requirements described in Section I.C.2.

2. Targeting and Screening New Clients for Service Delivery

The Contractor shall develop and implement policies and procedures consistent with OAA targeting and screening criteria for new clients.

3. Program Services

The Contractor shall ensure the provision of program services is consistent with the Contractor's current Area Plan, as updated and approved by the Department, and the current DOEA Programs and Services Handbook.

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4. Program Eligibility Requirements**a. Eligibility Criteria**

To be eligible for program participation, an entity must:

- i. Be an agency that has received a grant under OAA Title III [OAA section 311(42 U.S.C. § 3030a)]; and
- ii. Partner with a nutrition service provider that serves meals and is under the jurisdiction, control, management, and audit authority of the AAA and the Department.:

b. Provider's Nutrition Service Operations

The Contractor shall ensure that the nutrition service operations of the provider meet the requirements of this contract, as well as any other applicable regulations and policies prescribed by the current DOEA Programs and Services Handbook, USDHHS, USDA, DOH and local health departments, DBPR, or any other agency designated to inspect meal quality for the State.

c. Prescribed Nutritional Requirements

The Contractor shall ensure that each meal provided under this contract meets the following criteria:

- i. Complies with the current Dietary Guidelines for Americans, published by the Secretaries of the USDHHS and USDA; and
- ii. Provides a minimum of thirty-three and a third percent (33 1/3%) of the dietary reference intakes/adequate intakes for a female age seventy (70) or older as established by the Food and Nutrition Board of the National Academy of Sciences.

d. Food Origin and Commodities Requirements

Consistent with existing requirements of the NSIP, the Contractor and its service providers may use NSIP cash to purchase foods of U.S. origin for their nutrition projects under Title III of the OAA. NSIP funds must be used to expand meal services to older adults.

B. Use of Subcontractors

If this contract involves the use of a subcontractor or third party, then the Contractor shall not delay the implementation of its agreement with the Subcontractor. If any circumstance occurs that may result in a delay for a period of sixty (60) days or more of the initiation of the subcontract or the performance of the Subcontractor, the Contractor shall notify the DOEA Contract Manager and the Department's Chief Financial Officer in writing of such delay. The Contractor shall not permit a Subcontractor to perform services related to this contract without having a binding Subcontractor agreement executed. The Department will not be responsible or liable for any obligations or claims resulting from such action.

1. Copies of Subcontracts

The Contractor shall submit copies of all subcontracts to the DOEA Contract Manager within thirty (30) days of execution of each subcontract agreement.

2. Monitoring the Performance of Subcontractors

The Contractor shall monitor, at least once per year, each of its subcontractors, sub-recipients, vendors, and/or consultants paid from funds provided under this contract. The Contractor shall perform fiscal, administrative, and programmatic monitoring to ensure contractual compliance, fiscal accountability, programmatic performance, and compliance with applicable state and federal laws and regulations. The Contractor shall monitor its subcontractors to ensure that the budget and scope of work are accomplished within the specified time periods, and that all performance goals stated in this contract are achieved.

- a. The Contractor shall require subcontractors to enter all required data per the Department's eCIRTS Policy Guidelines for clients and services into the eCIRTS database. The data must be entered into the eCIRTS database before the subcontractors submit their Request for Payment and Receipts and Expenditure Reports to the Contractor. The Contractor shall establish time frames to ensure compliance with due dates for the Requests for Payment and Receipts Expenditure Reports to the Department.

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- b. The Contractor shall require subcontractors to run monthly eCIRTS reports and to verify that the client and service data in the eCIRTS database is accurate. This report must be submitted to the Contractor with the monthly Request for Payment and Receipts and Expenditure Report and must be reviewed by the Contractor before the subcontractor's Request for Payment and Receipts and Expenditure Reports can be approved by the Contractor.
- c. The Contractor shall require subcontractors to report on outreach activities at least semi-annually using a uniform reporting format established by the Contractor. Subcontractor reports must include the total number of outreach events or activities performed by the subcontractor as well as the following information for each event or activity: date, location, type of event or activity, total number of participants, individual service needs identified, and referral sources or information provided to participants.

C. Staffing Requirements

1. Staffing Levels

The Contractor shall assign its own administrative and support staff as needed to perform the tasks, responsibilities, and duties under this contract and ensure that subcontractors dedicate adequate staff accordingly.

2. Professional Qualifications

The Contractor shall ensure that the staff responsible for performing any duties or functions within this contract have the qualifications specified in the DOE A Programs and Services Handbook.

3. Service Times

The Contractor shall ensure the availability of services listed in this contract at times appropriate to meet client service needs, including, at a minimum, having staff in the office during normal business hours. Normal business hours are defined as Monday through Friday, 8:00 a.m. to 5:00 p.m. local time.

D. Deliverables

The following section provides the specific quantifiable units of deliverables and the source documentation required to evidence the completion of the tasks specified in this contract. The Contractor must submit all required documentation in the time and manner specified for the minimum performance levels to be met. Each deliverable must be accepted in writing by the DOE A Contract Manager based on the requirements for each deliverable before the Contractor submits an invoice requesting payment.

1. Delivery of Services to Eligible Clients

The Contractor shall ensure the provision of a continuum of services that meets the diverse needs of elders and their caregivers. Documentation of service delivery must include a report consisting of the following: number of clients served, number of service units provided by service, and rate per service unit with calculations that equal the total invoice amount. The Contractor shall ensure the performance and reporting of the following types of services, in accordance with the Contractor's current Department-approved Area Plan, the current DOE A Programs and Services Handbook, and Section II.A.

a. Supportive Services (IIB Program)

Supportive services include a variety of community-based and home-delivered services that support older individuals' quality of life by helping them remain independent and productive. Services include the following:

- i. Adult Day Care/Adult Day Health Care;
- ii. Assurance (Telephone and In-Person);
- iii. Caregiver Support Groups;
- iv. Caregiver Training/Support;
- v. Case Aide/Case Management;
- vi. Chore and Chore (Enhanced);
- vii. Companionship;

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- viii. Counseling (Gerontological and Mental Health/Screening);
- ix. Education/Training;
- x. Emergency Alert Response;
- xi. Escort;
- xii. Health Support;
- xiii. Home Health Aide;
- xiv. Homemaker;
- xv. Housing Improvement;
- xvi. Information;
- xvii. Intake;
- xviii. Interpreter/Translating;
- xix. Legal Assistance;
- xx. Material Aide;
- xxi. Occupational Therapy;
- xxii. Outreach;
- xxiii. Personal Care;
- xxiv. Pet Support Services;
- xxv. Physical Therapy;
- xxvi. Recreation;
- xxvii. Recreation Materials;
- xxviii. Referral/Assistance;
- xxix. Respite Services (In-Home and Facility Based);
- xxx. Screening/Assessment;
- xxxi. Shopping Assistance;
- xxxii. Skilled Nursing;
- xxxiii. Specialized Medical Equipment, Services, and Supplies;
- xxxiv. Speech Therapy;
- xxxv. Technology;
- xxxvi. Technology – Equipment;
- xxxvii. Technology – Install;
- xxxviii. Technology - Staff Support; and Transportation.

b. Congregate Nutrition Services (IHC1 Program)

Nutrition services are provided in congregate settings and are designed to reduce hunger and food insecurity and to promote socialization and the health and well-being of older individuals through access to nutrition and other disease prevention and health promotion services. Services include the following:

- i. Assurance (Telephone and In-Person);
- ii. Congregate Meals (Including Grab and Go Congregate Meals);
- iii. Congregate Meals Screening;
- iv. Nutrition Education and Nutrition Counseling;

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- v. Outreach; and
- vi. Shopping Assistance.

c. Home Delivered Nutrition Services (IHC2 Program)

In-home nutrition services are provided to reduce hunger and food insecurity; promote socialization and the health and well-being of older individuals by assisting such individuals to gain access to nutrition and other disease prevention and health promotion services. Services include the following:

- i. Assurance (Telephone and In-Person);
- ii. Home Delivered Meals (Including Grab and Go Home Delivered Meals);
- iii. Nutrition Education and Nutrition Counseling;
- iv. Outreach;
- v. Screening/Assessment; and
- vi. Shopping Assistance.

d. Disease Prevention and Health Promotion Services (Title IIID Program)

Evidence-Based Disease Prevention and Health Promotion (EBDPHP) services have been demonstrated through evaluation to be effective for improving health and wellbeing or reducing disease, disability, and/or injury among older adults. The ACL defines EBDPHP services as meeting highest-level criteria. Only services that meet the highest-level criteria are allowable under the IIID Program. EBDPHP services must be delivered per the requirements of the program and ensure program fidelity. EBDPHP services include the following:

- i. A Matter of Balance/Un Asunto de Equilibrio;
- ii. Active Living Every Day;
- iii. Arthritis Foundation Exercise Program;
- iv. Arthritis Foundation Tai Chi Program (Tai Chi for Arthritis);
- v. Applied Suicide Intervention Skills Training;
- vi. Assurance (Telephone and In-Person);
- vii. Bingocize;
- viii. Brief Intervention & Treatment for Elders (BRITE);
- ix. Chronic Disease Self-Management Program;
- x. Chronic Pain Self-Management Program/Manejo Personal del Cronico ;
- xi. Counseling (Gerontological and Mental Health/Screening);
- xii. Diabetes Empowerment Education Program (DEEP);
- xiii. Diabetes Self-Management Program/Program de Manejo Personal de la Diabetes;
- xiv. Enhance Fitness;
- xv. Enhance Wellness;
- xvi. Fit and Strong!;
- xvii. Healthy Ideas;
- xviii. Healthy Moves for Aging Well;
- xix. HomeMeds;
- xx. Medication Management;
- xxi. Nutrition Counseling;

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- xxii.** Powerful Tools for Caregivers;
- xxiii.** Program to Encourage Active Rewarding Lives for Seniors (PEARLS);
- xxiv.** Stepping On;
- xxv.** Stay Active and Independent for Life (SAIL);
- xxvi.** Tai Chi/Tai Ji Quan Moving for Better Balance (Highest-Level);
- xxvii.** Tailored Caregiver Assessment and Referral (TCARE);
- xxviii.** Tomando Control de su Salud; and
- xxix.** Walk with Ease.

e. Caregiver Support Services (IHIE Program)

The following services are intended to provide direct aid to caregivers in the areas of health, nutrition, and financial literacy, and to assist them with decision-making and problem-solving related to their caregiving roles and responsibilities:

- i.** Adult Day Care/Adult Day Health Care;
- ii.** Assurance (Telephone and In-Person);
- iii.** Caregiver Support Groups;
- iv.** Caregiver Training/Support;
- v.** Case Aide/Case Management;
- vi.** Counseling (Gerontological and Mental Health/Screening);
- vii.** Education/Training;
- viii.** Financial Risk Reduction (Assessment and Maintenance);
- ix.** Home Delivered Meals (Including Grab and Go Home Delivered Meals);
- x.** Information;
- xi.** Intake;
- xii.** Outreach;
- xiii.** Pet Support Services;
- xiv.** Powerful Tools for Caregivers;
- xv.** Recreation Materials;
- xvi.** Referral/Assistance;
- xvii.** Respite Services (In-Home and Facility Based);
- xviii.** Screening/Assessment;
- xix.** Shopping Assistance;
- xx.** Tailored Caregiver Assessment and Referral (TCARE);
- xxi.** Technology;
- xxii.** Technology – Equipment;
- xxiii.** Technology – Install;
- xxiv.** Technology - Staff Support; and
- xxv.** Transportation.

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(1) Caregiver Support Supplemental Services (IIIES Program)

At least ten percent (10%), but no more than twenty percent (20%), of the total Title III E funds shall be used to provide supplemental support services. The following services are provided to complement the care provided by caregivers:

- (a) Chore and Chore (Enhanced);
- (b) Emergency Alert Response;
- (c) Housing Improvement;
- (d) Legal Assistance;
- (e) Material Aide;
- (f) Medication Management; and
- (g) Specialized Medical Equipment, Services and Supplies.

(2) Caregiver Support Grandparent Services (IIIEG Program)

At least five percent (5%), but no more than ten percent (10%), of the total Title III E funds shall be used to provide support services to grandparents and older individuals who are relative caregivers. Services for grandparents or older individuals who are relative caregivers that are designed to help them meet their caregiving obligations include the following:

- (a) Assurance (Telephone and In-Person);
- (b) Caregiver Support Groups;
- (c) Caregiver Training/Support;
- (d) Case Aide/Case Management;
- (e) Child Day Care;
- (f) Counseling (Gerontological and Mental Health/Screening);
- (g) Education/Training;
- (h) Home Delivered Meals (Including Grab and Go Home Delivered Meals);
- (i) Legal Assistance;
- (j) Outreach;
- (k) Recreation Materials;
- (l) Referral/Assistance;
- (m) Screening/Assessment;
- (n) Shopping Assistance;
- (o) Sitter;
- (p) Technology;
- (q) Technology – Equipment;
- (r) Technology – Install;
- (s) Technology - Staff Support; and
- (t) Transportation.

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f. Information and Referral/Assistance Services (Elder Helplines)

The Contractor shall ensure, through training and periodic quality assurance, that Elder Helpline Information and Referral/Assistance Services adhere to the Inform USA *Summary of Standards for Professional Information & Referral*, provided as Attachment I. The Department's standards are based on the current standards. The standards have been amended by the Department to address the unique needs of the Elder Helpline Information and Referral system.

2. Provision of Services

The Contractor shall ensure the provision of the services described in this contract are in accordance with the current DOE A Programs and Services Handbook, the Contractor's current Department-approved Area Plan, and the tasks described in Section II.A.

3. Administrative Responsibilities

The Contractor shall provide management and oversight of OAA Program operations in accordance with the provisions of this contract, the current DOE A Programs and Services Handbook and the Contractor's current Department-approved Area Plan. Management and oversight of OAA Program Operations include the following:

- a. Develop and submit a complete and accurate Area Plan, with annual updates, as directed by the Department. This shall include having approval of the Board of Directors and Advisory Council prior to submission by the Department's established deadlines.
- b. Implement its Department approved Area Plan by timely procuring qualified subcontractors experienced in the delivery of services to the eligible community and provide to the Department, no later than 90 calendar days before expiration of its current contract, its annual updated area plan which must include notice of completion of procurement of subcontractors, in addition to the status of subcontracts, evaluation of the performance of its service providers and vendors and updated rates of service for any new or renewed subcontracts and any additional information as directed by the Department. The rates approved by the Department within the Area Plan must follow guidance in Section IV. I. Rate Increase Thresholds.
- c. Establish and enforce written policies, procedures, and standards in accordance with state and federal requirements for the procurement and/or purchase of goods and services to ensure an open and competitive process.
- d. Review all reports submitted by subcontractors and vendors for accuracy and sufficiency of information.
- e. Provide technical assistance to subcontractors and vendors as needed to ensure they meet the Contractor's standards and any legal requirements for the goods or services delivered.
- f. Monitor and evaluate at least annually subcontractors and vendors for fiscal, administrative, and programmatic compliance and take appropriate corrective action if needed.
- g. Submit all payments or reimbursements to subcontractors as scheduled.
- h. Establish procedures for handling recipient complaints and grievances, in particular, when an adverse action is being taken against expectations or interests such as denial or reduction of services and termination or reduction of benefits.

i. Complaint Procedures

The Contractor shall develop and implement complaint procedures and ensure that subcontractors develop and implement complaint procedures to process and resolve client dissatisfaction with services. Complaint procedures shall address the quality and timeliness of services, provider and direct service worker complaints, and all other issues except the termination, suspension, or reduction of services, which shall be addressed through the grievance process as described in Appendix D of the DOE A Programs and Services Handbook. Complaint procedures shall include notification to all clients of the complaint procedure and include tracking the date, nature, and disposition of each complaint.

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ii. Legal Provider Grievance Procedures

The Contractor shall ensure that legal providers have an internal grievance procedure that addresses both denial of service and complaints by clients about manner or quality of legal assistance. Grievance procedures that comport with the requirements of the Legal Services Corporation as provided in 45 Code of Federal Regulation (CFR) Part 1621 are sufficient to meet this standard. At a minimum, the procedure must provide applicants with:

- (1) Adequate notice of the grievance procedures;
- (2) Information on how to file a grievance or complaint, and
- (3) Prompt consideration of each complaint by the Executive Director or the Executive Director's designee.

The Contractor may not serve in an appellate capacity or otherwise interfere in the grievance review process for legal providers. However, the Contractor may request that legal providers maintain a file of complaints and statements of disposition of complaints, with redacted client identifying information, for examination by the Contractor during monitoring.

- i. Ensure compliance with eCIRTS regulations.
- j. Monitor performance objective achievements per targets set by the Department.
- k. Conduct annual client satisfaction surveys to evaluate and improve service delivery.
- l. Submit all completed client satisfaction surveys to the Department along with the Area Plan, as directed by the Department.

E. Reports

The Contractor shall respond to additional, routine, or special requests for information and reports required by the Department in a timely manner as determined by the DOEA Contract Manager. The Contractor shall establish reporting deadlines and due dates for subcontractors that permit the Contractor to review and validate the data and meet the Department's reporting requirements.

1. OAA Annual Volunteer Activity Report

The Contractor shall complete and submit an OAA Annual Volunteer Activity Report by January 15 each calendar year. The report must contain data for the previous contract year using the current reporting tool as directed by the Department. For any questions regarding this report, please contact the Department's Office of Volunteer & Community Services at 850-414-2020.

2. eCIRTS Reports

- a. Contractor shall input OAA-specific and NSIP-specific data into eCIRTS. To ensure eCIRTS data accuracy, the Contractor shall use eCIRTS-generated reports.

b. eCIRTS Data Entries for Subcontractors

The Contractor must require subcontractors to enter all required data for clients and services in the eCIRTS database per the DOEA Programs and Services Handbook and the eCIRTS User Manual – Aging Provider Network users (located in Documents on the eCIRTS Enterprise Application Services). Subcontractors must enter this data into the eCIRTS database prior to submitting their Requests for Payment and Receipts and Expenditure Reports to the Contractor. The Contractor shall establish deadlines for completing eCIRTS data entry to ensure compliance with due dates for the Requests for Payment and Receipts and Expenditure Reports that Contractor must submit to the Department.

c. Subcontractors' Monthly eCIRTS Reports

The Contractor must require subcontractors to run monthly eCIRTS reports and verify that client and service data in the eCIRTS database is accurate. This report must be submitted to the Contractor with the monthly Request for Payment and Receipts and Expenditure Reports and must be reviewed by the

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Contractor before the subcontractor's Request for Payment and Receipts and Expenditure Reports can be approved by the Contractor.

3. Area Plan Update and All Revisions Thereto

The Contractor shall submit, for approval by the Department, an Area Plan Update, wherein the Contractor enters OAA-specific data in eCIRTS, as required by the Department and federal funding source. Rates provided by the Contractor must be actual rates, either as provided in current contract or as updated by new or renewed contracts, but not estimated rates.

4. Surplus/Deficit Report

The Contractor shall submit a Consolidated Surplus/Deficit Report, in a format provided by the Department, to the DOE A Contract Manager by the 25th of each month. This Consolidated Surplus/Deficit Report is for all agreements and/or contracts between the Contractor and the Department and must include the following:

- a. A list of all subcontractors and their status regarding surplus/deficit;
- b. The Contractor's detailed plan on how the surplus/deficit spending which exceeds the threshold specified by the Department will be resolved;
- c. Recommendations to transfer funds to resolve surplus/deficit spending;
- d. Input from the Contractor's Board of Directors on resolution of spending issues, if applicable;
- e. Number of clients currently on APCL that receive a priority ranking score of four (4) or five (5); and
- f. Number of clients currently on the APCL designated as Imminent Risk.

5. Older Americans Act Performance System (OAAPS) Report

Data required for the OAAPS Report that is not recorded in eCIRTS will be provided to DOE A in the format and on the date established by the Department.

The Contractor shall submit semi-annual reports regarding Legal Assistance to the Legal Services Developer on the dates established by the Department. Such reports shall include the following:

- a. A list of all Subcontractor(s) and copy of the service agreement with the Contractor;
- b. The Contractor and the Subcontractor(s) joint detailed plan on how to serve the identified target groups with the greatest economic social need;
- c. Whether the Subcontractor(s) made available the minimum specified categories of legal assistance identified in OAA priorities in the Department Program and Services Handbook;
- d. Whether the Subcontractor(s) reached targeted groups and served in priority issue areas;
- e. The Contractor's plan on how to develop and maximize the use of other resources to expand the provision of legal assistance;
- f. Case Summaries from Subcontractor(s) that provide examples of the type of outcomes provided [do not provide client names, addresses or identifiers];
- g. Number of clients referred by the Contractor to Subcontractor(s) for legal assistance to the Department's clients for that six month reporting period;
- h. Any activities or outreach the Contractor engaged in to publicize the legal assistance available through the Department, including event date, location, event type or activity, total number of participants, individual service needs identified and referral sources or information provided to participants;
- i. Any collaboration with Subcontractor(s) for trainings or community presentations including the date, time, location and subject matter for each event;
- j. Identification of any unmet needs within the legal community;
- k. Recommendations for areas of trainings for Contractor personnel to improve quantity and quality of referrals for legal assistance; and
- l. Recommendations to improve the effectiveness and frequency of collaboration between Contractor and Subcontractor(s).

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6. Health and Wellness Reports

The Contractor shall submit Monthly Programmatic Reports for EBDPHP services on the dates specified in Attachment XI, Exhibit 2. The DOEA Contract Manager will provide Contractor with an Excel report template with entry tabs for: Health and Wellness Courses/Services offered including Attestations (cumulative), Partnerships (updated as needed), and Success Stories (reported at least once each May).

- a. Information provided in the Monthly Programmatic Report must match eCIRTS data and the Request for Payment.
- b. The Contractor shall review program documentation to ensure documentation is complete and adequately supports the information reported on the Monthly Programmatic Report prior to submitting a Request for Payment. The Contractor will attest to the review in the “Comments” section of the Monthly Programmatic Report and provide relevant information regarding the documentation as needed.
- c. Program documentation shall include all the following elements: Sign-In Sheets or Attendance Logs; flyers or documentation demonstrating efforts to recruit participants and promote EBDPHP services provided; current facilitator certificates; copy of program license (if applicable); and any forms required by the specific program.
- d. Contractor shall ensure that Sign-In Sheets or Attendance Logs accurately reflect dates, times, names of programs, participant names, and name(s) of program facilitator(s). If the Attendance Log does not include a space for participant signatures, a Sign-In Sheet with signatures and dates must accompany it. Exceptions may be approved by the DOEA Contract Manager. Requests must be made to the Department in writing and kept with program documentation.
- e. Participants **must** sign their name on program Sign-in Sheets or Attendance Logs. If a participant is unable to sign their name, the instructor may sign by proxy for the participant (including their own initials and date) with a note on the Sign-In Sheet explaining the need for the proxy.
- f. The Contractor shall abide by all program fidelity requirements and annually observe delivery of EBDPHP services. A note will be included in the Monthly Programmatic Report, in the comments section, when a program has been observed. Documentation pertaining to the observation will be kept and provided to the Department upon request.
- g. CDSME Workshop data must be entered into the CDSME Database.
- h. The Contractor shall contact the DOEA Contract Manager in the event of an emergency or an exigent circumstance where the provider is unable to maintain an aspect of fidelity of the EBDPHP services (e.g., minimum, or maximum number of participants) before the end of the workshop. At the discretion of the DOEA Contract Manager, the service may be reimbursed under this contract; however, if the fidelity infraction is discovered after the program has finished, during the Request for Payment Process, or as a result of a desk review, the Contractor shall not be reimbursed for the workshop or shall reimburse the Department for the cost of the workshop.
- i. The Contractor shall collaborate and partner with organizations to extend the reach of EBDPHP services. Partnerships and collaborations may be developed with DOH, the Florida Department of Children and Families, USDA’s Nutrition Program, insurance companies, Centers for Disease Control and Prevention, Area Health Education Centers, local health councils, public and private universities, federally qualified health clinics, county health departments, and Florida’s Age-Friendly Communities. Partnerships shall be designed to stimulate innovation of new approaches and activities in EBDPHP services, develop greater capacity, and leverage other funding sources. Partnerships shall also address building and sustaining an infrastructure for the dissemination of EBDPHP services. This includes, but is not limited to, recruitment of trainers and participants, covering costs for licenses, and replicating program fidelity.
- j. The Contractor shall document, and provide to the Department upon request, evidence of partnerships created formally (through Memoranda of Agreement/Understanding) or informally. The Contractor will be required to keep track of partnerships in the Monthly Programmatic Report. Each month the Contractor shall review this information and provide updates to the Department as necessary.

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7. Program Highlight Narratives

The Contractor shall submit brief written narratives to the Department for publication in the Program Highlight sections of the Department's Summary of Programs and Services, which is hereby incorporated by reference, to include any subsequent revisions thereof. The narratives shall reference specific events that have occurred since the last submission of Program Highlight narratives, including new success stories, quotes, testimonials, or human-interest vignettes. The narratives shall be written for a general audience, with no acronyms or technical terms. For all agencies or organizations that are referenced in the narratives, the Contractor shall provide a brief description of their mission or role. The active tense shall be consistently used in the narratives to identify the specific individuals or entities that performed the activities described in the narratives. The Contractor shall review and edit narratives for clarity, readability, relevance, specificity, human interest, and grammar prior to submitting them to the Department.

8. Congregate Meal Site and Food Service Vendor Verification Report

The Contractor shall conduct monthly reviews of the PSA's congregate meal site information to verify the accuracy of the information on file. Congregate meal site information includes, but may not be limited to, the address of the meal site, meal service time, name of caterer/vendor, and days of meal service. Any changes to congregate meal site information must be submitted to the DOEA Contract Manager using the Department's current Meal Site Change Form. Any changes to this information that the Contractor is made aware of prior to the Contractor's monthly report submission shall be communicated to the DOEA Contract Manager within 48 hours of the change (or in advance as appropriate). A comprehensive annual verification is due by June 1st of each year.

F. Records and Documentation

1. The Contractor agrees to make available to Department staff and any party designated by the Department all contract related records and documentation. The Contractor shall ensure the collection and maintenance of all program related information and documentation on any system designated by the Department. Maintenance includes valid exports and backups of all data and systems according to Department standards. Data must be usable and must be maintained in a format that is readable to the Department.

2. eCIRTS Data and Maintenance

The Contractor shall ensure monthly collection and maintenance of client and service information in eCIRTS, or any other system designated by the Department. Maintenance includes ensuring that all data is accurate and current and performing valid exports and backups of all data and systems according to Department standards.

3. Policies and Procedures for Records and Documentation

The Contractor shall maintain written policies and procedures for computer system backup and recovery and shall have the same requirement of its subcontractors. These policies and procedures shall be made available to the Department upon request.

4. eCIRTS Address Validation

The Contractor shall work with the Department to ensure that client addresses are correct in eCIRTS for disaster preparedness efforts. At least annually, and more frequently as needed, the Department will provide direction on how to validate eCIRTS addresses to ensure they can be mapped. The Contractor will receive a list of unmatched addresses that cannot be mapped, and the Contractor will be responsible for working with the local service providers to correct addresses and send a list to the Department with confirmed addresses. The Department will use this information to update maps, client rosters, and unmatched addresses and disseminate this information to the local service providers.

G. Performance Specifications**1. Outcomes and Outputs (Performance Measures)**

At a minimum, the Contractor shall:

- a. Ensure the provision of the services described in this contract are in accordance with the DOEA Programs and Services Handbook, the Contractor's current Department-approved Area Plan, and Section II.A.

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- b. Timely and accurately submit to the Department all documentation and reports described in Attachment I, Section II.E.
 - c. Timely and accurately, per Attachment XI, submit to the Department Attachments XII and XIII, Exhibits 1 – 7.
 - d. Develop and document strategies in the Area Plan to support the Department’s standard of performance achievement, including increases in the following:
 - i. Percentage of most frail elders who remain at home or in the community instead of going into a nursing home;
 - ii. Percentage of APS referrals who need immediate services to prevent further harm who are served within seventy-two (72) hours;
 - iii. Percentage of active clients eating two or more meals per day;
 - iv. Percentage of new service recipients whose ADL assessment score has been maintained or improved;
 - v. Percentage of new service recipients whose IADL assessment score has been maintained or improved;
 - vi. Percentage of caregivers who, after service intervention, self-report being very confident about their ability to continue to provide care; and
 - vii. Percentage of customers who are at imminent risk of nursing home placement who are served with community-based services.
2. The Contractor’s performance of the measures in G.1, above, will be reviewed and documented in the Department’s Annual Programmatic Monitoring Reports.

3. **Monitoring and Evaluation Methodology**

The Department will review and evaluate the performance of the Contractor under the terms of this contract. Monitoring shall be conducted through direct contact with the Contractor via telephone, in writing, or an on-site visit. The primary, secondary, or signatory of the contract must be available for any on-site programmatic monitoring visit. The Department reserves the right to conduct an on-site visit unannounced by persons duly authorized by the Department. The Department’s determination of acceptable performance shall be conclusive. The Contractor agrees to cooperate with the Department in monitoring the progress of completion of the service tasks and deliverables. The Department may use, but is not limited to, one or more of the following methods for monitoring:

- a. Desk reviews and analytical reviews;
- b. Scheduled, unscheduled, and follow-up on-site visits;
- c. Client visits;
- d. Review of independent auditor’s reports;
- e. Review of third-party documents and/or evaluation;
- f. Review of progress reports;
- g. Review of customer satisfaction surveys;
- h. Agreed-upon procedures review by an external auditor or consultant;
- i. Limited-scope reviews; and
- j. Other procedures as deemed necessary by the Department.

4. **Performance Definitions**

“Work day” shall mean a provider’s staff member’s eight (8) hour work period, unless specifically noted otherwise. “Day” shall mean a calendar day, unless specifically noted otherwise.

H. Contractor Responsibilities

1. **Contractor Unique Activities**

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All tasks listed above in Section II. are solely and exclusively the responsibility of the Contractor and are tasks for which, by execution of this contract, the Contractor agrees to be held accountable.

2. Coordination with Other Providers and/or Entities

Notwithstanding that services for which the Contractor is held accountable involve coordination with other entities in performing the requirements of this contract, the failure of other providers or entities does not alleviate the Contractor from any accountability for tasks or services that the Contractor is obligated to perform pursuant to this contract.

I. Departmental Responsibilities

1. Department Obligations

The Department may, within its resources, provide technical support and/or assistance to the Contractor to assist the Contractor in meeting the requirements of this contract. The Department's support and assistance, or lack thereof, shall not relieve the Contractor from full performance of contract requirements.

2. Department Determinations

The Department reserves the exclusive right to make certain determinations in the tasks performed by the Contractor and the approaches used by the Contractor to perform those tasks. The absence of the Department setting forth a specific reservation of rights does not mean that all other areas of the contract are subject to mutual agreement.

III. METHOD OF PAYMENT

A. Payment Method Used

The method of payment for this contract is a combination of Fixed-Fee/Unit Rate, Cost Reimbursement, and Advance Payments subject to the availability of funds and Contractor performance. The Department will pay the Contractor upon satisfactory completion of the Tasks/Deliverables, as specified in Section II.D., and in accordance with all other terms and conditions of this contract.

B. Unit of Service

1. Fixed Fee/Unit Rate

Contractor must meet the minimum level of performance stated in the contract to receive payment. Payments for Fixed Fee/Unit Rates shall not exceed amounts established in Attachment XVI.

2. Fixed Rates for NSIP Program

Payments for NSIP Fixed rate shall not exceed the unit rate of service identified below:

Service to be Provided	Unit of Service	Unit Rate
Eligible Congregate and Home Delivered Meals	1 unit = 1 meal	\$0.72

3. Cost Reimbursement

Payment shall only be authorized for allowable expenditures, per the limits specified in the Budget Summary (Attachment X). All cost reimbursement Requests for Payment must include the actual Receipts and Expenditure Reports, beginning with the first month of the contract. The Contractor must meet the minimum level of performance stated in the contract to receive payment.

The Contractor agrees to distribute funds as detailed in the Area Plan Update and the Budget Summary (Attachment X). Any change in the total amounts of the funds identified on the Budget Summary form requires a contract amendment.

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C. Advance Payments

The Contractor may request up to two (2) months of advances at the start of the contract period to cover program administration, outreach, and service costs. The payment of an advance will be contingent upon the sufficiency and amount of funds released to the Department by the State of Florida (budget release). The Contractor's requests for advance payments must be submitted to the Department in their entirety no later than January 12, 2025. The Contractor's requests for advance payments require the written approval of the Department's Contract Manager.

For the first month's advance request, the Contractor shall provide the Department's Contract Manager documentation justifying the need for an advance and describing how the funds will be distributed. If the Contractor is requesting two (2) months of advances, documentation must be provided reflecting the cash needs of the Contractor within the initial two (2) months and should be supported through a cash-flow analysis or other information appropriate to demonstrate the Contractor's financial need for the second month of advances. If sufficient budget is available, and the Department's Contract Manager, in his or her sole discretion, has determined that there is a justified need for an advance, the Department may issue approved advance payments up to 30 days after, but not prior to, the contract execution date. Advance payments will not be issued for NSIP.

1. Any advance payments the Contractor requests for subcontractors must be distributed within seven (7) days of receipt of payment from the Department. The Contractor shall submit to the Department documentation to support full distribution of advanced funds with Request for Payment, report number 5, due to the Department on April 15, 2025, in accordance with Invoice Schedule (Attachment XI).
2. All advance payments retained by the Contractor must be fully expended no later than March 31, 2025. Any portion of advanced payments not expended must be recouped on the Request for Payment, report number 5, due to the Department on April 15, 2025, in accordance with the Invoice Schedule (Attachment XI).
3. Advance recoupment shall start with the third monthly Request for Payment submission, in accordance with the Invoice Schedule (Attachment XI). The amount of recoupment shall be equally divided between the remaining number of Requests for Payment invoices due for the contract year. All advances should be recorded in Part C,1 of the report (attachment XII), and shall be fully recouped by the end of the contract year or when funds are fully expended, whichever is first.
4. Interest earned on advances must be identified separately by source of funds (state or federal). Contractors shall maintain advanced payments of federal funds in FDIC interest bearing accounts unless an exception is made in accordance with 45 CFR § 75.305. Earned interest must be returned to the Department at the end of each quarter of the contract period.

D. Invoice Instructions

Payment shall be made upon the Contractor's presentation of an invoice subsequent to the acceptance by the Department of the deliverables shown on the invoice. The form and substance of each invoice submitted by the Contractor shall be as follows:

1. The invoice shall include a "Remit to" address that corresponds exactly to the remittance address identified in the MyFloridaMarketPlace (MFMP) registration.
2. The monthly invoice shall include the units of services established in the Contractor's Department-approved Area Plan, per the requirements in the DOEA Programs and Services Handbook, at the rates established in Attachment XVI, Service Rate Report. Documentation of service delivery shall include a report consisting of the following: number of clients served, number of service units provided by service, and rate per service unit, with calculations that equal the total invoice amount. Reimbursement amounts for administrative costs shall be reflected on the Cost Reimbursement Summary form (Attachment XV) and include only items contained on the Contractor's Department-approved budget. Any change to the Contractor's Department-approved budget after the execution of this contract shall require approval from the DOEA Contract Manager prior to being made. Any change to the total contract amount requires a contract amendment.
3. The Contractor shall consolidate requests for payment from subcontractors and receipts and expenditure reports that support the requests for payment and shall submit to the Department Requests for Payment (Attachment XII), Receipt and Expenditure Reports (Attachment XIII), and Cost Reimbursement Summaries (Attachment XV).

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4. The Contractor shall include with the Fixed Fee/Unit Rate portion of its invoice the units of services provided based on rates established in Attachment XVI, number of clients, and the rates for the services provided per the requirements described in the deliverables and service tasks. The Contractor shall clearly state the provider name, the report month, and the invoice number on the invoice.
5. All Requests for Payment shall be based on the submission of actual monthly Receipts and Expenditure Reports beginning with the first month of the contract. The schedule for submission of advanced payment requests (when available) and invoices can be found in the Invoice Schedule (Attachment XI).
6. The Certified Minority Business Subcontractor Expenditures Report (Attachment VIV) is considered a deliverable and must be completed in its entirety and submitted with each invoice.
7. Final contract invoices must be submitted to the Department no later than February 15, 2026.

E. Payment Withholding

Any payment due by the Department under the terms of this contract may be withheld pending receipt and approval by the Department of all financial and programmatic reports due from the Contractor and any adjustments thereto, including any disallowance not resolved.

F. Corrective Action Plan

1. Contractor shall ensure 100% of the deliverables identified in Section II.D. are performed pursuant to contract requirements.
2. If at any time the Contractor is notified by the DOEA Contract Manager that it has failed to correctly, completely, or adequately perform contract deliverables identified in Section II.D., the Contractor will have ten (10) days to submit a Corrective Action Plan (CAP) to the DOEA Contract Manager that addresses the deficiencies and states how the deficiencies will be remedied within a time period approved by the DOEA Contract Manager. The Department shall assess a financial consequence for non-compliance on the Contractor as referenced in Section III.G. for each deficiency identified in the CAP which is not corrected pursuant to the CAP. The Department will also assess a financial consequence for failure to timely submit a CAP to the Department.
3. If the Contractor fails to correct an identified deficiency within the Department-approved period specified in the CAP, the Department shall deduct the percentage established in Section III.G. from the payment for the invoice of the following month.
4. If the Contractor fails to timely submit a CAP to the Department, the Department shall deduct the percentage established in Section III.G. for each day the CAP is overdue. The deduction will be made from the payment for the invoice of the following month.

G. Financial Consequences

The Department will withhold or reduce payment if the Contractor fails to perform the deliverables to the satisfaction of the Department according to the requirements referenced in Section II.D. The following financial consequences will be imposed if the deliverables stated do not meet in part or in whole the performance criteria as outlined in Section II.D.:

1. Delivery of services to eligible clients as referenced in Section II.A.3. and Section II.D.1. of this contract – Failure to comply with established assessment and prioritization criteria, as evidenced by eCIRTS reports, will result in a 2% reduction of payment per business day. The reduction of payment will begin on the first business day following the Department's notification to the Contractor that the identified deficiency was not cured or satisfactorily addressed in accordance with the Department-approved CAP.
2. Services and units of services as referenced in Section II.D.2. of this contract – Failure to provide services in accordance with the current DOEA Programs and Services Handbook, the service tasks described in Section II.A., and Attachment XVI, or failure to submit required documentation will result in a 2% reduction of payment per business day. The reduction of payment will begin the first business day following the Department's notification to the Contractor that the identified deficiency is not cured or satisfactorily addressed in accordance with the Department-approved CAP.

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3. Administrative duties as referenced in Section II.D.3. of this contract – Failure to perform management and oversight of program operations will result in a 2% reduction of payment per business day. The reduction of payment will begin the first business day following the Department’s notification to the Contractor that the identified deficiency was not cured or satisfactorily addressed in accordance with the Department approved CAP.
4. Timely submission of a CAP – Failure to timely submit a CAP within ten (10) business days after notification of a deficiency by the DOE Contract Manager will result in a 2% reduction of payment per business day the CAP is not received. The reduction of payment will begin with the subsequent invoice received from the Contractor and shall be prorated for each day the CAP was late following the due date specified by the Department and shall remain in effect until the contractor complies with the submission requirement.
5. Exceptions may be granted solely, in writing, by the DOE Contract Manager.

IV. SPECIAL PROVISIONS

A. Final Budget and Funding Revision Requests

Final requests for budget revisions or adjustments to contract funds based on expenditures for provided services must be submitted to the DOE Contract Manager in writing no later than December 31, 2025; email requests are considered acceptable.

B. Contractor’s Financial Obligations

1. Matching, Level of Effort, and Earmarking Requirements

The Contractor shall match at least twenty-five percent (25%) of the federal administrative funds received. The Contractor’s match will be made in the form of cash, general revenue administrative funds, and/or in-kind resources. The Contractor will assure, through a provision in subcontracts, a match requirement of at least ten percent (10%) of the cost for services funded through this contract, except for services provided pursuant to OAA Title IIID. The subcontractor’s match will be made in the form of cash and/or in-kind resources. The Contractor shall report match funds by title each month. At the end of the contract period, the Contractor must properly match OAA funds that require a match.

2. Consumer Contributions

Consumer contributions are to be used under the following terms:

- a. The Contractor assures compliance with Section 315 of the OAA, as amended in 2020, regarding consumer contributions;
- b. Voluntary contributions are not to be used for cost sharing or matching;
- c. Voluntary contributions are to be used only to expand services; and
- d. Accumulated voluntary contributions are to be used prior to requesting federal reimbursement.

3. Use of Service Dollars and Management of the Assessed Priority Consumer List

The Contractor is expected to spend all federal, state, and other funds provided by the Department for the purpose specified in this contract. For each program managed by the Contractor, the Contractor must manage the service dollars in such a manner as to avoid having a wait list and a surplus of funds at the end of the contract period. If the Department determines that the Contractor is not spending service funds accordingly, the Department may transfer funds to other AAAs during the contract period and/or adjust subsequent funding allocations as allowable under state and federal law.

4. Title III Funds

The Contractor assures compliance with Section 306 of the OAA, as amended in 2020, and will not use funds received under Title III to pay any part of a cost (including an administrative cost) incurred by the Contractor to maintain a contractual or commercial relationship that is not carried out to implement Title III.

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5. Carry Forward Funds

Carry forward funds must be identified on Attachment XIV, Computation of Carry Forward and Over-Advance OAA Title III, and submitted with the Closeout Report due to the Department no later than March 1, 2026. Requests for carry forward funds must be justified by the Contractor and approved by the Department. All OAA carry forward funds must be budgeted in the same title as originally awarded.

C. Remedies for Nonconforming Services

1. The Contractor shall ensure that all goods and/or services provided under this contract are delivered timely, completely, and commensurate with required standards of quality. Such goods and/or services will only be delivered to eligible program participants.
2. If the Contractor fails to meet the prescribed quality standards for services, such services will not be reimbursed under this contract. In addition, any nonconforming goods (including home delivered meals) and/or services not meeting such standards will not be reimbursed under this contract. The Contractor's signature on the Request for Payment Form certifies maintenance of supporting documentation and acknowledgement that the Contractor shall solely bear the costs associated with preparing or providing nonconforming goods and/or services. The Department requires immediate notice of any significant and/or systemic infractions that compromise the quality, security, or continuity of services to clients.

D. Incident Reporting

The Contractor shall notify the Department immediately but no later than forty-eight (48) hours from the Contractor's awareness or discovery of changes that may materially affect the Contractor or any subcontractor's ability to perform the services required to be performed under this contract. Such notice shall be made orally to the DOEA Contract Manager (by telephone) with an email to immediately follow, including the Contractor's plan for provision of services required by contract. This plan must detail the Contractor's anticipated plan for ensuring a continuity in services for each client impacted by and for the duration of the incident. Following submission of the plan, the Contractor's is expected to provide the Department updates in a frequency determined by the Department as appropriate until the incident is resolved.

E. Volunteers

The Contractor shall ensure the use of trained volunteers in providing direct care services delivered to older individuals and those individuals with disabilities needing such services. If possible, the Contractor shall work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as the Senior Community Service Employment Program or organizations carrying out federal service programs administered by the Corporation for National and Community Service).

F. Enforcement

1. In accordance with Section 430.04(2), F.S., the Department shall rescind designation of an area agency on aging or take intermediate measures against the Contractor, including corrective action, unannounced special monitoring, temporary assumption of operation of one or more programs by the Department, placement on probationary status, imposing a moratorium on Contractor action, imposing financial penalties for nonperformance, or other administrative action pursuant to Chapter 120, F.S., if the Department finds that any of the following have occurred:
 - a. An intentional or negligent act of the Contractor has materially affected the health, welfare, or safety of clients, or substantially and negatively affected the operation of an aging services program.
 - i. Measurement:
 - 1) Intentional or repeated violations of the requirement to serve clients.
 - 2) Any other verifiable report of such actions.
 - b. The Contractor lacks financial stability sufficient to meet contractual obligations or that contractual funds have been misappropriated.
 - i. Measurement:

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- 1) Failure within the same fiscal year to pay third party short-term loans.
 - 2) An unreserved or total fund balance or retained earnings deficit for which sufficient resources are not available to cover the deficit for 2 successive years.
 - c. The Contractor has committed multiple or repeated violations of legal and/or regulatory requirements or Department standards.
 - i. Measurement:
 - 1) Achievement levels from monitoring reviews.
 - 2) Any other verifiable report or notification of such actions.
 - 3) Failure to provide timely reports or audits.
 - 4) Failure to provide access to records/documentation during a management review.
 - d. The Contractor has failed to continue the provision or expansion of services after the declaration of a state of emergency.
 - i. Measurement:
 - 1) Achievement levels from monitoring reviews.
 - 2) Any other verifiable report or notification of such action.
 - e. The Contractor has exceeded its authority or otherwise failed to adhere to the terms of this contract with the Department or has exceeded its authority or otherwise failed to adhere to the provisions specifically provided by statute or rule adopted by the Department.
 - i. Measurement:
 - 1) Achievement levels from monitoring reviews.
 - 2) Any other verifiable report or notification of such action.
 - f. The Contractor has failed to properly determine client eligibility as defined by the Department or efficiently manage program budgets.
 - i. Measurement:
 - 1) Achievement levels from monitoring reviews.
 - 2) Any other verifiable report or notification of such action.
 - g. The Contractor has failed to implement and maintain a Department-approved client grievance resolution procedure.
 - i. Measurement:
 - 1) Achievement levels for monitoring reviews.
 - 2) Any other verifiable report or notification of such action.
2. The Department may take action against the Contractor independently or concurrently if the Contractor has demonstrated a failure to adhere to the requirements of this section by:
 - a. Placement on probationary status for a specified period to address identified issues;
 - b. Financial consequences as a result of not meeting the required deliverables as specified in section III.G.;
 - c. Re-allotment of surplus funds to other planning and service areas;
 - d. Placement on appropriate corrective action plan;
 - e. Temporary assumption of agency operations and functions to implement emergency service plan;
 - f. Impose a time limited moratorium on Contractor action;
 - g. Advances as allowed under section 216.181(16)(B), F.S., may be reduced for the following year to 30 days and surpluses for redistribution examined; and/or

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- h. Unannounced special monitoring.
- 3. In making any determination under this provision the Department may rely upon findings of another state or federal agency, or other regulatory body. Any claims for damages for breach of contract are exempt from administrative proceedings and shall be brought before the appropriate entity in the venue of Leon County, Florida. In the event the Department initiates action to rescind an area agency on aging designation, the Department shall follow the procedures set forth in 42 U.S.C. §3025(b).

G. Investigation of Criminal Allegations

Any report that implies criminal intent on the part of the Contractor or any subcontractors and referred to a governmental or investigatory agency must be sent to the Department. If the Contractor has reason to believe that the allegations will be referred to the State Attorney, a law enforcement agency, the United States Attorney's office, or governmental agency, the Contractor shall notify the Inspector General at the Department immediately. A copy of all documents, reports, notes, or other written material concerning the investigation, whether in the possession of the Contractor or subcontractors, must be sent to the Department's Inspector General with a summary of the investigation and allegations.

H. Contract Modifications

The Department's Contract Manager has the authority to modify and/or extend deliverable deadlines. All deliverable extension requests must be made to the Department's Contract Manager, in writing, prior to the required deadline. All approvals for deliverable extensions must be communicated, in writing, by the Department's Contract Manager to the Contractor and are subject to the discretion of the Department's Contract Manager. The requests and the approval must occur prior to the established deadline. An e-mail writing (request and response) is considered acceptable.

I. Rate Increase Thresholds

1. For Service Provider Proposed Rate Increases up to 5%:
 - a. Service Provider rate increase requests received by the Department of Elder Affairs (DOEA) from an Area Agency on Aging (AAA) that are up to 5.0% above rate at time of contract execution are not required to be reviewed and approved by the DOEA. The AAAs shall follow their existing agency rate review and approval process which at a minimum shall include:
 - i. A detailed written justification from the Service Provider describing the reason(s) for the interim rate adjustment. This explanation shall include a detailed assessment of potential organizational and client impact. The written justification shall provide sufficient detail for the AAA to review, identifying the service or commodity component(s) that are increasing Service Provider costs.
 - ii. A current rate and a requested rate unit cost methodology. (Attachment XVII).
2. For Service Provider Proposed Rate Increases Exceeding 5%:
 - a. For Service Provider proposed rate increases of 5.01% or greater, the requirements detailed in i. and ii. above shall apply PLUS sections i., below.
 - i. Service Provider Proposed Rate Increases of 5.01% or greater must be reviewed and approved by DOEA. The AAAs should forward all such requests to their Contract Manager and provide the following additional information:
 - (1) The Service Provider must also provide in their written justification, reassurance that all other potential options to procure alternate suppliers, subcontractors, or other potential cost-efficiencies that could reduce the proposed rate increase of 5.01% or greater have been explored and rejected.
 - (2) Contract Managers may request additional information from the Service Provider via the AAA. Following DOEA's review/decision, the DOEA Contract Manager shall notify the AAA via email of approval/disapproval and the AAA shall proceed accordingly.
3. No Service Provider may add additional services or increase their rates before April 1, 2025.
4. Service Providers can not add new services unless approved in advance by the Departments Contract Manager.

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5. Note: All rate increase thresholds mentioned in the above language is cumulative from Service Providers' rates at the time of contract execution.

J. Access Control

1. The Contractor shall ensure an appropriate level of data security for the information the Contractor is collecting or using in the performance of this contract. An appropriate level of security includes approving and tracking all Contractor employees that request system or information access. Access should be requested with the principle of least privilege, requesting only access roles that are necessary. For every new eCIRTS user, a DOEA eCIRTS New User Request form is required to be submitted for eCIRTS access along with the roles they will need. To safeguard collected data, the Contractor will be responsible for requesting user access to be removed from all users that no longer have a necessity to access eCIRTS due to updated job duties, voluntarily separates, or involuntarily separates from the Contractor as soon as possible, no later than 7 calendar days after separation. As an added protection, the Contractor will receive quarterly reports to review users with access to eCIRTS and will report back any users that have been missed and needs to have their access removed. The Contractor, among other requirements, must anticipate and prepare for the loss of information processing capabilities. All data and software shall be routinely backed up to ensure recovery from losses or outages of the computer system. The security over the backed-up data is to be as stringent as the protection required of the primary systems. The Contractor shall ensure all Subcontractors maintain written procedures for computer system backup and recovery. The Contractor shall complete and sign the Certification Regarding Data Integrity Compliance for Agreements, Grants, Loans, and Cooperative Agreements prior to the execution of this contract.

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ATTACHMENT I – EXHIBIT 1**SUMMARY OF STANDARDS FOR PROFESSIONAL INFORMATION & REFERRAL
OLDER AMERICANS ACT PROGRAM**

The Department of Elder Affairs has adopted the following requirements based on the “Standards for Professional Information and Referral” developed by the Inform USA to address the unique needs of the Elder Helpline (Helpline) Information and Referral (I&R) system.

I. SERVICE DELIVERY

- A. The Service Delivery standards describe essential functions for providing information and referral services to optimize access to accurate, comprehensive, and unbiased information provided in a confidential and nonjudgmental manner. Services may be delivered in a variety of ways that support the mission of the I&R service, the accessibility requirements of the community, and the communication preferences of inquirers (for example, a combination of telephone, in-person, email, instant messaging (IM), text/SMS messaging, online chat, video relay service, social media and other methods of communication). Although the channel of service delivery may affect the nature of the interaction with inquirers, the essential elements of the I&R process remain the same.
- B. The Helpline hours of operation shall be appropriate to address community needs. At a minimum, the Helpline must maintain business hours from 8:00 a.m. to 5:00 p.m., Monday through Friday, except for state and national holiday observances. If there is a planned office closure during normal business hours, the Helpline manager must notify Department staff via email at least twenty-four (24) hours before the office closure.
 - 1. If I&R services are not available twenty-four (24) hours a day, an answering system must be in place that identifies the agency, provides hours of operation, gives the caller the option to leave a message, and gives the number of an organization that will offer service in an emergency (e.g., directing callers to dial 9-1-1 if it is an emergency).
 - 2. If the Helpline has arrangements with another agency to provide after-hours or twenty-four (24)-hour coverage, the arrangement must be documented in a formal memorandum of agreement/understanding (MOA/MOU).
- C. During hours of operation, the Helpline shall provide timely access to an I&R specialist. Recorded messages on the Helpline’s voicemail system must be retrieved from the voicemail system and responded to within 48 hours (two business days). Crisis calls (abuse, neglect, homelessness, home energy emergency, etc.), must be responded to within the next business day. Exceptions for non-crisis calls will be during periods when the Helpline is experiencing higher than normal call volume (i.e., SHINE annual enrollment period, public awareness campaigns or disaster/weather-related events).
 - 1. The Helpline must provide an option for the caller to leave a message at any time when a call is holding in queue.
 - 2. The Helpline shall ensure measures are in place to ensure calls are not held in queue beyond 20 minutes.
 - 3. The Helpline shall have a method of tracking call volume, including timeliness of response, and call abandonment.
 - 4. A record of the messages to the Helpline’s voicemail system must be maintained and shall include the date the call was received and the telephone number of the caller. It is recommended the successful or unsuccessful return call attempt be recorded in ReferNet or eCIRTS.
- D. The Helpline shall ensure I&R services are provided by trained I&R specialists. At a minimum, an I&R specialist must have a high school diploma or GED and three years of experience in I&R services, case management, call center services, or related social services work experience.
- E. The Helpline shall ensure I&R specialists:
 - 1. Have the skills to meet the needs of people who are angry and hostile, manipulative, call frequently with the same problem, or are otherwise difficult to serve; and
 - 2. Have the skills to meet the needs of older adults, adults with disabilities, and other special populations.
- F. The Helpline shall have a policy to ensure the privacy, confidentiality, and security of Helpline inquirers’ personal information and comply with all applicable state and federal law to ensure the protection of inquirer records, including the Health Insurance Portability and Accountability Act (HIPAA). Staff with access to confidential

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information shall have a signed agreement form on file that documents compliance with the confidentiality requirements of this paragraph. The identity of inquirers, their requests, and the information given to staff may be communicated to others if:

1. The release of such information is required by law or court order (e.g. reporting abuse);
 2. Careful consideration by I&R specialists of the information provided by the inquirer indicates the presence or risk of serious harm to the inquirer or another person, and the communication is limited to those persons who must be informed to reduce the risk of harm; or
 3. The inquirer has authorized another person or agency to receive the information. The inquirer specifies what information may be given and to whom.
- G.** The Helpline shall have a policy to resolve complaints from inquirers and community service agencies, including those related to potential breaches of privacy and confidentiality.
- H.** The Helpline shall provide barrier-free access to its services to individuals and groups who have special needs (e.g. access via applicable technology and/or communication methods for people with hearing or speech impairments, language access for inquirers with limited English proficiency, and access for people with disabilities. Helpline staff assisting inquirers with limited English proficiency via the language interpreter service shall document the activity in the information and referral system and submit a report of the Language Line activity to the Department by the 10th of each month.
- I.** The Helpline shall make every effort to ensure that its telephone service is accessible from all telecommunication devices within its coverage area (e.g. wireless and competitive local exchange carriers).
- J.** The Helpline shall ensure, through appropriate queue management techniques such as schedule adherence, that an appropriate number of specialists are scheduled to meet the needs of callers, that the optimum number of staff are available
- K.** at the times most inquiries occur. A minimum of 2.5 I&R staff members shall be scheduled to work at all times.
- L.** The Helpline shall utilize technology that improves access to service and enhances its ability to serve inquirers efficiently and effectively while preserving the level and quality of its core services. The main role of technology is to enhance or strengthen person-to-person contact, not to reduce or discourage such contact or make it more difficult. "Technology" includes telephone systems, telephony, telecommunications, e-mail, online chat, I&R software packages, electronic directories, and self-service mechanisms such as automated attendants/interactive voice response systems, fax-on-demand, video relay services, community kiosks, and searchable I&R databases on the internet.
1. If the Helpline service uses telephone technology which allows for the collection of inquirers' personal identifying information without his or her explicit permission, it shall develop policies and procedures that protect the inquirer's right to privacy and anonymity while preserving the I&R specialist's ability to provide for the individual's safety should personal identification become necessary.
 2. If the Helpline provides resource information through an automated attendant (a menu-driven telephone system), it shall develop procedures to encourage inquirers to transfer to a live specialist if consultation or guidance is required. Inquirers shall be able to make the transfer without having to make another telephone call.
 3. When the Helpline provides multi-channel access services simultaneously (e.g. in-person, telephone, email, live chat, SMS/text, or social media, etc.), it shall ensure I&R specialists divide their attention across all such services, as appropriate to the situation, without compromising customer service or timeliness of responses.
- M.** The Helpline provides its service at no cost to the inquirer.
- N. Standard 1: Information Provision**
1. I&R specialist establishes and maintains rapport, has one-to-one interaction with the inquirer and provides appropriate information and referrals in response to a direct request for such information. The I&R process consists of active listening and effective questioning to determine the needs of the inquirer, clarifying those needs, providing requested information and/or identifying appropriate resources. Information can range from a limited response (such as an organization's name, telephone number, and address) to a detailed description of community service system (such as explaining how intake works and required documentation by an agency),

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to help inquirers make an informed choice. In situations where services are unavailable, the I&R service engages in problem solving to help the inquirer identify alternative strategies and manage expectations.

- a. The Helpline shall ensure through training, monitoring, and coaching that I&R specialists:
 - i. Identify themselves and the Helpline according to agency guidelines.
 - ii. Establish and maintain rapport with the inquirer and use active listening skills and empathy to discern the presenting problem.
 - iii. Respond to each inquirer in a professional, nonjudgmental, culturally appropriate, and timely manner.
 - iv. Use clear language and an appropriate tone of voice and inflection to convey empathy and engagement with the inquirer's situation.
 - v. Make an accurate assessment of the inquirer's problems and needs asking relevant questions to obtain the information necessary for an accurate referral.
 - vi. Identify underlying or unstated problems, when appropriate.
 - vii. Determine any specific needs or preferences to access services (e.g. language needs, evening or weekend hours, proximity to public transportation, or disability access).;
 - viii. Clarify and confirm the inquirer's needs using techniques such as paraphrasing before offering referrals/resources;
 - ix. Provide the inquirer with various approaches to their situation that give them a range of options, as appropriate.
 - x. Explore the inquirer's own resources (e.g., friends, family, faith-based organization)
 - xi. If demographic information is being collected that is not directly relevant for an "information only" contact but is required by contract or to enhance community reports, provide an explanation to the inquirer about why the information is needed. The primary goal of data collection is to garner enough information about inquirers to help them address or resolve their problems;
 - xii. Effectively utilize the resource information system to identify resources to meet the inquirer's needs.
 - xiii. When possible and practical, provide at least three referrals to give the inquirer a choice while being careful not to overwhelm the inquirer with too many options;
 - xiv. Encourage inquirers to contact the Helpline again if needs were unmet, information was incorrect, or for future needs.
 - xv. Accurately record what occurred during the course of the inquiry, the call/contact type, and the problems and needs that were addressed for use in reports.
- b. The Helpline shall ensure that every call, including information only calls, is documented at the end of the call in the information and referral system.

O. Standard 2: Referral/Assistance and Client Advocacy

1. The Helpline shall offer referral/assistance, or client advocacy, when necessary, to ensure individuals receive the benefits and services for which they are eligible. The provision of referral/assistance services involves one-to-one interaction between an I&R specialist and an inquirer, wherein the I&R specialist determines the needs of the inquirer, identifies appropriate resources, makes referrals to organizations capable of meeting the inquirer's needs, and provides enough information about each organization to help inquirers make an informed choice about the service and resources most appropriate to meet the consumer's need. In situations where resources are unavailable, the I&R specialist shall assist the inquirer in problem-solving to identify alternative strategies and manage expectations. When necessary, the I&R specialist will actively participate in linking the inquirer to needed services.
2. Client advocacy seeks to meet the inquirer's needs without attempting to change social situations, and for purposes of these standards, does not include system advocacy or legislative advocacy (lobbying). All advocacy

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efforts are consistent with written policies established by the Area Agency on Aging (AAA) and proceed only with the permission of the inquirer.

- a. Make an accurate assessment of the inquirer's problems and needs asking relevant questions to obtain the information necessary for an accurate referral.
- b. Identify underlying or unstated problems, when appropriate.
- c. Clarify and confirm the inquirer's need(s) using techniques such as paraphrasing before offering referrals.
- d. Intervention, when necessary, on behalf of individuals to help them obtain needed services. When warranted, the I&R service makes one or more additional calls or takes other actions on the inquirer's behalf and uses an appropriate agency mechanism to ensure inquirers get the information and/or help they need. When warranted and with the inquirer's permission, the I&R specialist shall make direct contact with an agency and communicate on behalf of the inquirer through three-way calling, notify the agency of the inquirer's forthcoming contact, or schedule an appointment with the agency for the inquirer.
- e. The Helpline refers individuals to an organization that specializes in providing advocacy when the level of advocacy required by the inquirer exceeds the limits of the Helpline's advocacy policy or an effective use of its own resources.
- f. The Helpline shall have policies to ensure the privacy, confidentiality, and security of personal inquirer information; and has agreement forms that staff, visitors, and others with access to confidential information sign to document their compliance. Identifying information about inquirers, their requests and the information given to them is not communicated to others unless either:
 - i. Release of information is required by law or court order.
 - ii. Careful consideration indicates the presence or risk of serious harm to the inquirer or another person, and then communication may be only to those who must be informed in order to reduce harm or risk.
 - iii. The inquirer has given explicit permission for the information to be disclosed to another person or agency. The inquirer specifies what information may be given and to whom. This applies to individual advocacy situations as well as those involving shared case coordination.
- g. The Helpline may engage in enhancements to the initial I&R transaction such as prompting inquirers regarding their interest in additional resources, application assistance, and appointment setting. These enhancements are clear in terms of their scope and expectations.
- h. The Helpline shall have a process to resolve complaints from inquirers and community service agencies, including those related to customer satisfaction, accuracy of referrals, and potential breaches of privacy and confidentiality.
- i. Accurately record what occurred during the inquiry as well as the problems and needs that were addressed in the information and referral system for use in reports and as needed.
- j. Follow-up to determine the outcome of the referral/assistance is conducted within 14 business days for each referral when assistance and/or advocacy is provided and is conducted with the referred person and/or the resource. The referral cannot be counted as a unit of service until follow-up is complete. If follow-up is not completed on a referral, the service must be documented as an "Information" contact type.

P. Standard 3: Crisis Intervention

1. The Helpline shall be prepared to assess and meet the immediate, short-term needs of inquirers who are experiencing a crisis and contact the Helpline for assistance. Included may be individuals at risk of suicide, homicide or assault, family or friends who have experienced suicide, victims of domestic abuse or other forms of violence, elder/dependent adult abuse/neglect, sexual assault survivors, people experiencing a psychiatric emergency; people with substance use disorder(s) who are in crisis; survivors of a traumatic experience; and others in distress.
 - a. The Helpline shall have written crisis intervention procedures that include protocols for specific types of emergencies. Included shall be safety risk assessment procedures, protective measures for individuals in endangerment situations, and protocols that address inquirers who wish to remain anonymous yet require direct intervention.

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- b.** If the Helpline does not provide formal crisis intervention service, the Helpline shall have a prearranged agreement and documented protocol with an appropriate crisis center that provides formal crisis intervention service.
- c.** The Helpline shall ensure through training, monitoring, and coaching that I&R specialists have the skills to:
 - i.** Recognize when an inquirer is experiencing a crisis.
 - ii.** Determine whether the individual is in immediate danger and take appropriate steps to ensure that the inquirer is safe before continuing with an assessment.
 - iii.** Recognize the warning signs of people at imminent risk of suicide, violence, or victimization (including signs of abuse/neglect, domestic violence, and risk of homicide or self-harm) whether the risk issues are explicitly stated or implicit.
 - iv.** Recognize when an inquirer is in immediate need of intervention (e.g., when a person is in medical crisis due to a substance use disorder, has taken steps to end her or his life, is a victim of recent violence or is experiencing a psychiatric emergency).
 - v.** De-escalate and stabilize the inquirer and help him/her remain calm.
 - vi.** When necessary, follow the organization's rescue protocol for when to access 911 or other emergency personnel to request that they intervene. In these circumstances, the individual's safety overrides confidentiality concerns.
 - vii.** Keep the inquirer engaged during the contact pending referral or rescue.
- d.** In case of suspected elder abuse, the Helpline has protocols that comply with prevailing legislation regarding mandatory reporting and completes a report when required.
- e.** In situations involving suicide or homicide, the Helpline understands the circumstances under which a safety risk assessment is required and conducts an appropriate assessment when necessary. Risk assessments are documented and include a description of specific actions taken in response to the situation.
- f.** The Helpline shall have a protocol for debriefing I&R specialists following a crisis call.
- g.** In cases of domestic violence and other endangerment situations, the Helpline shall ensure that I&R specialists take special precautions to safeguard the inquirer's identity and all aspects of their interaction.
- h.** The Helpline shall use a variety of means to support its ability to connect with 911 or other emergency rescue services, including Caller ID or a call tracing arrangement with the telephone company or the identification of an IP address. At a minimum, there is a separate external telephone line that is available for initiating rescue procedures without interrupting the crisis call. I&R specialists shall follow the agency's I&R service protocol for addressing callers who wish to remain anonymous yet require rescue.
- i.** The Helpline shall ensure, when feasible, that I&R specialists connect inquirers in crisis situations to a formal crisis intervention service in the community for assistance and support once the inquirer's immediate, short-term needs have been met. The connection shall be made by direct transfer, when possible, and the I&R specialist shall follow the protocol established by the Helpline's prearranged agreement with the crisis center.
- j.** For inquirers in crisis situations who are not at imminent risk, the I&R specialist assesses their immediate, short-term needs and connects them with a crisis intervention service for ongoing assistance. The connection is made by warm transfer, when possible, and the I&R specialist follows the protocol established by agreement with the crisis service.
- k.** If possible, I&R specialist are encouraged to participate in crisis intervention professional development training to upgrade existing skills and learn new skills.
- l.** The Helpline shall record acts of crisis intervention and its outcomes for use in reports.

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Q. Standard 4: Follow-Up

1. The primary purpose of follow-up is to contact inquirers to find out if their needs were met and if not, why. The Helpline policy should require follow-up with inquirers who are at risk and/or vulnerable and in situations where the specialist believes the inquirers do not have the necessary capacity to take the needed actions to resolve their own situation. Additional assistance in locating or accessing services may be necessary. Follow-up is required for each contact type documented as a “Referral” when assistance and/or advocacy is provided and must be completed within 14 business days unless a crisis suggests a more immediate follow-up.
 - a. Examples of situations in which follow-up should normally occur include:
 - i. Vulnerable households that are without heat during winter.
 - ii. Older adults having trouble expressing their needs.
 - iii. Older adults with disabilities who have received an eviction order.
 - iv. Older adults with no health insurance who need health care.
 - v. Individuals needing emergency shelter.
 - b. The Helpline shall ensure follow-up with inquirers who are at risk or vulnerable and in situations where the I&R specialist believes the inquirer lacks the capacity to follow through to resolve the problem; If the inquirer cannot be contacted, the Helpline shall ensure follow-up with the organization to which a referral was made to determine if the individual’s need was addressed. Unsuccessful attempts to contact the inquirer shall not conclude the follow-up process and shall not be counted as a completed referral.
 - c. During follow-up, if it is determined that the inquirer has not received services or the need has not been met, the I&R specialist shall determine whether there is a continued need and make additional appropriate referrals or engage in enhanced problem solving. The I&R specialist shall also determine whether the inquirer has additional new needs and makes appropriate referrals prior to completing the contact.
 - d. The I&R specialist shall document the follow-up results (whether service was received or there was an unmet need) in information and referral system for use in reports and as needed. Information gathered during the follow-up process shall be used to evaluate the effectiveness of existing community service providers and to identify gaps in community services.

R. Standard 5: Independent Access to Resource Information

1. The Helpline shall provide community resource information in a variety of ways to facilitate independent access for the public and other human services professionals. These options provide additional choices for inquirers and complement the alternative of one-to-one interaction with an I&R specialist.
 - a. The Helpline offers multiple options for the public by making all or a majority of its resource database available on the Internet at no cost. The elements that increase the effectiveness of a publicly accessible resource database include:
 - i. An easy-to-remember URL;
 - ii. A prominently displayed search button;
 - iii. A search page that is clean, well-organized, and easy to navigate;
 - iv. A keyword search window, that employs search logic which produces an inclusive search results list.
 - v. Keyword searches that include partial and full-word matching. Entered text must appear at the beginning of words for the term to be retrieved. For example, a search on “aging” would ignore words like “managing”;
 - vi. The ability to search agency, site, program, and AKA names.
 - vii. The ability to filter results by geographic location/area served; and
 - viii. A cleanly designed search results list that includes the data elements that are most important in providing inquirers with the details they need to make informed choices about their options.

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- ix. Recognized best practices for accessibility for persons with disabilities (such as JAWS readers, font sizes, Section 508 Standards, etc.).
- b. If the Helpline provides a mechanism for independent public access to community resource information, the Helpline shall ensure that it includes information about how to connect with an I&R specialist if consultation and guidance are required (for example, the ability to press “0” at any time when listening to a recorded message or to engage in instant messaging (IM) or chat when searching for resources on a website).

S. Standard 6: Service Delivery Data Collection, Analysis and Reporting

1. The delivery of I&R services generates valuable information about the problems/needs of a community and the availability of resources to meet those needs. The Helpline shall collect, analyze, and report insightful data concerning inquirers and their needs in ways that are useful to the Helpline and its community partners. The Helpline shall use a secure, confidential system for collecting and organizing inquirer data collection that provides a basis for describing requests for services and unmet needs, identifying service gaps, and informing decisions about the scope of the resource database. Inquirer data includes information gathered during the original contact, follow-up, and customer satisfaction/quality assurance calls.
2. Data collected for I&R service analysis and reporting purposes are based on Helpline policies and local, state, and/or national/federal requirements.
 - a. The Helpline shall ensure that inquirer data is made available in aggregate form to protect the confidentiality of individual inquirers.
 - b. The Helpline shall maintain documentation on all inquiries, has a defined set of inquirer data elements that are used for reporting purposes and recognizes that inquirers have the right to withhold information.
 - c. The data collected provides enough information about inquirer needs, whether gathered through the original contact, during follow-up or via customer satisfaction survey/quality assurance surveys to identify:
 - i. Referral patterns include information on aggregate problems/needs.
 - ii. Service requests for specific programs and organizations.
 - iii. Met and unmet needs.
 - iv. Trends in community service provision and/or gaps in service.
 - v. Inquirer demographic data and demographic profiles.
 - d. The Helpline may use data collection and analysis strategies that employ sampling techniques. Sample size should also reflect the confidence level in the data presented. The chart below illustrates a range of appropriate sample size with such random samples gathered on a quarterly or monthly basis.

Call Center Annual Call Volume	Required completed samples with a 95% confidence level and a 5% margin of error.	Required completed samples with a 95% confidence level and a 3% margin of error.
5,000	357	880
10,000	370	965
30,000	380	1,031

- e. The Helpline shall ensure that inquirer data collection and reporting activities facilitate the analysis needed to support:
 - i. The human service needs of inquirers;
 - ii. Outreach to diverse communities
 - iii. Community needs assessments;
 - iv. Community planning;

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- v.** Allocation of funding; and
- vi.** System Advocacy
- f.** The Helpline shall ensure the data collected provides enough information about inquirer needs to identify the following:
 - i.** Service requests;
 - ii.** Met and unmet needs (gathered through the original contact, follow-up, and customer satisfaction/quality assurance surveys);
 - iii.** Trends in community service provision and/or gaps in service;
 - iv.** Demographic data; and
 - v.** Profiles of inquirers served (aggregate data only).
- g.** The data collected for reporting purposes shall include:
 - i.** The total number of incoming contacts/inquiries by phone (incoming calls) answered by the I&R specialist. These can be transaction calls (calls in which problems or needs are addressed and for each problem, the type of service provided by the I&R specialist (information only, referral, referral-advocacy, referral-crisis, and crisis intervention services); or non-transaction calls (calls answered by the I&R specialist that are hang-ups, wrong numbers, incoming administrative or personal calls, or other calls in which there is no productive conversation between the I&R specialist and the inquirer and no assistance is provided).
 - ii.** The total number of I&R contacts/inquiries from calls and other sources recorded in the I&R system in which inquirer problems or needs are addressed. Included are:
 - (1)** Transaction calls;
 - (2)** Outgoing calls;
 - (3)** Face-to-face contacts (walk-ins or I&R interactions in other settings such as community facilities);
 - (4)** Email contacts;
 - (5)** Voicemail contact responses;
 - (6)** Social media interactions;
 - (7)** Text/SMS messaging contacts;
 - (8)** Online chat contacts;
 - (9)** Video relay/chat contacts; and
 - (10)** Regular mail contacts.
 - iii.** The total number and types of problems/needs presented by inquirers.
 - iv.** The geographic and demographic profiles of inquirers (i.e., who is calling and where they are calling from).
 - v.** The programs that received referrals.
- h.** The Helpline may also collect information about ancillary I&R activities, in addition to I&R inquiries, however, that data should not be added to the overall contact/inquiry total. Included are:
 - i.** Website visitor activity (e.g., total visits, unique visitors, individual page visits, searches conducted);
 - ii.** People accessing recorded information;
 - iii.** Social media postings;
 - iv.** Outreach presentations;

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- v. Brochures and/or other publications distributed;
- vi. Outgoing advocacy calls;
- vii. Outgoing customer satisfaction/quality assurance calls;
- viii. Outgoing follow-up calls;
- ix. Outgoing calls to verify resource information; and
- x. Community problems/needs reporting.
- i. The reports generated by the Helpline shall include the following:
 - i. Total number of inquiries.
 - ii. A total number of individuals served.
 - iii. Total number and types of problems/needs.
 - iv. The number and/or percentage of inquiries by call type (dispositions) such as:
 - (1) Information only.
 - (2) Referral/Assistance.
 - (3) Crisis intervention.
 - (4) Advocacy.
 - v. Inquiries are recorded as;
 - (1) Met needs; or
 - (2) Unmet needs.
 - vi. The organizations and programs to which referrals were made.
 - vii. Follow-up results.
 - viii. Trends in community service provision/gaps in service.
 - ix. Geographic and other demographic information about inquirers in aggregate form (i.e., who people are and where they are calling from).
- j. The Helpline may also report, as necessary, on key performance indicators derived from its quality assurance and related activities such as average times of transactions, results of internal and independent call monitoring processes, average answering times, unmet demand (such as abandoned calls), complaints and commendations, as well as case stories that illustrate recent examples of situations and outcomes secured by the I&R service.

II. RESOURCE DATABASE

- A. The Resource Database standards require that the Helpline develop, maintain, use, and disseminate an accurate up-to-date resource database that contains information about available community resources including details about the services provided and the conditions under which they are available. The resource database supports the inquirer's right to accurate, consistent, comprehensive, and unbiased information and the ability of the I&R service to be a non-partisan, non-ideological, and impartial information source for available nonprofit, government, and for-profit services that meet the organization's inclusion/exclusion criteria. The resource database is used internally by community resource specialists to identify resources for inquirers and is maintained by resource database curators. Resource data is also available externally to other human services organizations and the public via an online database that is structured to make searching as intuitive and user-friendly as possible.

B. Standard 7: Inclusion/Exclusion Criteria

- 1. The inclusion or exclusion criteria provides the parameters for human services agencies and programs in the resource database. The criteria address the human services needs of all groups in the community served by the I&R service, may include government, nonprofit, and relevant for-profit organizations as well as entities such

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as support groups that may not be incorporated, and are uniformly applied and publicly available so that all users are aware of the scope and limitations of the database.

- a. The inclusion/exclusion criteria document the contents of the resource database. The criteria address the human services needs of all groups in the community served by the Helpline; and the available resources which may include government, non- profit and relevant for-profit organizations as well as entities such as support groups that may not be incorporated.
- b. The inclusion/exclusion criteria shall be consistent with and support the ability of the I&R service to maintain the resource database in accordance with the quality requirements of the Inform USA standards.
- c. The Helpline shall not charge a fee for the inclusion of any organization in its public resource database.
- d. The inclusion/exclusion document includes an appeal process for organizations seeking clarification on either the document itself of the application of the criteria.
- e. The Helpline shall ensure the inclusion/exclusion criteria is reviewed and updated, at a minimum, every three years to ensure that it continues to meet the changing needs of the community.

C. Standard 8: Data Structure and Data Elements

1. The resource database contains data elements that provide information about organizations that meet criteria for inclusion, the services provided by each organization, and the locations (sites) where those services are available. Each record shall contain all mandatory data elements, where applicable.
2. Mandatory and Recommended Data Elements: The chart below lists data elements for the Agency/Main Site portion of an organizational record, Site data elements, where additional sites exist, and the Services/Programs provided by the organization. The Mandatory or Recommended status of each data element is also indicated. Note that “Mandatory” means that a data element must be entered if that information is available (e.g., if documentation is needed to apply for a service, then that information must be added. If no documentation is required, then the field can be left empty). In the chart below “X” is a designation for “non-applicable.”

Inform USA Data Elements	Inform USA Data Record Category		
	Agency	Site	Service/Program
Name	Mandatory	Mandatory	Mandatory
AKA (Also Known As) Name(s)	Mandatory	Mandatory	Mandatory
Legal Status	Mandatory	X	X
Federal Employer Identification Number (EIN/FEIN)	Recommended	X	X
Licenses or Accreditation	Recommended	Recommended	Recommended
Street/Physical Address(es)	Recommended	Mandatory	X
Mailing Address(es)	Recommended	Mandatory	X
Phone Number(s) and Types	Mandatory	Mandatory	Mandatory
Website URL(s) including social media	Recommended	Recommended	Recommended
Email Address(es)	Recommended	Recommended	Recommended
Name and Title of Director/Manager	Recommended	Recommended	Recommended
Description	Mandatory	Recommended	Mandatory
Days/Hours of Operation	Mandatory	Recommended	Mandatory
Access for People with Disabilities	Recommended	Recommended	X
Travel Information	X	Recommended	X

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Eligibility	X	X	Mandatory
Geographic Area Served	X	Recommended	Recommended
Languages Consistently Available	X	Recommended	Recommended
Documents Required	X	X	Recommended
Application/Intake Process	X	X	Recommended
Fees/Payment Options	X	X	Mandatory
Taxonomy Term(s) for Services/Targets	Recommended	Recommended	Mandatory

3. Database Record Administration Data Elements: Data elements that relate to the database record itself and are purely administrative in nature are included in a separate table. Most are automatically assigned by the system, not maintained by resource specialists, and not shown when records are published. The exception is the date of last formal verification which many Helplines choose to include.

Inform USA Data Elements: Record Administration	
Unique ID Number	Mandatory
Record Ownership Code	Mandatory
Date of Last Annual Verification	Mandatory
Date of Last Interim Change	Recommended
Contact for Last Change	Mandatory
Resource Specialist for Last Change	Mandatory
Record Status (Active/Inactive)	Mandatory

D. Standard 9: Classification System (Taxonomy)

1. The Helpline service uses the 211 LA County Taxonomy of Human Services to index and facilitate retrieval of resource information, increase the reliability of planning data, make evaluation processes consistent and reliable, and facilitate state and national aggregations and comparisons data. Additional classification structures such as keywords, if used, are connected to the Taxonomy rather than functioning as independent indexing systems.
 - a. The structure and contents of the Taxonomy are constantly changing in response to changes in the services and target terms it encompasses. The Helpline has procedures in place to update and integrate Taxonomy additions and changes on a regular schedule according to their policies.

E. Standard 10: Content Management and Indexing

1. The Helpline shall ensure through training, database management procedures, and supervision that a resource database curators/specialist organizes information about human services into database records that accurately and concisely reflect the agency, its location and its services/programs; index the services provided by each organization using the 211 LA County Taxonomy of Human Services by consistently applied practices; and assign other search methods or filters in a way that accurately reflects the conditions under which services are available.
 - a. The Helpline shall use I&R software that supports the Inform USA Resource Database standards.
 - i. Information in the resource database is accessible in ways that support the I&R service delivery; and
 - ii. The software module used by I&R specialists allows for search and retrieval by:

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- (1) Organization, site and program name, and related AKAs;
 - (2) Type of services provided (using Taxonomy terms including use references and see also references);
 - (3) Target population served, where applicable (using Taxonomy target terms); and
 - (4) Area served.
2. The Helpline shall ensure through training, database audits, and coaching that resource database curators/specialists understands:
 - a. The human service delivery system including the sectors it comprises.
 - b. The differences between the public and private sectors.
 - c. How government, nonprofit, and for-profit organizations are organized and funded.
 - d. The major types of service providers in their community.
 - e. The broad range of programs and services they provide.
 - f. How these organizations and the sectors they represent relate to one another and the people they serve.
3. The Helpline shall ensure documented procedures are in place for identifying new resources, acquiring information about them and, upon inclusion in the database, verification by the organization.
4. The Helpline shall develop and use a standardized survey instrument to collect consistent information about new organizations considered for inclusion in the resource database.
5. Resource database curators/specialist acquire the information they need to develop new database records or update current ones. They:
 - a. Evaluate to determine whether new organizations meet established inclusion criteria, correctly apply the criteria to determine whether they should be included and follow approved notification procedures when an organization does not meet the criteria.
 - b. Appropriately use material submitted by the organization or gathered elsewhere (e.g., website, questionnaire, social media scans, pamphlets, newspaper articles) to develop an understanding of the resource, its locations, and its services/programs; document source material that is not in printed form; and verify all information with the organization before incorporating it into an entry.
 - c. Identify the appropriate contact when an interview is required, ask clarifying questions concisely, and document key answers.
6. Organizations that do not respond after multiple attempts but cannot be deleted because they offer critical services, shall be updated via alternative methods (phone, website, or site visits). However, documentation on how the update was obtained and the reason for the decision not to delete the record are required.
 - a. If updated by telephone, the name of the person who confirmed the information and the date shall be recorded.
 - b. If by website, information that the update was verified via the Internet and the date are documented.
 - c. If by site visit, the names of the people visited, and the date shall be recorded.
7. Once the I&R service is satisfied that it has obtained the best information possible and has documented how and when the update was performed as well as the reason for the decision not to delete the record, it is permissible to mark the agency as having received its annual review.
8. The Helpline shall ensure the update form, or the accompanying cover letter, has a statement that the Helpline reserves the right to edit information for brevity, clarity, and content, and to publish the information in a variety of media, subject to confidentiality issues.

F. Standard 11: Database Quality Assurance

1. The quality assurance review process ensures that information in the resource database is accurate and complete.

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- a. The Helpline shall have a documented process for verifying information in the resource database that involves multiple attempts to achieve 95% verification rate within a 12-month cycle. Information that cannot be verified may be considered for removal from the database.
- b. The Helpline shall be able to generate a report that lists resource database records according to the date of last formal update. The report shall be run at least quarterly and, if more than 50% of records are out of date, the Helpline shall create a plan to bring the database up to date.
- c. The Helpline shall ensure the resource department provides feedback to other I&R staff regarding important changes that have been made in the database.

G. Standard 12: Resource Database Data Collection, Analysis and Reporting

1. The resource database is the primary source of information about the programs and services available to the community served. The Helpline service collects, analyzes, and reports information that describes the types of services available, the organizations that provide them, and the specific areas in which services are available or unavailable in ways that are useful to themselves and community partners. An analysis of the resource database maintenance process also reveals information that can enhance both the quality and productivity of each I&R service (for example, by identifying issues for staff training).

H. Standard 13: Cooperative Relationships within the I&R System

1. In communities that have comprehensive and specialized I&R providers, the Helpline shall develop cooperative and respectful working relationships to build a coordinated I&R system that ensures broad access to I&R services, maximizes the utilization of existing I&R resources, avoids duplication of effort and encourages seamless access to community resource information.
 - a. It is recommended that the Helpline participates in ongoing cooperative program planning and development activities that take into consideration community needs, existing resources, and the activities of other I&R services.
 - i. Participates in efforts to identify community I&R needs.
 - ii. Maintains current information about other I&R services and their activities.
 - iii. Develops priorities for I&R program development.
 - iv. Participates in existing cooperative I&R efforts.
 - v. Becomes a catalyst for new cooperative service arrangements.
 - vi. Participates in decision-making that addresses system-wide I&R issues.
 - b. The Helpline shall work cooperatively with other programs in the area to avoid duplication of effort, encourage service integration, and ensure that information and referral are broadly available to all inquirers. Comprehensive and specialized I&R services whose service areas overlap, develop, and define their working relationships and document them in written form (such as a Memorandum of Understanding or MOU). The objectives are to ensure that people needing services have access to the most appropriate I&R service to address system-wide needs. The agreements negotiated by agency leadership support: Regular cooperation ensures that there is an immediate and effective response to the following:
 - i. Sudden changes in community conditions (e.g. community wide disaster) that may require special outreach efforts or other forms of collaborative response;
 - ii. Changes in legislation; and
 - iii. New information related to the area served that needs to be incorporated.

I. Standard 14: Cooperative Relationships with Service Providers

1. The Helpline shall develop cooperative working relationships with local human services providers (e.g. food pantries and local homeless shelters) and larger service systems (e.g., those serving individuals with mental health and substance use disorder issues).to help advance an integrated service delivery system that ensures broad access to community services, maximizes the use of existing resources, and facilitates the ability of people who need services to easily find the most appropriate provider. I&R services with broader geographic reach

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(e.g. statewide, province-wide, regional, or national level programs) strive to develop similar working relationships within the area they serve.

- a. The Helpline is encouraged to explore opportunities for collaborative service delivery with service providers,
- b. The Helpline shall work cooperatively with service providers to address issues that have a critical impact on the community such as disaster relief and recovery, homelessness, health care service delivery, and one-stop colocated human services.
- c. The Helpline shall collaborate with other service providers in areas such as cross-training, awareness and outreach, knowledge sharing, and other activities that mutually benefit service providers and their clients.

III. DISASTER PREPAREDNESS:

- A. The Helpline shall assess its role in meeting the needs of the community during times of disaster, which may vary depending on the population served, or the phase of the disaster (i.e., preparedness, response, relief, and recovery). The Helpline shall be prepared to assess and provide referrals for inquirers who are experiencing a crisis due to a disaster, or who want to offer assistance and contact the Helpline for a means to do so. Preparation includes the development of emergency operations and continuity of operations plan that enables the I&R service to continue to provide services during and after a disaster.

B. Standard 15: Emergency Operations and Business Contingency Plan

1. The Helpline shall have a written disaster plan that specifically addresses incidents common to the area, and comprehensively prepare staff for most typical emergencies. There are two main components of effective disaster planning:
 - a. An emergency operations component that defines what constitutes a disaster as well as the organization's disaster preparations and response procedures, articulating both internal and external stakeholder expectations, and describes the steps the organization must take to meet the needs of the community in the aftermath of an event; and
 - b. A Continuity of Operations Plan (COOP) component that references emergency preparedness and mitigation activities, such as structural alterations and changes in business operations, and delineates the steps to be taken before, during, and after an emergency to prevent or minimize interruptions in business operations and ensure long-term recovery.
2. The Helpline shall have emergency operation procedures in place for maintaining service delivery during and after an emergency that may occur in the same area in which the program is located or in an area that impacts service delivery. The written procedures related to:
 - a. Continuity of mission-critical functions including:
 - i. Notification of activation of the disaster plan.
 - ii. Personnel Coordination
 - (1) Designation of key staff;
 - (2) Delegations of authority;
 - (3) Order of succession;
 - (4) Expectations of personnel during duty and non-duty hours.
 - iii. Designation of mission-essential functions;
 - iv. Designation of alternative facilities;
 - v. Contact information for critical vendors and infrastructure (e.g. telephone service provider, building management) Continuity of communications among staff before, during, and after a disaster;
 - vi. Securing access to vital records and databases; and
 - vii. Plans for reconstitution and termination of emergency measures.

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- b. Procedures shall include response to various kinds of that address specific types of emergencies including power outages, fires, medical emergencies, bomb threats, radiological threats, workplace violence, and other incidents that may require different forms of response (e.g. duck, cover, and hold during an earthquake or sheltering in place during a radiological emergency). Procedures for contacting emergency personnel shall be included.
 - i. Emergency evacuation of the facility, including:
 - (1) Designated exits.
 - (2) Designated external personnel meeting or assembly area.
 - (3) Procedures for ensuring staff and visitors have left the building.
 - (4) Damage assessment.
 - (5) Gas, electricity, and water shut-off instructions.
 - (6) Procedures for assisting staff and visitors with a disability leave the building.
 - ii. Staff training and preparation:
 - (1) Equipment needed for staff and volunteers to maintain service delivery (e.g. go-kits/bags for remote or alternate locations).
 - (2) Periodic drills at a minimum annually, allow staff s to practice emergency procedures.
 - iii. Post-emergency activities such as:
 - (1) Debriefing staff
 - (2) Addressing mental health fatigue and burn-out.
 - (3) Documenting emergency plan challenges and how to improve them going forward (e.g. after-action review).
 - (4) Reporting the volume of inquirer requests, and the met and unmet needs to emergency planners and the community.
- 3. The Helpline shall have written procedures for emergency evacuation of the facility following a disaster that impacts the immediate area surrounding the facility and potentially threatens staff safety. Procedures shall include special arrangements for helping staff or visitors with a disability leave the building.
- 4. The Helpline shall have written procedures for maintaining service delivery (e.g. answering inquiries and continuing to update community resources) during and after an emergency, including relocation or alternative modes of service delivery. If the I&R service plans to relocate in the event of loss of facilities, alternative sites will be identified.
- 5. The Helpline supports and encourages all staff to develop emergency plans for their own homes and families that allow them to better fulfill their agency roles in an emergency, secure in the knowledge that their families are properly prepared.

C. Standard 16: Relationships with Emergency and Relief Operations

- 1. The Helpline shall participate in ongoing cooperative disaster response planning in their service area and establish relationships, as necessary, within the community's disaster services network including a formal role within the community's emergency preparedness and response network.
- 2. The Helpline shall ensure understanding of the command-and-control structure within its jurisdiction (i.e. the responsibilities and authority of officials at city, county, state/provincial, and federal levels) and its role and that of other organizations in the response, relief, and recovery phases of a disaster.
- 3. The Helpline shall ensure active participation in community meetings that address plans for disaster preparedness, mitigation, response, relief, and recovery.

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D. Standard 17: Disaster Resources

1. The Helpline shall develop, maintain, and/or use an accurate, up-to-date computerized resource database containing information about available community resources that provide services in times of disaster. Database records shall include descriptions of the services organizations provide and the conditions under which services are available and shall be indexed and accessed using the 211 LA County Taxonomy of Human Services and complying with resource database standards.
2. The Helpline shall ensure the resource database includes information about permanent local, state, and federal disaster-related resources.
3. The Helpline shall also include information about organizations and services that have no formal role in emergency response but emerge in the context of a particular disaster. The I&R service may monitor social media and mass media for information about new resources and changing situations. The I&R service verifies all information before sharing. A streamlined verification process, if used, must still provide a sufficient level of data validation to ensure accuracy.
4. The Helpline shall update the disaster resources annually, immediately prior to an anticipated disaster and throughout the response, relief, and recovery periods.
5. The Helpline shall have an alternative means for allowing staff to access disaster resources if computerized access is unavailable.

E. Standard 18: Disaster-Related I&R Service Delivery

1. The Helpline shall provide information and referral services to the community before, during (when appropriate) and following a disaster or other emergency. This service shall include assessing the needs of the inquirer, evaluating appropriate resources, indicating organizations capable of meeting those needs, and helping inquirers for whom services are unavailable by locating alternative resources and actively participating in linking inquirers to needed services or volunteer opportunities.
2. The Helpline shall ensure adequate staff to meet potential increases in inquirer contacts and needs.
3. The Helpline shall have in place mutual assistance agreements with other I&R services that include provisions for relocation of staff and/or redirection of calls.
4. The Helpline shall have a written protocol and training for staff who are assigned to provide information and referral at local assistance centers or other off-site locations.
5. The Helpline shall ensure I&R specialists have the skills to respond effectively to people in crisis, work cooperatively with other organizations, remain flexible in a rapidly changing environment, are willing to work under adverse conditions (e.g. long hours or uncomfortable surroundings), are aware of their own stress level and coping mechanisms, respond appropriately in face-to-face communications, and work within boundaries of their I&R role.
6. The Helpline shall ensure I&R specialists are knowledgeable about the government emergency response service delivery system, the types of services people typically need before, during, and following a disaster including organizations that generally provide such services in disaster situations; organizations that may be closed or otherwise unable to deliver services due to an emergency (e.g. government offices and courts); atypical services people may need to access (e.g. open hardware stores and functioning ATM machines).
7. It is recommended the Helpline has a plan for promoting mental health and wellness practices for all staff working in disaster situations, including the provision of disaster stress debriefing.

F. Standard 19: Disaster-Related Data Collection/Reports

1. The Helpline shall track inquirer requests for service and referrals, collect demographic information from inquirers, and produce reports regarding requests for disaster-related services and referral activity.
2. The Helpline shall collect and organize inquirer data to support appropriate referrals, describe requests for disaster-related services and identify gaps and overlaps in service.
3. Following all emergencies that necessitate implementation of the provisions of the Disaster Preparedness standards, the Helpline shall produce an after-action report that documents the special activities of the agency

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with a focus on what worked well and what needs to be improved through revisions of the agency's disaster plan and/or additional training or staff.

G. Standard 20: Disaster-Related Technology Requirements

1. The Helpline shall have technology in place that enables the organization to maintain service delivery during times of disaster or a localized emergency.
2. As part of the organization's emergency operations and continuity plan, the Helpline shall have the technical ability to direct calls to another location (e.g., cell phones, home phones, or to another organization).
3. The Helpline shall ensure regular and emergency methods of communication (via email, instant messaging, text/SMS messaging, satellite phones or mobile devices) between staff and management for use during, internally, for after-hours contacts, and when necessary for pre-and post-disaster events.
4. The Helpline shall establish relationships with its key vendors (e.g., telephone service, internet service, website hosting vendor, and software vendor) to ensure that the organization is given high priority for continued service in times of disaster.

H. Standard 21: Disaster Training and Exercise

1. The Helpline shall ensure through training, monitoring, and coaching that staff are knowledgeable about emergency operations and business continuity expectations.
2. It is recommended that the Helpline actively participate in community disaster exercises to test the Helpline's emergency operations plan.
3. The Helpline shall provide general training for staff that addresses the specific types of disasters common to the area, the Helpline's role, and mission in times of disaster, the phases of disaster, federal, state/provincial, and local response plans and resources, and other topics that will help prepare staff for an emergency and ensure that they understand their Helpline's commitments.

IV. ORGANIZATIONAL EFFECTIVENESS

- A.** The Organizational Effectiveness standards describe the governance and operational structure the Helpline needs to fulfill its mission, including development of policies and procedures.

B. Standard 22: Governance and Oversight

1. The Helpline shall operate under the auspices of the AAA, which is governed by representatives of the diverse interest of the community. The organization's governance and operational structure shall enable the Helpline to fulfill its mission.
2. The governing body shall oversee implementation of program goals and objectives to ensure quality of service and sustainability of the AAA and the Helpline. The governing body (Board of Directors), at a minimum, shall:
 - a. Ensure that the Helpline has an adequate number of staff to meet key performance indicators. and a program manager who is accountable for the operation of the Helpline;
 - b. Assist in procuring financial and technical assistance to sustain the I&R service;
 - c. Awareness and promotion of the Helpline system throughout the community ensuring appropriate publicity, public relations, and outreach.
3. The Helpline shall formally adopt, date, and regularly review written policies that clearly articulate the general principles by which the Helpline is managed. The Helpline shall ensure that organizational policies are available to all employees and that they include employee and hiring policies and procedures.
4. The Helpline shall have a formal process for registering and attempting to resolve complaints from inquirers, staff members, and the community, and shall provide protections for whistleblowers.
5. The AAA and Helpline shall have a Code of Ethics that establishes fundamental values and professional standards of conduct for staff in their relationships with their colleagues, their employers, the people they serve, the human service professionals with whom they interact, and the community.

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6. The AAA and Helpline shall have a statement approved by the organization's governing body prohibiting discrimination in all its forms and documenting its intention to comply with all laws, orders, and regulations addressing this issue.
7. The Helpline shall provide accessible space and equipment sufficient to ensure confidential interviewing in order for staff to effectively perform their duties.

C. Standard 23: Technology

1. The Helpline shall use technology that supports the ability of staff to meet operational goals, improves access, accommodate the communications preferences of inquirers, remove barriers to information, and overall assure a positive client experience. Technology may include telephone and telecommunications systems (such as ACDs), telecommunications, computer systems and software applications, assistive technology for people with disabilities, instant messaging, text/SMS messaging, online chat, video relay, social media, and self-service mechanisms such as automated attendant/interactive voice response systems, community kiosks and searchable I&R databases on the Internet.
2. The Helpline shall evaluate and test new methods of access and technical advances before implementation to ensure that service delivery is enhanced, and the privacy and confidentiality of inquirers are protected.
3. The I&R service ensures that its public website and searchable online resource database and/or mobile app is accessible to all individuals including people with disabilities.
4. The Helpline shall also ensure that employees with disabilities and the public have access to I&R software with reasonable accommodations including features such as speech to text, text to speech, captioning, audio description, and other types of assistive technology.
5. The Helpline shall have policies and procedures that protect the inquirer's right to privacy and anonymity while preserving the I&R specialist's ability to provide for the individual's safety should personal identification become necessary.
6. The Helpline shall have access to professionals with technical expertise to appropriately maintain all technology and that provisions are in place to ensure a priority response to any breakdowns in key infrastructure.

D. Standard 24: Personnel Management

1. The I&R service uses a person-centered approach to personnel management based on policies, procedures, and tools that facilitate service continuity, quality, and consistency. Key elements include ensuring that staffing levels are based on demand and an executive team that ensures positive and healthy relationships throughout all levels of the organization.
2. The Helpline shall have up-to-date job descriptions for all employees and volunteers that outline duties, responsibilities, essential job functions, and lines of accountability. The job descriptions must be reviewed every two years.
3. The Helpline shall recruit and hire qualified staff who exhibit competent, ethical behavior, compatibility with organizational values, a positive and caring attitude, and reflect the community served.
4. The Helpline shall provide ongoing supervision and annual evaluation of employees and volunteers by qualified I&R managers, using standardized observation and performance appraisal forms. Performance problems shall be identified, documented, and addressed in an individual performance improvement plan. Staff evaluations shall address specific responsibilities and job functions outlined in individual job descriptions. Quality indicators for the Helpline may include the following:
 - a. Call Monitoring/Remote Listening: Live or recorded calls that are randomly selected for review and feedback on a regular basis.
 - b. Secret Shopper Calls: Sometimes known as mystery calls, these are calls conducted by staff or a designated third party without the knowledge of the I&R specialist handling the call. They allow for the "real feeling" of a typical call (including the voice messaging in queue) to be experienced in the same way as a typical client. The results of these calls can be scored in the same manner as other monitored interactions.
 - c. Mentoring/Coaching: The use of individual sessions, team discussions, role playing, and other techniques to mentor and coach I&R specialist to ensure quality service delivery.

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- d. Call Management System Reports, Measures and Metrics: The call management component of the telephone system produces weekly and monthly reports that provide data on the following items which may be analyzed to assess individual staff and Helpline efficiency and productivity:
 - i. Calls received;
 - ii. Calls answered;
 - iii. Calls refused; and
 - iv. Average call handling time.
 - e. Case Examples: Examples of calls submitted monthly by an I&R specialist that illustrate their call handling techniques. A case example is a written, detailed analysis of how an information and referral calls was handled. The components of a case example include the following:
 - i. Demographic Information (non-identifying name of I&R specialist, date of call, language of call, subject, line of service (e.g. 211, victim support line).
 - ii. Presenting situation/problem.
 - iii. Assessment.
 - iv. Actions/referrals provided.
 - v. Follow-up/advocacy if appropriate.
 - f. Complaints and commendations an I&R specialist has received.
5. If the Helpline permit staff to work off-site, the Helpline must ensure the security and confidentiality of inquirer data and provides tools and technology to support the ability of staff and volunteers to work remotely. When community resource specialists are working off-site, procedures shall be in place to ensure that there is no discernible difference in the quality of service. Personnel procedures and training opportunities are consistent with those available to on-site staff and volunteers. Remote I&R service delivery requirements include provisions for staff to:
- a. Make three-way calls to connect inquirers to external resources including access to a language interpreter.
 - b. Contact emergency services while maintaining a connection with the inquirer.
 - c. Work in a distraction-free environment.
 - d. Access supervisory assistance including coaching, when required, and for supervisors to exercise quality assurance measures.
 - e. The Helpline shall track employee turnover or attrition and have a process for identifying when the turnover percentage impacts service quality.

E. Standard 25: Staff Training

- 1. The Helpline shall provide training for new hires as well as existing staff. The training reflects job descriptions for individual positions and is consistent with material in the I&R Training Manual, the Standards for Professional I&R, and the Job Task Analysis for community resource specialists and resource database curators.
- 2. The Helpline shall provide new hire orientation and onboarding for new staff that addresses:
 - a. The role, mission, values, culture, and purpose of the I&R service.
 - b. The structure and policies/procedures of the organization including the role of the governing body.
 - c. The range of services provided, and the functions associated with specific positions.
 - d. The legal requirements that affect service delivery (e.g., abuse reporting, privacy/confidentiality).
 - e. Compliance training required by stakeholders and jurisdictions (e.g., cultural competency, sexual harassment, anti-racism)
- 3. The Helpline shall ensure that training for I&R specialists includes:

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- a. Pre-service training appropriate to the knowledge and skills of new staff to ensure that they meet organizational expectations;
 - b. On-the-job training that involves increasing levels of responsibility until the individual is self-sufficient and able to handle day-to-day tasks independently.
 - c. In-service training that focuses on refining and updating the staff's knowledge about the aging network, state and federally funded programs, and skills and work-related attitudes and behaviors.
4. The Helpline shall ensure training for resource staff includes an overview of the local community service delivery system, inclusion/exclusion criteria for the resource database, data elements, taxonomy indexing, database maintenance procedures, use of the I&R service's software, development, and distribution of database products and, when appropriate, training in the I&R service's area of specialization (e.g. disability issues or aging issues).
 5. The Helpline shall ensure that the content of the staff training program is consistent with the ABCs of I&R or the Inform USA Information and Referral Onboarding Manual.
 6. The Helpline shall systematically evaluate the effectiveness of its training program and the performance of its trainers and modify the training based on evaluation results.
 7. It is recommended that I&R specialists and resource specialists seek professional certification through recognized programs at the state/provincial, regional, or national level.

F. Standard 26: Promotion and Outreach

1. The Helpline shall establish and maintain an outreach program to increase public awareness of I&R services, and the value and impact of individuals, families, and the broader community. At least two outreach projects targeting low-income older individuals, including low-income minority, older individuals with limited English proficiency, and older individuals residing in rural areas, must be completed annually.
2. The Helpline shall have an outreach plan that structures its outreach activities to target specific populations within the community (e.g. faith-based organizations, diverse cultural communities, law enforcement, and schools) and establishes a process for tracking the number of targeted populations engaged. The I&R service may publicize its services using a variety of methods, including social media, which are tailored to meet the needs of diverse populations and may include:
 - a. Personal contact;
 - b. Speaking engagements;
 - c. Community meetings;
 - d. Feature articles;
 - e. News stories;
 - f. Displays;
 - g. Public service announcements or listings;
 - h. Telephone Directories;
 - i. Printed materials such as brochures;
 - j. Posters and billboards;
 - k. Booths at fairs;
 - l. Radio;
 - m. Television; and
 - n. Internet web page.
3. The I&R service shall publicize its services to people in the community who may experience barriers to accessing services due to factors such as disabilities, social isolation, housing instability, and language or cultural barriers.

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G. Standard 27: Quality Assurance

1. The Helpline shall have a quality assurance process that assesses the effectiveness of its services, its appropriate involvement in the community, and its overall impact on the people it serves. Quality assurance is included in all aspects of the I&R service (service delivery, resource database, reports and measures, cooperative relationships, disaster preparedness and organizational effectiveness. These determinations shall be made through on-going quality assurance procedures supported by the collection and utilization of information that can be used to manage and continuously improve resource database management and the service delivery process, and through periodic formal evaluations that are used to implement measurable improvements.
 - a. The Helpline shall identify, define, and regularly measure program and key performance indicators for service delivery that are aggregated and averaged regularly. Indicators may include: a Call volume;
 - b. Abandoned calls;
 - c. Average abandonment rate;
 - d. Average abandonment time
 - e. Average speed of answer;
 - f. Average call handling time;
 - g. Average talk time; and
 - h. Incoming call patterns.
2. The Helpline shall conduct regular customer satisfaction/quality assurance surveys with a minimum of 3 percent (3%) of inquirers one percent (1%) of the specified percentage must include individuals with limited English proficiency, persons with a disability, or low-income minorities residing in a rural area] to assess overall service performance and I&R service outcomes. The surveys may occur during the original contact with an inquirer, in conjunction with follow-up (after determining whether the inquirer's needs have been met), or in a separate call made for quality assurance purposes. It is important that survey participants be randomly selected. Customer satisfaction questions shall include the following:
 - a. Was the I&R specialist polite and helpful?
 - b. Did the inquirer feel they were listened to?
 - c. Did the inquirer receive a choice of referrals where appropriate?
 - d. Would the inquirer contact the Helpline again?
 - e. Would the inquirer recommend the Helpline I&R service to family and friends?
3. If while conducting client satisfaction/quality assurance surveys, it is determined that the original need of the inquirer has not been met or that the inquirer has new needs, the Helpline shall have procedures in place to provide additional information, referrals, or advocacy.

Reference: The Older Americans Act (OAA) contract standards have been adopted with modifications from the Inform USA Standards for Professional Information and Referral.

END OF ATTACHMENT I

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ATTACHMENT II

FINANCIAL AND COMPLIANCE AUDIT

The administration of resources awarded by the Department to the Contractor may be subject to audits and/or monitoring by the Department, as described in this section.

MONITORING

In addition to reviews of audits conducted in accordance with 2 CFR Part 200 (formerly OMB Circular A-133 as revised), and Section 215.97, F.S., (see “AUDITS” below), monitoring procedures may include, but not be limited to, on-site visits by the Department staff, limited scope audits and/or other procedures. By entering into this contract, the Contractor agrees to comply and cooperate with any monitoring procedures/processes deemed appropriate by the Department. In the event the Department determines that a limited scope audit of the Contractor is appropriate, the Contractor agrees to comply with any additional instructions provided by the Department to the Contractor regarding such audit. The Contractor further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the Chief Financial Officer (CFO) or Auditor General.

AUDITS

PART I: FEDERALLY FUNDED

This part is applicable if the Contractor is a State or local government or a non-profit organization as defined in 2 CFR Part 200, Subpart A.

In the event that the Contractor expends \$1,000,000.00 or more in federal awards during its fiscal year, the Contractor must have a single or program-specific audit conducted in accordance with the provisions of 2 CFR Part 200. Financial and Compliance Audit Attachment, Exhibit 2 indicates federal resources awarded through the Department by this contract. In determining the federal awards expended in its fiscal year, the Contractor shall consider all sources of Federal awards, including federal resources received from the Department. The determination of amounts of Federal awards expended should be in accordance with 2 CFR Part 200. An audit of the Contractor conducted by the Auditor General in accordance with the provisions of 2 CFR Part 200 will meet the requirements of this part.

In connection with the audit requirements addressed in Part I, paragraph 1, the Contractor shall fulfill the requirements relative to auditee responsibilities as provided in 2 CFR § 200.508.

If the Contractor expends less than \$1,000,000.00 in federal awards in its fiscal year, an audit conducted in accordance with the provisions of 2 CFR Part 200 is not required. In the event that the Contractor expends less than \$1,000,000.00 in federal awards in its fiscal year and elects to have an audit conducted in accordance with the provisions of 2 CFR Part 200, the cost of the audit must be paid from non-federal resources (i.e., the cost of such audit must be paid from Contractor resources obtained from other than federal entities.)

An audit conducted in accordance with this part shall cover the entire organization for the organization's fiscal year. Compliance findings related to contracts with the Department shall be based on the contract's requirements, including any rules, regulations, or statutes referenced in the contract. The financial statements shall disclose whether or not the matching requirement was met for each applicable contract. All questioned costs and liabilities due to the Department shall be fully disclosed in the audit report with reference to the Department contract involved. If not otherwise disclosed as required by 2 CFR § 200.510, the schedule of expenditures of federal awards shall identify expenditures by contract number for each contract with the Department in effect during the audit period. Financial reporting packages required under this part must be submitted within the earlier of 30 days after receipt of the audit report or 9 months after the end of the Contractor's fiscal year end.

PART II: STATE FUNDED

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This part is applicable if the Contractor is a non-state entity as defined by Section 215.97(2), F.S.

In the event that the Contractor expends a total amount of state financial assistance equal to or in excess of \$1,000,000.00 in any fiscal year of such Contractor, the Contractor must have a State single or project-specific audit for such fiscal year in accordance with Section 215.97, F.S.; applicable rules of the Department of Financial Services; and Chapter 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General. Financial Compliance Audit Attachment, Exhibit 2 indicates state financial assistance awarded through the Department by this contract. In determining the state financial assistance expended in its fiscal year, the Contractor shall consider all sources of state financial assistance, including state financial assistance received from the Department, other state agencies, and other non-state entities. State financial assistance does not include Federal direct or pass-through awards and resources received by a non-state entity for Federal program matching requirements.

In connection with the audit requirements addressed in Part II, paragraph 1, the Contractor shall ensure that the audit complies with the requirements of Section 215.97(8), F.S. This includes submission of a financial reporting package as defined by Section 215.97(2), F.S., and Chapter 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General.

If the Contractor expends less than \$1,000,000.00 in state financial assistance in its fiscal year, an audit conducted in accordance with the provisions of Section 215.97, F.S., is not required. In the event that the Contractor expends less than \$1,000,000.00 in state financial assistance in its fiscal year and elects to have an audit conducted in accordance with the provisions of Section 215.97, F.S., the cost of the audit must be paid from the non-state entity's resources (i.e., the cost of such an audit must be paid from the Contractor resources obtained from other than State entities).

An audit conducted in accordance with this part shall cover the entire organization for the organization's fiscal year. Compliance findings related to contracts with the Department shall be based on the contract's requirements, including any applicable rules, regulations, or statutes. The financial statements shall disclose whether or not the matching requirement was met for each applicable contract. All questioned costs and liabilities due to the Department shall be fully disclosed in the audit report with reference to the Department contract involved. If not otherwise disclosed as required by Rule 69I-5.003, F.A.C., the schedule of expenditures of state financial assistance shall identify expenditures by contract number for each contract with the Department in effect during the audit period. For local governmental entities, financial reporting packages required under this part must be submitted within 45 days after delivery of the audit report, but no later than 12 months after the Contractor's fiscal year end. For non-profit or for-profit organizations, financial reporting packages required under this part must be submitted within 45 days after delivery of the audit report, but no later than 9 months after the Contractor's fiscal year end. Notwithstanding the applicability of this portion, the Department retains all right and obligation to monitor and oversee the performance of this contract as outlined throughout this document and pursuant to law.

PART III: REPORT SUBMISSION

Copies of financial reporting packages for audits conducted in accordance with 2 CFR Part 200 and required by Part I of this Financial Compliance Audit Attachment, shall be submitted, when required by 2 CFR § 200.512 by or on behalf of the Contractor directly to each of the following:

**Federal Audit Clearinghouse
Bureau of the Census
1201 East 10th Street
Jeffersonville, IN 47132**

Pursuant to 2 CFR § 200.512, all other Federal agencies, pass-through entities and others interested in a reporting package and data collection form must obtain it by accessing the Federal Audit Clearinghouse.

The Contractor shall submit a copy of any management letter issued by the auditor directly to the Department.

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**Florida Department of Elder Affairs
Attn: Audit Repository
4040 Esplanade Way, Suite 235S
Tallahassee, Florida 32399-7000**

Additionally, copies of financial reporting packages required by this contract's Financial Compliance Audit Attachment, Part II, shall be submitted by or on behalf of the Contractor directly to each of the following:

The Department at the following address:

**Florida Department of Elder Affairs
Attn: Audit Repository
4040 Esplanade Way, Suite 235S
Tallahassee, Florida 32399-7000**

The Auditor General's Office at the following address:

**State of Florida Auditor General
Claude Pepper Building, Room 574
111 West Madison Street
Tallahassee, Florida 32399-1450**

Any reports, management letters, or other information required to be submitted to the Department pursuant to this contract shall be submitted timely in accordance with 2 CFR Part 200, and Florida Statutes Chapter 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, as applicable.

Contractors, when submitting financial reporting packages to the Department for audits done in accordance with 2 CFR Part 200 or Florida Statutes Chapter 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, should indicate the date that the reporting package was delivered to the Contractor in correspondence accompanying the reporting package.

PART IV: RECORD RETENTION

The Contractor shall retain sufficient records demonstrating its compliance with the terms of this contract for a period of six (6) years from the date the audit report is issued, and shall allow the Department or its designee, the CFO, or Auditor General access to such records upon request. The Contractor shall ensure that audit working papers are made available to the Department or its designee, CFO, or Auditor General upon request for a period of six (6) years from the date the audit report is issued, unless extended in writing by the Department.

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ATTACHMENT II**EXHIBIT 1****PART I: AUDIT RELATIONSHIP DETERMINATION**

Contractors who receive state or federal resources may or may not be subject to the audit requirements of 2 CFR Part 200 and/or Section 215.97, F.S. Contractors who are determined to be recipients or sub-recipients of federal awards and/or state financial assistance may be subject to the audit requirements if the audit threshold requirements set forth in Part I and/or Part II of Exhibit 1 are met. Contractors who have been determined to be vendors are not subject to the audit requirements of 2 CFR § 200.38 and/or Section 215.97, F.S. Regardless of whether the audit requirements are met, Contractors who have been determined to be recipients or sub-recipients of Federal awards and/or state financial assistance must comply with applicable programmatic and fiscal compliance requirements.

In accordance with 2 CFR Part 200 and/or Rule 69I-5.006, F.A.C., Contractor has been determined to be:

- ☐ Vendor not subject to 2 CFR § 200.38 and/or Section 215.97, F.S.
- ☒ Recipient/sub-recipient subject to 2 CFR §§ 200.86 and 200.93 and/or Section 215.97, F.S.
- ☐ Exempt organization not subject to 2 CFR Part 200 and/or Section 215.97, F.S. For Federal awards, for-profit organizations are exempt; for state financial assistance projects, public universities, community colleges, district school boards, branches of state (Florida) government, and charter schools are exempt. Exempt organizations must comply with all compliance requirements set forth within the contract or award document.

NOTE: If a Contractor is determined to be a recipient/sub-recipient of federal and/or state financial assistance, and has been approved by the department to subcontract, they must comply with Section 215.97(7), F.S., and Rule 69I-5.006, F.A.C. [state financial assistance] and/or 2 CFR § 200.330 [federal awards].

PART II: FISCAL COMPLIANCE REQUIREMENTS

FEDERAL AWARDS OR STATE MATCHING FUNDS ON FEDERAL AWARDS. Contractors who receive Federal awards, state maintenance of effort funds, or state matching funds on Federal awards and who are determined to be a sub-recipient must comply with the following fiscal laws, rules, and regulations:

STATES, LOCAL GOVERNMENTS AND INDIAN TRIBES MUST FOLLOW:

- 2 CFR § 200.416 - § 200.417 – Special Considerations for States, Local Governments, and Indian Tribes*
- 2 CFR § 200.201 – Administrative Requirements**
- 2 CFR § 200 Subpart F – Audit Requirements
- Reference Guide for State Expenditures
- Other fiscal requirements set forth in program laws, rules, and regulations.

NON-PROFIT ORGANIZATIONS MUST FOLLOW:

- 2 CFR § 200.400 - § 200.411 – Cost Principles*
- 2 CFR § 200.100 – Administrative Requirements
- 2 CFR § 200 Subpart F – Audit Requirements
- Reference Guide for State Expenditures
- Other fiscal requirements set forth in program laws, rules, and regulations.

EDUCATIONAL INSTITUTIONS (EVEN IF A PART OF A STATE OR LOCAL GOVERNMENT) MUST FOLLOW:

- 2 CFR § 200.418 – § 200.419 – Special Considerations for Institutions of Higher Education*
- 2 CFR § 200.100 – Administrative Requirements
- 2 CFR § 200 Subpart F – Audit Requirements
- Reference Guide for State Expenditures
- Other fiscal requirements set forth in program laws, rules, and regulations.

*Some Federal programs may be exempted from compliance with the Cost Principles Circulars as noted in 2 CFR §200.400(5)(c).

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**For funding passed through U.S. Health and Human Services, 45 CFR Part 75; for funding passed through U.S. Department of Education, 34 CFR Part 80.

STATE FINANCIAL ASSISTANCE. Contractors who receive state financial assistance and who are determined to be a recipient/sub-recipient must comply with the following fiscal laws, rules, and regulations:

Sections 215.97 & 215.971, F.S.

Chapter 69I-5, F.A.C.

State Projects Compliance Supplement

Reference Guide for State Expenditures

Other fiscal requirements set forth in program laws, rules, and regulations.

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ATTACHMENT II
EXHIBIT 2 - FUNDING SUMMARY

Note: Title 2 CFR Part 200, as revised, and Section 215.97, F.S. require that the information about Federal Programs and State Projects included in Attachment II, Exhibit 1, be provided to the recipient. Information contained herein is a prediction of funding sources and related amounts based on the contract budget.

**1. FEDERAL RESOURCES AWARDED TO THE SUBRECIPIENT PURSUANT TO THIS CONTRACT
CONSIST OF THE FOLLOWING:**

GRANT AWARD (FAIN#): 2401FLOASS, 2401FLOACM, 2401FLOAHD, 2401FLOAPH, 2401FLOAFC, 2401FLOANS			
UEI NUMBER: X81UDEC6NBM6		FEDERAL AWARD DATE:	
PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
Older Americans Act Administration	U.S. Health and Human Services	93.044-045 & 93.052	\$928,922.00
Older Americans Act Administration Carry Forward	U.S. Health and Human Services Carry Forward	93.044-045 & 93.052	
Older Americans Act Title III B – Support Services (including Set Aside)	U.S. Health and Human Services	93.044	\$3,851,588.00
Older Americans Act Title III B – Carry Forward	U.S. Health and Human Services Carry Forward	93.044	
Older Americans Act Title III B – Disaster Recovery	U.S. Health and Human Services	93.044	\$4,573.00
Older Americans Act Title III C1 – Congregate Meals	U.S. Health and Human Services	93.045	\$1,591,218.50
Older Americans Act Title III C1 – Carry Forward	U.S. Health and Human Services Carry Forward	93.045	
Older Americans Act Title III C1 – Disaster Recovery	U.S. Health and Human Services	93.045	\$6,860.00
Older Americans Act Title III C2 – Home Delivered Meals	U.S. Health and Human Services	93.045	\$2,297,296.50
Older Americans Act Title III C2 – Carry Forward	U.S. Health and Human Services Carry Forward	93.045	
Older Americans Act Title III C2 – Disaster Recovery	U.S. Health and Human Services	93.045	\$6,860.00
Older Americans Act Title III D – Preventive Health	U.S. Health and Human Services	93.043	\$143,035.00
Older Americans Act Title III D – Carry Forward	U.S. Health and Human Services Carry Forward	93.043	
Older Americans Act Title III E – Caregiver Support Services	U.S. Health and Human Services	93.052	\$999,297.00
Older Americans Act Title III E – Carry Forward	U.S. Health and Human Services Carry Forward	93.052	
Older Americans Act Nutrition Services Incentive Program (NSIP)	U.S. Health and Human Services	93.053	\$380,922.00
Older Americans Act Nutrition Services Incentive Program (NSIP) – Carry Forward	U.S. Health and Human Services Carry Forward	93.053	
TOTAL FEDERAL AWARD			\$10,210,572.00

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ATTACHMENT II
EXHIBIT 2 - FUNDING SUMMARY

COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED PURSUANT TO THIS CONTRACT ARE AS FOLLOWS:

FEDERAL FUNDS:

2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
OMB Circular A-133 – Audits of States, Local Governments, and Non-Profit Organizations

2. STATE RESOURCES AWARDED TO THE RECIPIENT PURSUANT TO THIS CONTRACT CONSIST OF THE FOLLOWING:

MATCHING RESOURCES FOR FEDERAL PROGRAMS

PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
TOTAL STATE AWARD			

STATE FINANCIAL ASSISTANCE SUBJECT TO SECTION 215.97, F.S.

PROGRAM TITLE	FUNDING SOURCE	CSFA	AMOUNT
Older Americans Act Administration	General Revenue	N/A	\$27,812.00
TOTAL AWARD			\$27,812.00

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS CONTRACT ARE AS FOLLOWS:

STATE FINANCIAL ASSISTANCE

Sections 215.97 & 215.971, F.S., Chapter 69I-5, F.A.C, State Projects Compliance Supplement
Reference Guide for State Expenditures
Other fiscal requirements set forth in program laws, rules and regulations

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ATTACHMENT III CERTIFICATIONS AND ASSURANCES

DOEA will not award this contract unless Contractor completes this CERTIFICATIONS AND ASSURANCES. In performance of this contract, Contractor provides the following certifications and assurances:

- A. **Debarment and Suspension Certification (29 CFR Part 95 and 45 CFR Part 75)**
- B. **Certification Regarding Lobbying (29 CFR Part 93 and 45 CFR Part 93)**
- C. **Nondiscrimination & Equal Opportunity Assurance (29 CFR Part 37 and 45 CFR Part 80)**
- D. **Certification Regarding Public Entity Crimes, section 287.133, F.S.**
- E. **Association of Community Organizations for Reform Now (ACORN) Funding Restrictions Assurance (Pub. L. 111-117)**
- F. **Scrutinized Companies Lists and No Boycott of Israel Certification, section 287.135, F.S.**
- G. **Certification Regarding Data Integrity Compliance for Contracts, Agreements, Grants, Loans, and Cooperative Agreements**
- H. **Verification of Employment Status Certification**
- I. **Records and Documentation**
- J. **Certification Regarding Inspection of Public Records**

A. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS – PRIMARY COVERED TRANSACTION.

The undersigned Contractor certifies, to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a Federal department or agency;
2. Have not within a three-year period preceding this contract been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph A.2. of this certification; and/or
4. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause of default.

The undersigned shall require that language of this certification be included in the documents for all subcontracts at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients and contractors shall provide this certification accordingly.

B. CERTIFICATION REGARDING LOBBYING – CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS.

The undersigned Contractor certifies, to the best of its knowledge and belief, that:

No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan,

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the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or employee of a Member of Congress in connection with a Federal contract, grant, loan, or cooperative agreement, the undersigned shall also complete and submit Standard Form – LLL, “Disclosure Form to Report Lobbying,” in accordance with its instructions.

The undersigned shall require that language of this certification be included in the documents for all subcontracts at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients and contractors shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this contract was made or entered into. Submission of this certification is a prerequisite for making or entering into this contract imposed by 31 U.S.C. § 1352. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

C. NON- DISCRIMINATION & EQUAL OPPORTUNITY ASSURANCE (29 CFR PART 37 AND 45 CFR PART 80). - As a condition of the Contract, Contractor assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws:

1. Section 188 of the Workforce Investment Act of 1998 (WIA), (Pub. L. 105-220), which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation, or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIA Title I-financially assisted program or activity.
2. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
6. The American with Disabilities Act of 1990 (Pub. L. 101-336), which prohibits discrimination in all employment practices including job application procedures, hiring, firing, advancement, compensation, training, and other terms, conditions, and privileges of employment. It applies to recruitment, advertising, tenure, layoff, leave, fringe benefits, and all other employment-related activities.
7. Contractor also assures that it will comply with 29 CFR Part 37 and all other regulations implementing the laws listed above. This assurance applies to Contractor’s operation of the WIA Title I – financially assisted program or activity, and to all contracts Contractor makes to carry out the WIA Title I – financially assisted program or activity.

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Contractor understands that DOE and the United States have the right to seek judicial enforcement of the assurance.

The undersigned shall require that language of this assurance be included in the documents for all subcontracts at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients and contractors shall provide this assurance accordingly.

D. CERTIFICATION REGARDING PUBLIC ENTITY CRIMES, SECTION 287.133, F.S.

Contractor hereby certifies that neither it, nor any person or affiliate of Contractor, has been convicted of a Public Entity Crime as defined in section 287.133, F.S., nor placed on the convicted vendor list.

Contractor understands and agrees that it is required to inform DOE immediately upon any change of circumstances regarding this status.

E. ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN) FUNDING RESTRICTIONS ASSURANCE (Pub. L. 111-117).

As a condition of the Contract, Contractor assures that it will comply fully with the federal funding restrictions pertaining to ACORN and its subsidiaries per the Consolidated Appropriations Act, 2010, Division E, Section 511 (Pub. L. 111-117). The Continuing Appropriations Act, 2011, Sections 101 and 103 (Pub. L. 111-242), provides that appropriations made under Pub. L. 111-117 are available under the conditions provided by Pub. L. 111-117.

The undersigned shall require that language of this assurance be included in the documents for all subcontracts at all tiers (including subcontracts, sub-grants and contracts under grants, loans and cooperative agreements) and that all sub-recipients and contractors shall provide this assurance accordingly.

F. SCRUTINIZED COMPANIES LISTS AND NO BOYCOTT OF ISRAEL CERTIFICATION, SECTION 287.135, F.S.

In accordance with section 287.135, F.S., Contractor hereby certifies that it has not been placed on the Scrutinized Companies that Boycott Israel List and that it is not engaged in a boycott of Israel.

If this contract is in the amount of \$1 million or more, in accordance with the requirements of section 287.135, F.S., Contractor hereby certifies that it is not listed on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List and that it is not engaged in business operations in Cuba or Syria.

Contractor understands that pursuant to section 287.135, F.S., the submission of a false certification may result in the Department terminating this contract and the submission of a false certification may subject Contractor to civil penalties and attorney fees and costs, including any costs for investigations that led to the finding of false certification.

If Contractor is unable to certify any of the statements in this certification, Contractor shall attach an explanation to this contract.

G. CERTIFICATION REGARDING DATA INTEGRITY COMPLIANCE FOR CONTRACTS, AGREEMENTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS

1. The Contractor and any Subcontractors of services under this contract have financial management systems capable of providing certain information, including: (1) accurate, current, and complete disclosure of the financial results of each grant-funded project or program in accordance with the prescribed reporting requirements; (2) the source and application of funds for all contract supported activities; and (3) the comparison of outlays with budgeted amounts for each award. The inability to process information in accordance with these requirements could result in a return of grant funds that have not been accounted for properly.
2. Management Information Systems used by the Contractor, Subcontractors, or any outside entity on which the Contractor is dependent for data that is to be reported, transmitted, or calculated have been assessed and verified

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to be capable of processing data accurately, including year-date dependent data. For those systems identified to be non-compliant, Contractors will take immediate action to assure data integrity.

3. If this contract includes the provision of hardware, software, firmware, microcode, or imbedded chip technology, the undersigned warrants that these products are capable of processing year-date dependent data accurately. All versions of these products offered by the Contractor (represented by the undersigned) and purchased by the state will be verified for accuracy and integrity of data prior to transfer.
4. In the event of any decrease in functionality related to time and date related codes and internal subroutines that impede the hardware or software programs from operating properly, the Contractor agrees to immediately make required corrections to restore hardware and software programs to the same level of functionality as warranted herein, at no charge to the state, and without interruption to the ongoing business of the state, time being of the essence.
5. The Contractor and any Subcontractors of services under this contract warrant that their policies and procedures include a disaster plan to provide for service delivery to continue in case of an emergency, including emergencies arising from data integrity compliance issues.

H. VERIFICATION OF EMPLOYMENT STATUS CERTIFICATION

As a condition of contracting with the Department, Contractor certifies the use of the U.S. Department of Homeland Security's E-verify system to verify the employment eligibility of all new employees hired by Contractor during the contract term to perform employment duties pursuant to this contract, and that any subcontracts include an express requirement that Subcontractors performing work or providing services pursuant to this contract utilize the E-verify system to verify the employment eligibility of all new employees hired by the Subcontractor during the entire contract term.

The Contractor shall require that the language of this certification be included in all sub-agreements, sub-grants, and other agreements/contracts and that all Subcontractors shall certify compliance accordingly.

This certification is a material representation of fact upon which reliance was placed when this contract was made or entered into. Submission of this certification is a prerequisite for making or entering into this contract imposed by Circulars A-102 and 2 CFR Part 200 and 215 (formerly OMB Circular A-110).

I. RECORDS AND DOCUMENTATION

The Contractor agrees to make available to Department staff and/or any party designated by the Department any and all contract related records and documentation. The Contractor shall ensure the collection and maintenance of all program related information and documentation on any such system designated by the Department. Maintenance includes valid exports and backups of all data and systems according to Department standards.

J. CERTIFICATION REGARDING INSPECTION OF PUBLIC RECORDS

1. In addition to the requirements of Section 10 of the Standard Contract, sections 119.0701(3) and (4) F.S., and any other applicable law, if a civil action is commenced as contemplated by section 119.0701(4), F.S., and the Department is named in the civil action, Contractor agrees to indemnify and hold harmless the Department for any costs incurred by the Department and any attorneys' fees assessed or awarded against the Department from a Public Records Request made pursuant to Chapter 119, F.S., concerning this contract or services performed thereunder.
 - a. Notwithstanding section 119.0701, F.S., or other Florida law, this section is not applicable to contracts executed between the Department and state agencies or subdivisions defined in section 768.28(2), F.S.
2. Section 119.01(3), F.S., states if public funds are expended by an agency in payment of dues or membership contributions for any person, corporation, foundation, trust, association, group, or other organization, all the financial, business, and membership records of such an entity **which pertain to the public agency (Florida Department of Elder Affairs)** are public records. Section 119.07, F.S., states that every person who has custody of such a public record shall permit the record to be inspected and copied by any person desiring to do so, under reasonable circumstances.

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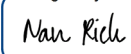
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Additionally, I certify this organization does ^x does not provide for institutional memberships.

Contractor's signature below attests that records pertaining to the dues or membership application by the Department are available for inspection if applicable, as stated above.

By execution of this contract, Contractor must include these provisions (A-J) in all related subcontract agreements (if applicable).

By signing below, Contractor certifies that the representations outlined in parts A through J above are true and correct.

<div> <div>Signed by:</div> <div>  </div> <div>E3CC7D056D044CC...</div> </div>	<div>President of Board</div> <div>5300 Hiatus Road</div>
<div>Signature and Title of Authorized Representative</div>	<div>Street Address</div>
<div>Areawide Council on Aging of Broward County, Inc.</div>	<div>Sunrise, FL 33351</div>
<div>Contractor</div>	<div>Date</div> <div>City, State, Zip code</div>

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ATTACHMENT IV

ASSURANCES—NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average forty-five (45) minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.


Note: Certain of these assurances may not be applicable to your project or program. If you have questions please contact the awarding agency. Further, certain federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

1. Has the legal authority to apply for federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes, or presents the appearance of, personal or organizational conflict of interest or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683 and §§ 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.

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8. Will comply, as applicable, with the provisions of the Hatch Act (5 U.S.C. §§ 1501-1508 and §§ 7324-7328), which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. § 874) and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction sub-contracts.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (42 U.S.C. § 4012a) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000.00 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (42 U.S.C. §§ 4321 et seq.) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. § 1451 et seq.); (f) conformity of federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (42 U.S.C. § 300f et seq.); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (16 U.S.C. §§ 1531-1544).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. § 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended, and the Archaeological and Historic Preservation Act of 1974 (54 U.S.C. §§ 300101-307108), and EO 11593 (identification and protection of historic properties).
14. Will comply with the National Research Act of 1974 (P.L. 93-348) regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (7 U.S.C. § 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. § 4831(b)), which prohibits the use of lead- based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and 2 CFR Part 200.
18. Will comply with all applicable requirements of all other federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL  <small>Signed by:</small> <small>E3CC7D056D044CC</small>		TITLE President of Board	
APPLICANT ORGANIZATION Areawide Council on Aging of Broward County, Inc.			DATE SUBMITTED 12/27/2024

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ATTACHMENT V
FLORIDA DEPARTMENT OF ELDER AFFAIRS CIVIL RIGHTS COMPLIANCE CHECKLIST

Program/Facility Name	County	AAA/Contractor
Address	Completed By	
City, State, Zip Code	Date	Telephone

PART I: READ THE ATTACHED INSTRUCTIONS FOR ILLUSTRATIVE INFORMATION WHICH WILL HELP YOU COMPLETE THIS FORM.

1. Briefly describe the geographic area served by the program/facility and the type of service provided:

For questions 2-5 please indicate the following:	Total #	% White	% Black	% Hispanic	% Other	% Female	% Disabled	% Over 40
2. Population of area served	Source of data:							
3. Staff currently employed	Effective date:							
4. Clients currently enrolled/registered	Effective date:							
5. Advisory/Governing Board if applicable								

PART II: USE A SEPARATE SHEET OF PAPER FOR ANY EXPLANATIONS REQUIRING MORE SPACE. IF N/A or NO, EXPLAIN.

6. Is an Assurance of Compliance on file with DOE A?

N/A YES NO
☐ ☐ ☐

7. Compare the staff composition to the population. Is staff representative of the population?

N/A YES NO
☐ ☐ ☐

8. Are eligibility requirements for services applied to clients and applicants without regard to race, color, national origin, sex, age, religion, or disability?

N/A YES NO
☐ ☐ ☐

9. Are all benefits, services and facilities available to applicants and participants in an equally effective manner regardless of race, sex, color, age, national origin, religion, or disability?

N/A YES NO
☐ ☐ ☐

10. For in-patient services, are room assignments made without regard to race, color, national origin or disability?

N/A YES NO
☐ ☐ ☐

11. Is the program/facility accessible to non-English speaking clients?

N/A YES NO
☐ ☐ ☐

12. Are employees, applicants and participants informed of their protection against discrimination? If YES, how?
 Verbal ☐ Written ☐ Poster ☐

N/A YES NO
☐ ☐ ☐

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13. Give the number and current status of any discrimination complaints regarding services or employment filed against the program/facility.

N/A NUMBER

☐ _____

14. Is the program/facility physically accessible to mobility, hearing, and sight-impaired individuals?

N/A YES NO

☐ ☐ ☐

PART III: THE FOLLOWING QUESTIONS APPLY TO PROGRAMS AND FACILITIES WITH 15 OR MORE EMPLOYEES. IF NO, EXPLAIN.

15. Has as a self-evaluation been conducted to identify any barriers to serving disabled individuals and to make any necessary modifications?

YES NO

☐ ☐

16. Is there an established grievance procedure that incorporates due process in the resolution of complaints?

YES NO

☐ ☐

17. Has a person been designated to coordinate Section 504 compliance activities?

YES NO

☐ ☐

18. Do recruitment and notification materials advise applicants, employees, and participants of nondiscrimination on the basis of disability?

YES NO

☐ ☐

19. Are auxiliary aids available to ensure accessibility of services to hearing and sight-impaired individuals?

YES NO

☐ ☐

PART IV: FOR PROGRAMS OR FACILITIES WITH 50 OR MORE EMPLOYEES AND FEDERAL CONTRACTS OF \$50,000.00 OR MORE.

20. Do you have a written affirmative action plan? If NO, explain.

YES NO

☐ ☐

DOEA USE ONLY		
Reviewed by		In Compliance: YES <input type="checkbox"/> NO* <input type="checkbox"/>
Program Office		*Notice of Corrective Action Sent ___/___/___
Date	Telephone	Response Due ___/___/___
On-Site <input type="checkbox"/>	Desk Review <input type="checkbox"/>	Response Received ___/___/___

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ATTACHMENT V

INSTRUCTIONS FOR THE CIVIL RIGHTS COMPLIANCE CHECKLIST

1. Describe the geographic service area such as a district, county, city, or other locality. If the program/facility serves a specific target population such as adolescents, describe the target population. Also, define the type of service provided.
2. Enter the percent of the population served by race, sex, disability, and over the age of 40. The population served includes persons in the geographical area for which services are provided such as a city, county or other regional area. Population statistics can be obtained from local chambers of commerce, libraries, or any publication from the 1980 Census containing Florida population statistics. Include the source of your population statistics. (“Other” races include Asian/Pacific Islanders and American Indian/Alaskan Natives.)
3. Enter the total number of full-time staff and their percent by race, sex, disability, and over the age of 40. Include the effective date of your summary.
4. Enter the total number of clients who are enrolled, registered or currently served by the program or facility, and list their percent by race, sex, disability, and over the age of 40. Include the date that enrollment was counted.
 - a. Where there is a significant variation between the race, sex, or ethnic composition of the clients and their availability in the population, the program/facility has the responsibility to determine the reasons for such variation and take whatever action may be necessary to correct any discrimination. Some legitimate disparities may exist when programs are sanctioned to serve target populations such as elderly or disabled persons.
5. Enter the total number of advisory board members and their percent by race, sex, disability, and over the age of 40. If there is no advisory or governing board, leave this section blank.
6. Each recipient of federal financial assistance must have on file an assurance that the program will be conducted in compliance with all nondiscriminatory provisions as required in 45 CFR Part 80. This is usually a standard part of the contract language for DOE A Recipients and their Sub-grantees. 45 CFR § 80.4(a).
7. Is the race, sex, and national origin of the staff reflective of the general population? For example, if 10% of the population is Hispanic, is there a comparable percentage of Hispanic staff?
8. Do eligibility requirements unlawfully exclude persons in protected groups from the provision of services or employment? Evidence of such may be indicated in staff and client representation (Questions 3 and 4) and also through on-site record analysis of persons who applied but were denied services or employment. 45 CFR § 80.3(a) and 45 CFR § 80.1.
9. Participants or clients must be provided services such as medical, nursing, and dental care, laboratory services, physical and recreational therapies, counseling, and social services without regard to race, sex, color, national origin, religion, age, or disability. Courtesy titles, appointment scheduling, and accuracy of record keeping must be applied uniformly and without regard to race, sex, color, national origin, religion, age, or disability. Entrances, waiting rooms, reception areas, restrooms, and other facilities must also be equally available to all clients. 45 CFR § 80.3(b).
10. For in-patient services, residents must be assigned to rooms, wards, etc., without regard to race, color, national origin, or disability. Also, residents must not be asked whether they are willing to share accommodations with persons of a different race, color, national origin, or disability. 45 CFR § 80.3(a).
11. The program/facility and all services must be accessible to participants and applicants, including those persons who may not speak English. In geographic areas where a significant population of non-English speaking people live, program accessibility may include the employment of bilingual staff. In other areas, it is sufficient to have a policy or plan for service, such as a current list of names and telephone numbers of bilingual individuals who will assist in the provision of services. 45 CFR § 80.3(a).
12. Programs/facilities must make information regarding the nondiscriminatory provisions of Title VI available to their participants, beneficiaries, or any other interested parties. 45 CFR § 80.6(d). This should include information on their right to file a complaint of discrimination with either the Department or the U.S. Department of Health and Human Services. The information may be supplied verbally or in writing to every individual or may be supplied through the use of an equal opportunity policy poster displayed in a public area of the facility.
13. Report number of discrimination complaints filed against the program/facility. Indicate the basis (e.g. race, color, creed, sex, age, national origin, disability, and/or retaliation) and the issues involved (e.g. services or employment, placement,

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termination, etc.). Indicate the civil rights law or policy alleged to have been violated along with the name and address of the local, state, or federal agency with whom the complaint has been filed. Indicate the current status of the complaint (e.g. settled, no reasonable cause found, failure to conciliate, failure to cooperate, under review, etc.).

14. The program/facility must be physically accessible to mobility, hearing, and sight-impaired individuals. Physical accessibility includes designated parking areas, curb cuts or level approaches, ramps, and adequate widths to entrances. The lobby, public telephone, restroom facilities, water fountains, and information and admissions offices should be accessible. Door widths and traffic areas of administrative offices, cafeterias, restrooms, recreation areas, counters, and serving lines should be observed for accessibility. Elevators should be observed for door width and Braille or raised numbers. Switches and controls for light, heat, ventilation, fire alarms, and other essentials should be installed at an appropriate height for mobility impaired individuals.
15. Section 504 of the Rehabilitation Act of 1973 requires that a recipient of federal financial assistance conduct a self-evaluation to identify any accessibility barriers. Self-evaluation is a four-step process:
 - a. Evaluate, with the assistance of disabled individual(s)/organization(s), current policies and practices that do not or may not comply with Section 504;
 - b. Modify policies and practices that do not meet Section 504 requirements.
 - c. Take remedial steps to eliminate the effects of any discrimination that resulted from adherence to these policies and practices; and
 - d. Maintain self-evaluation on file, including a list of the interested persons consulted, a description of areas examined, and any problems identified, and a description of any modifications made and of any remedial steps taken 45 CFR § 84.6. (This checklist may be used to satisfy this requirement if these four steps have been followed).
16. Programs or facilities that employ 15 or more persons shall adopt grievance procedures that incorporate appropriate due process standards and that provide for the prompt and equitable resolution of complaints alleging any action prohibited by Part 84 of Title 45, CFR 45 CFR § 84.7(b).
17. Programs or facilities that employ 15 or more persons shall designate at least one person to coordinate its efforts to comply with Part 84 of Title 45, CFR. 45 CFR § 84.7(a).
18. Programs or facilities that employ 15 or more persons shall take appropriate initial and continuing steps to notify participants, beneficiaries, applicants, and employees that the program/facility does not discriminate on the basis of handicap in violation of Section 504 and Part 84 of Title 45, CFR. Methods of initial and continuing notification may include the posting of notices, publication in newspapers and magazines, placement of notices in publications of the programs or facilities, and distribution of memoranda or other written communications. 45 CFR § 84.8(a).
19. Programs or facilities that employ 15 or more persons shall provide appropriate auxiliary aids to persons with impaired sensory, manual, or speaking skills where necessary to afford such persons an equal opportunity to benefit from the service in question. Auxiliary aids may include, but are not limited to, brailled and taped materials, interpreters, and other aids for persons with impaired hearing or vision. 45 CFR § 84.52(d).
20. Programs or facilities with 50 or more employees and \$50,000.00 in federal contracts must develop, implement, and maintain a written affirmative action compliance program in accordance with Executive Order 11246, 41 CFR Part 60 and Title VI of the Civil Rights Act of 1964, as amended.

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ATTACHMENT VI
CONTRACTOR'S STATE CONTRACT LIST

Contractor's State Contract List

CONTRACTOR INFORMATION:

Name: _____
Address: _____
FEID: _____

Phone: _____
Email: _____
Contact: _____

REPORT PERIOD:

From: _____
To: _____

	Contract #	Contract/ Program Name	State Agency/ Program	Start Date	End Date	Description of Contract Purpose/Types of Services	Contract Manager	Phone #	Contract Amount
1									\$ -
2									\$ -
3									\$ -
4									\$ -
5									\$ -
6									\$ -
7									\$ -
8									\$ -
9									\$ -
10									\$ -
11									\$ -
12									\$ -
13									\$ -
14									\$ -
15									\$ -
16									\$ -
17									\$ -
Total									\$ -

SIGNATURE: _____ DATE: _____
TITLE: _____

ATTACHMENT VII
BACKGROUND SCREENING
ATTESTATION OF COMPLIANCE - EMPLOYER

AUTHORITY: ALL EMPLOYERS are required to annually submit this form attesting to compliance with the provisions of chapter 435 and section 430.0402 of the Florida Statutes.

The term “employer” means any person or entity required by law to conduct background screenings, including but not limited to, Area Agencies on Aging/Aging and Disability Resource Centers, Lead Agencies, and Service Providers that contract directly or indirectly with the Department of Elder Affairs (DOEA), and any other person or entity which hires employees or has volunteers in service who meet the definition of a direct service provider. See §§ 435.02 & 430.0402, Fla. Stat. (2023)

A direct service provider is a person 18 years of age or older who, pursuant to a program to provide services to the elderly, has direct, face-to-face contact with a client while providing services to the client and has access to the client’s living areas, funds, personal property, or personal identification information as defined in s. 817.568. The term also includes, but is not limited to, the administrator or a similarly titled person who is responsible for the day-to-day operations of the provider; the financial officer or similarly titled person who is responsible for the financial operations of the provider; coordinators, managers, and supervisors of residential facilities; volunteers; and any other person seeking employment with a provider who is expected to, or whose responsibilities may require him or her to, provide personal care or services directly to clients or have access to client funds, financial matters, legal matters, personal property, or living areas. § 430.0402(1)(b), Fla. Stat. (2023).

ATTESTATION

As the duly authorized representative of: Areawide Council on Aging of Broward County, Inc.
(Name of Employer)

Located at 5300 Hiatus Road, Sunrise, FL 33351
Street address City State Zip Code

Under penalty of perjury, I, Nan Rich,
(Name of Representative)

hereby swear or affirm that the above-named employer is in compliance with the provisions of chapter 435 and section 430.0402 of the Florida Statutes, regarding level 2 background screening.

Signed by:

Nan Rich

E3CC7D056D044CC...

12/27/2024

Signature of Representative

Date

DOEA Form 235, Attestation of Compliance - Employer, Effective October 2023, F.S.

Form available at: <https://elderaffairs.org/about-us/background-screening/background-screening-clearinghousetraining-accessing-the-clearinghouse/>.

ATTACHMENT VIII
CERTIFIED MINORITY BUSINESS SUBCONTRACTOR EXPENDITURES (CMBE FORM)

CMBE FORM MUST ACCOMPANY INVOICES SUBMITTED TO DOEA

CONTRACTOR NAME: _____

DOEA CONTRACT NUMBER: _____

***REPORTING PERIOD-FROM:** _____ **TO:** _____

***(DATE RANGE OF RENDERED SERVICES, MUST MATCH INVOICE SUBMITTED TO DOEA)**

DOEA CONTRACT MANAGER: _____

REPORT ALL EXPENDITURES MADE TO CERTIFIED MINORITY BUSINESS (SUBCONTRACTORS).

CONTACT DOEA CMBE COORDINATOR FOR ANY QUESTIONS, AT 850-414-2153.

<u>SUBCONTRACTOR NAME</u>	<u>SUBCONTRACTOR'S FEID</u>	<u>CMBE</u>	<u>EXPENDITURES</u>

DOEA USE ONLY -- REPORTING ENTITY (DIVISION, OFFICE, ETC)

SEND COMPLETED FORMS VIA INTEROFFICE MAIL TO: JUSTIN TAYLOR

CMBE COORDINATOR, CONTRACT ADMINISTRATION & PURCHASING, TALLAHASSEE, FLORIDA 32399-7000.

If unsure if subcontractor is a certified minority supplier, click on the hyperlink below. Enter the name of the supplier, click "search". Only Certified Minority Business Entities will be displayed.

<https://osd.dms.myflorida.com/directories>

INSTRUCTIONS

- (A) ENTER THE COMPANY NAME AS IT APPEARS ON YOUR DOEA CONTRACT.
- (B) ENTER THE DOEA CONTRACT NUMBER.
- (C) ENTER THE SERVICE PERIOD MATCHING THE CURRENT INVOICE'S SERVICE PERIOD.
- (D) ENTER ALL CERTIFIED MINORITY BUSINESS EXPENDITURES FOR THE TIME PERIOD COVERED BY THE INVOICE:
 - 1. ENTER CERTIFIED MINORITY BUSINESS NAME.
 - 2. ENTER THE CERTIFIED MINORITY BUSINESS FEID NUMBER.
 - 3. ENTER THE CERTIFIED MINORITY BUSINESS CMBE NUMBER.
 - 4. ENTER THE AMOUNT EXPENDED WITH THE CERTIFIED MINORITY BUSINESS FOR THE TIME PERIOD COVERED BY THE INVOICE.
- (E) MBE FORM MUST ACCOMPANY INVOICE PACKAGE SUBMITTED TO DOEA FINANCIAL ADMINISTRATION FOR PROCESSING.
- (F) FINANCIAL ADMINISTRATION WILL FORWARD ALL COMPLETED CMBE FORMS TO CONTRACT ADMINISTRATION & PURCHASING OFFICE.

**ATTACHMENT IX
EXHIBIT 1**

Form instructions for Total Compensation Paid to Non-Profit Personnel Using State Funds

CONTRACT DOCUMENTATION REQUIREMENTS

Section 216.1366, F.S., amended in 2023, establishes new documentation requirements for any contract for services executed amended, or extended on or after July 1, 2023, with non-profit organizations as defined in s. 215.97 (2)(m), F.S. The contract must require the contractor to provide documentation that indicates the amount of state funds:

- Allocated to be used during the full term of the contract for remuneration to any member of the board of directors or an officer of the contractor.
- Allocated under each payment by the public agency to be used for remuneration of any member of the board of directors or an officer of the contractor. The documentation must indicate the amounts and recipients of the remuneration. Such information must be included in the contract tracking system maintained pursuant to s. 215.985 F.S., and must be posted on the contractor's website if the contractor maintains a website.
- As used in this subsection, the term:
 - "Officer" means a Chief Executive Officer (CEO), Chief Financial Officer (CFO), Chief Operating Officer (COO), or any other position performing an equivalent function.
 - "Remuneration" means all compensation earned by or awarded to personnel, whether paid or accrued, regardless of contingency, including bonuses, accrued paid time off, severance payments, incentive payments, contributions to a retirement plan, or in-kind payments, reimbursements, or allowances for moving expenses, vehicles and other transportation, telephone services, medical services, housing, and meals.
 - "State funds" means funds paid from the General Revenue Fund or any state trust fund, funds allocated by the Federal Government and distributed by the state, or funds appropriated by the state for distribution through any grant program. The term does not include funds used for the state Medicaid program.

The attached form will be used to document the compensation to non-profits using state funds.

This memorandum does not supersede the requirements outlined in Chief Financial Officer Memorandum No. 1.

If you have any questions, please call the Bureau of Auditing at (850) 413-5512.

FLORIDA ACCOUNTABILITY CONTRACT TRACKING SYSTEM (FACTS) REQUIREMENTS

Section (s.) 215.985, Florida Statutes (F.S.), amended in 2023, requires that each contract for which a state entity makes a payment pursuant to a contract executed, amended, or extended on or after July 1, 2023, the state entity shall post any documents submitted pursuant to s. 216.1366 F.S., which indicates the use of state funds as remuneration under the contract or a specified payment associated with the contract on the contract tracking system.

1. Are you a nonprofit organization as described in the in s. 215.97 (2)(m)?

☐ No

☒ Yes

If yes, move on to question 2. If no, this form is not applicable to you.

2. Are any of the Officers, as described above, or any member of the Board of Director paid with state funds under this contract?

☐ No

☒ Yes

If yes, please complete the DOEA Total Compensation Paid to Non-Profit Personnel Using State Funds attachment for each Individual this applies to.

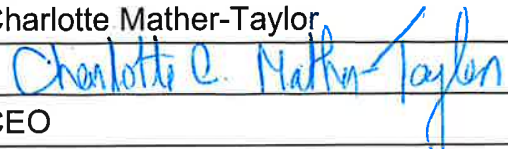
If no, Please fill in the identifying information and certification statement on the attachment below.

Name: **Charlotte Mather-Taylor**

Title: **Chief Executive Officer**

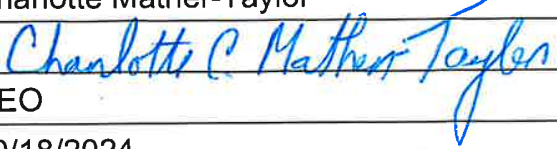
Date: **10/18/2024**

ATTACHMENT IX**DOEA Total Compensation Paid to Non-Profit Personnel Using State Funds**

Name:	Charlotte Mather-Taylor	
Title:	Chief Executive Officer	
Agency Agreement/Contract #	JA025	
Total Contract Amount		
Contract Term:	1/1/2025 - 12/31/2025	
Line Item Budget Category	Total Amount Paid	Amount Paid from State Funds
Salaries	208,719	105,272
Fringe Benefits	29,154	14,661
Bonuses		
Accrued Paid Time Off		
Severance Payments		
Retirement Contributions	12,523	6,316
In-Kind Payments		
Incentive Payments		
Reimbursements/Allowances		
Moving Expenses		
Transportation Costs		
Telephone Services		
Medical Services Costs		
Housing Costs		
Meals		
CERTIFICATION: I certify that the amounts listed above are true and accurate and in accordance with the approved budget.		
Name:	Charlotte Mather-Taylor	
Signature:		
Title:	CEO	
Date:	10/18/2024	

ATTACHMENT IX

DOEA Total Compensation Paid to Non-Profit Personnel Using State Funds

Name:	Rosario Mendez-Rubio	
Title:	Chief Financial Officer	
Agency Agreement/Contract #	JA025	
Total Contract Amount		
Contract Term:	1/1/2025 - 12/31/2025	
Line Item Budget Category	Total Amount Paid	Amount Paid from State Funds
Salaries	124,372	31,365
Fringe Benefits	21,663	5,455
Bonuses		
Accrued Paid Time Off		
Severance Payments		
Retirement Contributions	7,462	1,881
In-Kind Payments		
Incentive Payments		
Reimbursements/Allowances		
Moving Expenses		
Transportation Costs		
Telephone Services		
Medical Services Costs		
Housing Costs		
Meals		
CERTIFICATION: I certify that the amounts listed above are true and accurate and in accordance with the approved budget.		
Name:	Charlotte Mather-Taylor	
Signature:		
Title:	CEO	
Date:	10/18/2024	

**ATTACHMENT X
BUDGET SUMMARY**

	(1) Federal Funding	(2) General Revenue	(3) Local Match/ CCE/HCE	(4) TOTAL FUNDS
1. Area Agency Admin				
A. Current Year	\$928,922.00	\$27,812.00		\$956,734.00
CONTRACT TOTAL	\$928,922.00	\$27,812.00	\$0.00	\$956,734.00
B. CCE GR Administration			\$34,035.00	\$34,035.00
C. HCE GR Administration			\$79,785.00	\$79,785.00
D. LSP Admin			\$21,984.00	\$21,984.00
E. LSP Services			\$146,024.67	\$146,024.67
F. Local Match				\$0.00
TOTAL ADMIN	\$928,922.00	\$27,812.00	\$281,828.67	\$1,238,562.67
2. Title IIIB				
A. Supportive Services				
(1) Current Year	\$3,856,161.00		\$428,462.33	\$4,284,623.33
TOTAL	\$3,856,161.00		\$428,462.33	\$4,284,623.33
B. IIIB Set-Aside (also included in Total)	\$105,000.00			\$105,000.00
C. IIIB Disaster Recovery Reserve (also included in Total)	\$4,573.00			\$4,573.00
3. Title IIIC1 Nutrition Services				
A. Current Year	\$1,598,078.50		\$177,564.28	\$1,775,642.78
TOTAL	\$1,598,078.50		\$177,564.28	\$1,775,642.78
B. IIIC1 Disaster Recovery Reserve (also included in Total)	\$6,860.00			\$6,860.00
4. Title IIIC2 Nutrition Services				
A. Current Year	\$2,304,156.50		\$256,017.39	\$2,560,173.89
TOTAL	\$2,304,156.50		\$256,017.39	\$2,560,173.89
B. IIIC2 Disaster Recovery Reserve (also included in Total)	\$6,860.00			\$6,860.00
5. Title IIID Preventive Health				
A. Current Year	\$143,035.00			\$143,035.00
TOTAL	\$143,035.00			\$143,035.00
6. Title IIIE Caregiver Support Services				
A. Current Year	\$999,297.00		\$111,033.00	\$1,110,330.00
TOTAL	\$999,297.00		\$111,033.00	\$1,110,330.00
7. NSIP				
A. Current Year	\$380,922.00			\$380,922.00
TOTAL	\$380,922.00			\$380,922.00
8. Total Federal Current Year Funds Awarded (Sum of 1.A, 2.A(1), 3.A, 4.A, 5.A., 6.A, 7.A)	\$10,210,572.00			
9. Total GR Awarded (Total of column 2)		\$27,812.00		
10. Total of All Funds to be Received (Sum of 8 & 9)				\$10,238,384.00

ATTACHMENT XI **INVOICE SCHEDULE**

Report Number	Based On	Submit to State On This Date
1- JA025ADV1	January Advance*	January 12
2- JA025ADV2	February Advance*	January 12
3- JA025JAN	January Receipts and Expenditure Report and Request for Payment	February 15
4- JA025FEB	February Receipts and Expenditure Report and Request for Payment	March 15
5- JA025MAR	March Receipts and Expenditure Report and Request for Payment	April 15
6- JA025APR	April Receipts and Expenditure Report and Request for Payment	May 15
7- JA025MAY	May Receipts and Expenditure Report and Request for Payment	June 15
8- JA025JUN	June Receipts and Expenditure Report and Request for Payment	July 15
9- JA025JUL	July Receipts and Expenditure Report and Request for Payment	August 15
10- JA025AUG	August Receipts and Expenditure Report and Request for Payment	September 15
11- JA025SEP	September Receipts and Expenditure Report and Request for Payment	October 15
12- JA025OCT	October Receipts and Expenditure Report and Request for Payment	November 15
13- JA025NOV	November Receipts and Expenditure Report and Request for Payment	December 15
14- JA025DEC	December Receipts and Expenditure Report and Request for Payment	January 15
15- JA025FIN	Final Receipts and Expenditure Report and Request for Payment	February 15
16- JA025CLO	Closeout Report	March 1

Legend: * Advance based on projected cash need as supported by a cash-flow analysis or other information appropriate to demonstrate the contractor's financial need for the advance. January and February advances submitted in its entirety after this date will not be reviewed by the Department.

Note # 1: Report #1 for Advance Basis Agreements cannot be submitted to the Department of Financial Services (DFS) prior to January 1 or until the agreement with the Department has been executed and a copy sent to DFS. Actual submission of the vouchers to DFS is dependent on the accuracy of the Receipts and Expenditure report.

Note # 2: Advance recoupment shall start with the third monthly Request for Payment submission. The amount of recoupment shall be equally divided between the remaining number of Requests for Payment invoices due for the contract year. All advances should be recorded in Part C,1 of the report (attachment XI), and shall be fully recouped by the end of the contract year or when funds are fully expended, whichever is first.

Note #3: Submission of Receipts and Expenditure reports may or may not generate a payment request. If the final Receipts and Expenditure report reflects funds due back to the Department, payment is to accompany the report.

ATTACHMENT XI
TITLE III-D PROGRAMMATIC REPORTING SCHEDULE
EXHIBIT 2

Program Name	Report	Reporting Requirement	Service Month	Report Due Date
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 1	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	January	February 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 2	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	February	March 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 3	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	March	April 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 4	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	April	May 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 5	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	May	June 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 6	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	June	July 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 7	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	July	August 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 8	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	August	September 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 9	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	September	October 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 10	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	October	November 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 11	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	November	December 15
Title IIID Evidence-based Disease Prevention and Health Promotion Services	Report 12	Submit monthly programmatic reports as specified in Attachment I Section II.D.2.J. Title IIID Reports (this report is on Excel)	December	January 15

ATTACHMENT XII REQUEST FOR PAYMENT

PROVIDER NAME, ADDRESS, PHONE & FED ID NUMBER 	TYPE OF REPORT: Advance _____ Reimbursement _____ PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____																																																															
CERTIFICATION: I hereby certify to the best of my knowledge that this request conforms with the terms and the purposes set forth in the above contract.																																																																	
Prepared By: _____	Date: _____	Approved By: _____																																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">PART A:</th> <th style="width: 10%;">(1)</th> <th style="width: 10%;">(2)</th> <th style="width: 10%;">(3)</th> <th style="width: 10%;">(4)</th> <th style="width: 10%;">(5)</th> <th style="width: 10%;">(6)</th> <th style="width: 10%;">(7)</th> <th style="width: 10%;">(8)</th> </tr> <tr> <td>BUDGET SUMMARY</td> <td>ADMIN.</td> <td>IIIB</td> <td>IIIC1</td> <td>IIIC2</td> <td>IIID</td> <td>IIIE</td> <td>NSIP</td> <td>TOTAL</td> </tr> <tr> <td>1. Approved Contract Amount</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>2. Previous Funds RECEIVED for Contract period</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>3. Contract Balance (Line 1 minus line 2)</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>4. Previous Funds REQUESTED and Not Received.</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>5. Contract Balance (Line 3 minus line 4)</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> </table>			PART A:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	BUDGET SUMMARY	ADMIN.	IIIB	IIIC1	IIIC2	IIID	IIIE	NSIP	TOTAL	1. Approved Contract Amount	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2. Previous Funds RECEIVED for Contract period	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3. Contract Balance (Line 1 minus line 2)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4. Previous Funds REQUESTED and Not Received.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5. Contract Balance (Line 3 minus line 4)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PART A:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)																																																									
BUDGET SUMMARY	ADMIN.	IIIB	IIIC1	IIIC2	IIID	IIIE	NSIP	TOTAL																																																									
1. Approved Contract Amount	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
2. Previous Funds RECEIVED for Contract period	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
3. Contract Balance (Line 1 minus line 2)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
4. Previous Funds REQUESTED and Not Received.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
5. Contract Balance (Line 3 minus line 4)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">PART B:</th> <th style="width: 10%;">(1)</th> <th style="width: 10%;">(2)</th> <th style="width: 10%;">(3)</th> <th style="width: 10%;">(4)</th> <th style="width: 10%;">(5)</th> <th style="width: 10%;">(6)</th> <th style="width: 10%;">(7)</th> <th style="width: 10%;">(8)</th> </tr> <tr> <td>FUNDS REQUESTED</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>1. 1st-2nd Months Request Only</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>2. Net Expenditures For Month</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>3. Total</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> </table>									PART B:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	FUNDS REQUESTED									1. 1st-2nd Months Request Only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2. Net Expenditures For Month	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3. Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00												
PART B:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)																																																									
FUNDS REQUESTED																																																																	
1. 1st-2nd Months Request Only	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
2. Net Expenditures For Month	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
3. Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">PART C:</th> <th style="width: 10%;">(1)</th> <th style="width: 10%;">(2)</th> <th style="width: 10%;">(3)</th> <th style="width: 10%;">(4)</th> <th style="width: 10%;">(5)</th> <th style="width: 10%;">(6)</th> <th style="width: 10%;">(7)</th> <th style="width: 10%;">(8)</th> </tr> <tr> <td>NET FUNDS REQUESTED:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>1. Less: Over-Advance</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>2. Contract Funds are Hereby Requested</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> </table>									PART C:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	NET FUNDS REQUESTED:									1. Less: Over-Advance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2. Contract Funds are Hereby Requested	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																					
PART C:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)																																																									
NET FUNDS REQUESTED:																																																																	
1. Less: Over-Advance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
2. Contract Funds are Hereby Requested	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00																																																									
List of Services / Units / Rates provided - See attached report.																																																																	
DOE FORM 106A revised 10/19/18					DOE Use Only																																																												

ATTACHMENT XIII
RECEIPTS AND EXPENDITURE REPORT
EXHIBIT 1

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE: Title III & General Revenue Administration PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS	1. Approved Budget	2. Actual Receipts For This Report	3. Total Receipts Year to Date	4. Percent of Approved Budget
1. Federal Funds	\$0.00	\$0.00	\$0.00	#DIV/0!
2. State Funds	\$0.00	\$0.00	\$0.00	#DIV/0!
3. Local Cash Match	\$0.00	\$0.00	\$0.00	#DIV/0!
4. State Match	\$0.00	\$0.00	\$0.00	#DIV/0!
5. Local In-Kind Match	\$0.00	\$0.00	\$0.00	#DIV/0!
6. TOTAL RECEIPTS	\$0.00	\$0.00	\$0.00	#DIV/0!
PART B : CONTRACTED EXPENDITURES	1. Approved Budget	2. Expenditures For This Report	3. Expenditures Year to Date	4. Percent of Approved Budget
1. Administrative Expenses	\$0.00	\$0.00	\$0.00	#DIV/0!
PART C : OTHER EXPENDITURES (For tracking purposes only)	1. Approved Budget	2. Expenditures For This Report	3. Expenditures Year to Date	4. Percent of Approved Budget
1. Match: CCE / GR	\$0.00	\$0.00	\$0.00	#DIV/0!
HCE / GR	\$0.00	\$0.00	\$0.00	#DIV/0!
Other and In-Kind	\$0.00	\$0.00	\$0.00	#DIV/0!
2. Local Match	\$0.00	\$0.00	\$0.00	#DIV/0!
3. TOTAL	\$0.00	\$0.00	\$0.00	#DIV/0!
D: INTEREST				
1. Earned on Advances	\$0.00			
2. Returned on Advances	\$0.00			

ATTACHMENT XIII

EXHIBIT 2

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE: Title III IIIB PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS 1. Federal Funds 2. State Funds 3. Program Income - Non Match 4. Local Cash Match 5. SUBTOTAL: CASH RECEIPTS 6. Local In-Kind Match 7. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART B : EXPENDITURES 1. AAA Direct Services 2. Subcontractor 3. IIIB Set Aside 4. IIIB Set Aside DRR (Disaster Recovery Reserve) 5. TOTAL EXPENDITURES	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART C : OTHER EXPENDITURES (For Tracking Purposes only) 1. Match a. Other and In-Kind b. Local Match 2. Program Income 3. TOTAL OTHER	1. Approved Budget \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0!
PART D: INTEREST 1. Earned on Advances <u> \$0.00 </u> 2. Return on Advances <u> \$0.00 </u> 3. Other Earned <u> \$0.00 </u>				

ATTACHMENT XIII

EXHIBIT 3

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE: Title III C1 PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS 1. Federal Funds 2. State Funds 3. Program Income - Non Match 4. Local Cash Match 5. SUBTOTAL: CASH RECEIPTS 6. Local In-Kind Match 7. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART B : EXPENDITURES 1. Subcontractor 2. C1 Set Aside DRR (Disaster Recovery Reserve) 3. TOTAL EXPENDITURES	1. Approved Budget \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0!
PART C : OTHER EXPENDITURES (For Tracking Purposes only) 1. Match a. Other and In-Kind b. Local Match 2. Program Income 3. TOTAL OTHER	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART D: INTEREST 1. Earned on Advances <u> \$0.00 </u> 2. Return on Advances <u> \$0.00 </u> 3. Other Earned <u> \$0.00 </u>				

ATTACHMENT XIII

EXHIBIT 4

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE: Title III C2 PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS 1. Federal Funds 2. State Funds 3. Program Income - Non Match 4. Local Cash Match 5. SUBTOTAL: CASH RECEIPTS 6. Local In-Kind Match 7. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART B : EXPENDITURES 1. Subcontractor 2. C2 Set Aside DRR (Disaster Recovery Reserve) 3. TOTAL EXPENDITURES	1. Approved Budget \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0!
PART C : OTHER EXPENDITURES (For Tracking Purposes only) 1. Match a. Other and In-Kind b. Local Match 2. Program Income 3. TOTAL OTHER	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART D: INTEREST 1. Earned on Advances <u> \$0.00 </u> 2. Return on Advances <u> \$0.00 </u> 3. Other Earned <u> \$0.00 </u>				

ATTACHMENT XIII

EXHIBIT 5

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE: <div style="text-align: center;">Title III</div> <div style="text-align: center;">IIID</div> <div style="text-align: center;">PSA _____</div>	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS 1. Federal Funds 2. TOTAL RECEIPTS	1. Approved Budget <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	2. Actual Receipts For This Report <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	3. Total Receipts Year to Date <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	4. Percent of Approved Budget <div style="text-align: right;">#DIV/0!</div> <div style="text-align: right;">#DIV/0!</div>
PART B : EXPENDITURES 1. AAA Direct Services 2. Subcontractor 3. TOTAL EXPENDITURES	1. Approved Budget <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	2. For This Report <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	3. Year to Date <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div> <div style="text-align: right;">\$0.00</div>	4. Percent of Approved Budget <div style="text-align: right;">#DIV/0!</div> <div style="text-align: right;">#DIV/0!</div> <div style="text-align: right;">#DIV/0!</div>
PART C : OTHER EXPENDITURES (For Tracking Purposes only) 1. Program Income	1. Approved Budget <div style="text-align: right;">\$0.00</div>	2. Expenditures For This Report <div style="text-align: right;">\$0.00</div>	3. Expenditures Year to Date <div style="text-align: right;">\$0.00</div>	4. Percent of Approved Budget <div style="text-align: right;">#DIV/0!</div>
PART D: INTEREST 1. Earned on Advances <u>\$0.00</u> 2. Return on Advances <u>\$0.00</u> 3. Other Earned <u>\$0.00</u>				

ATTACHMENT XIII

EXHIBIT 6

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE : Title III IIIIE PSA _____	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A : BUDGETED INCOME/ RECEIPTS 1. Federal Funds 2. State Funds 3. Program Income - Non Match 4. Local Cash Match 5. SUBTOTAL: CASH RECEIPTS 6. Local In-Kind Match 7. TOTAL RECEIPTS	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	2. Actual Receipts For This Report \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	3. Total Receipts Year to Date \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART B : EXPENDITURES 1. AAA Direct Services 2. Sub-Contracted Services 3. TOTAL EXPENDITURES	1. Approved Budget \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0!
PART C : OTHER EXPENDITURES (For Tracking Purposes only) 1. Match a. Other and In-Kind b. Local Match 2. Program Income 3. TOTAL OTHER	1. Approved Budget \$0.00 \$0.00 \$0.00 \$0.00	2. Expenditures For This Report \$0.00 \$0.00 \$0.00 \$0.00	3. Expenditures Year to Date \$0.00 \$0.00 \$0.00 \$0.00	4. Percent of Approved Budget #DIV/0! #DIV/0! #DIV/0! #DIV/0!
PART D : EXPENDITURES ANALYSIS 1. Expenditures by Services Year to Date: 1. Information..... \$0.00 2. Assistance..... \$0.00 3. Counseling..... \$0.00 4. Respite..... \$0.00 5. Supplemental Services..... \$0.00 6. TOTAL..... \$0.00	2. Units of Services Year to Date 0 0 0 0 0		3. Number of People Served Year to Date 0 0 0 0 0	
Part B Line 3, column 3 should be equal to this total.				
PART E : GRANDPARENT SERVICES (reported by Federal Fiscal Year) FFY _____ \$ _____ FFY _____ \$ _____ FFY _____ \$ _____ Match \$ _____ Match \$ _____ Match \$ _____				
PART F: INTEREST 1. Earned on Advances _____ \$0.00 2. Returned on Advances _____ \$0.00 3. Other Earned _____ \$0.00				

DOEA FORM 105as-IIIIE revised 10/19/18

ATTACHMENT XIII

EXHIBIT 7

PROVIDER NAME, ADDRESS, PHONE# AND FEID# 0 0 0 0 0 0 0 0 0	PROGRAM FUNDING SOURCE : <div style="text-align: center;">Title III</div> <div style="text-align: center;">NSIP</div> <div style="text-align: center;">PSA _____</div>	Contract # _____ Contract Period: _____ Report Period _____ Report # _____ Invoice# _____		
CERTIFICATION : I certify to the best of my knowledge and belief that this report is complete and all outlays herein are for purposes set forth in the contract.				
Prepared by : _____ Date : _____ Approved by : _____ Date : _____				
PART A: EXPENDITURE COMPUTATION 1. Number of Meals Served 2. Line 1 Times \$.72 cents per Meal	YEAR TO DATE		CURRENT MONTH	
	CONGREGATE	HOME DELIVERED	CONGREGATE	HOME DELIVERED
	0	0	0	0
	\$0.00	\$0.00	\$0.00	\$0.00
	Year To Date Total Meals _____ 0		Current Month Total Meals _____ 0	
Year To Date Total Expenditures _____ \$0.00		Total Current Expenditures _____ \$0.00		
PART B: CONTRACT SUMMARY 1. Approved Contract Amount 2. Actual Expenditures for this Report 3. Total Expenditures Year to Date 4. Contract Balance	<div style="margin-top: 10px;">\$0.00</div> <div style="margin-top: 10px;">\$0.00</div> <div style="margin-top: 10px;">\$0.00</div> <div style="margin-top: 10px;">\$0.00</div>			

DOEA FORM 105as-NSIP revised 10/19/18

ATTACHMENT XIV **COMPUTATION OF CARRYFORWARD AND OVERADVANCE OAA TITLE III**

PSA _____

Contract Period: _____

Contract # _____

	AAA ADMINISTRATION		TITLE III B	TITLE III C1	TITLE III C2	TITLE III D	TITLE III E	NSIP	TOTAL
	FED FUND	GEN REV	FED FUND	FED FUND	FED FUND	FED FUND	FED FUND	FED FUND	
<u>CARRYFORWARD</u>									
1. CURRENT YEAR FUNDING : FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2. PRIOR YEAR CARRYFORWARD: FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3. PRIOR YEAR CARRYFORWARD: FFY _____	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. CONTRACT TOTALS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5. NET EXPENDITURES FOR CONTRACT YEAR	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6. CURRENT FFY CARRYFORWARD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7. CARRYFORWARD PERCENTAGE	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!	✓ #DIV/0!
<u>OVERADVANCES</u>									
8. TOTAL FUNDS ADVANCED AND/OR REIMBURSED	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9. LESS: EXPENDITURES FROM LINE 5	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10. AMOUNT OF OVERADVANCE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

11. REPORT APPROVED FOR AAA BY:

Signature _____

Date _____

12. REPORT APPROVED BY DOEA DIVISION OF FINANCIAL ADMINISTRATION:

Signature _____

Date _____

13. REPORT APPROVED BY DOEA CONTRACT MANAGEMENT:

Signature _____

Date _____

ATTACHMENT XV COST REIMBURSEMENT SUMMARY

PSA _____		Contract # _____		
		Contract Period: _____		
		Report Period _____		
		Report # _____		
Budget Category	Description	Number of units	Amount	
Administration				
	TOTAL ADMINISTRATION			\$0.00
	Expenses			
TOTAL EXPENSES			\$0.00	

ATTACHMENT XVI SERVICE RATE REPORT

Program: Federally Funded		From 01/01/2025-12/31/2025		
Program	Service	Method of Payment	High Reimbursement/Unit Rate	Unit Type
ADMIN	ADMINISTRATIVE COSTS*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	ADMINISTRATIVE COSTS (LAN SET ASIDE)*	Cost Reimbursement	Cost Reimbursement	Episode
OA3B	ADULT DAY CARE	Fixed Fee/Unit Rate	\$209.00	DAYS
OA3B	ADULT DAY HEALTH CARE	Fixed Fee/Unit Rate	\$209.00	DAYS
OA3B	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$44.00	EPISODE
OA3B	CAREGIVER SUPPORT GROUPS	Fixed Fee/Unit Rate	\$141.46	EPISODE
OA3B	CAREGIVER TRAIN/SUPPORT (GROUP)	Fixed Fee/Unit Rate	\$161.70	HOURL
OA3B	CAREGIVER TRAIN/SUPPORT (INDIVIDUAL)	Fixed Fee/Unit Rate	\$148.50	HOURL
OA3B	CASE AIDE	Fixed Fee/Unit Rate	\$60.63	HOURL
OA3B	CASE MANAGEMENT	Fixed Fee/Unit Rate	\$121.28	HOURL
OA3B	CHORE*	Cost Reimbursement	Cost Reimbursement	HOURL
OA3B	CHORE	Fixed Fee/Unit Rate	\$119.00	HOURL
OA3B	CHORE (ENHANCED)*	Cost Reimbursement	Cost Reimbursement	HOURL
OA3B	CHORE (ENHANCED)	Fixed Fee/Unit Rate	\$76.08	HOURL
OA3B	COMPANIONSHIP	Fixed Fee/Unit Rate	\$53.13	HOURL
OA3B	COUNSELING (GERONTOLOGICAL) - GROUP	Fixed Fee/Unit Rate	\$140.80	HOURL
OA3B	COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	Fixed Fee/Unit Rate	\$168.94	HOURL
OA3B	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP	Fixed Fee/Unit Rate	\$159.50	HOURL
OA3B	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	Fixed Fee/Unit Rate	\$233.22	HOURL
OA3B	DIRECT PAY RESPITE	Fixed Fee/Unit Rate	\$21.05	HOURL
OA3B	EDUCATION/TRAINING - GROUP	Fixed Fee/Unit Rate	\$159.50	EPISODE
OA3B	EDUCATION/TRAINING - INDIVIDUAL	Fixed Fee/Unit Rate	\$148.50	EPISODE
OA3B	EMERGENCY ALERT RESPONSE	Fixed Fee/Unit Rate	\$2.54	DAYS
OA3B	EMERGENCY ALERT RESPONSE (INSTALL)	Fixed Fee/Unit Rate	\$57.40	EPISODE
OA3B	ESCORT	Fixed Fee/Unit Rate	\$28.44	HOURL
OA3B	HEALTH SUPPORT - GROUP	Fixed Fee/Unit Rate	\$149.52	HOURL
OA3B	HEALTH SUPPORT - INDIVIDUAL	Fixed Fee/Unit Rate	\$71.50	HOURL
OA3B	HOME HEALTH AIDE SERVICE	Fixed Fee/Unit Rate	\$35.20	HOURL
OA3B	HOMEMAKER	Fixed Fee/Unit Rate	\$76.02	HOURL
OA3B	HOUSING IMPROVEMENT*	Cost Reimbursement	Cost Reimbursement	EOUSIDE
OA3B	HOUSING IMPROVEMENT	Fixed Fee/Unit Rate	\$80.85	EPISODE
OA3B	INFORMATION	Fixed Fee/Unit Rate	\$44.00	EPISODE
OA3B	INTAKE	Fixed Fee/Unit Rate	\$105.05	HOURL
OA3B	INTERPRETING/TRANSLATING	Fixed Fee/Unit Rate	\$133.10	HOURL
OA3B	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$217.14	HOURL
OA3B	MATERIAL AID*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	OCCUPATIONAL THERAPY	Fixed Fee/Unit Rate	\$165.00	HOURL
OA3B	OUTREACH	Fixed Fee/Unit Rate	\$177.43	EPISODE
OA3B	PERSONAL CARE	Fixed Fee/Unit Rate	\$69.19	HOURL
OA3B	PET SUPPORT SERVICES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	RECREATION	Fixed Fee/Unit Rate	\$82.50	HOURL

OA3B	RECREATION MATERIALS*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	RECREATION MATERIALS*	Fixed Fee/Unit Rate	\$25.85	EPISODE
OA3B	REFERRAL/ASSISTANCE	Fixed Fee/Unit Rate	\$91.53	EPISODE
OA3B	RESPIRE IN-FACILITY	Fixed Fee/Unit Rate	\$25.30	HOURL
OA3B	RESPIRE IN-HOME	Fixed Fee/Unit Rate	\$48.51	HOURL
OA3B	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$142.01	HOURL
OA3B	SHOPPING ASSISTANCE	Fixed Fee/Unit Rate	\$55.87	ONE-WAY TRIP
OA3B	SKILLED NURSING SERVICES	Fixed Fee/Unit Rate	\$88.00	HOURL
OA3B	SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	TECHNOLOGY*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	TECHNOLOGY - EQUIPMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	TECHNOLOGY - INSTALL*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	TECHNOLOGY - STAFF SUPPORT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3B	TRANSPORTATION*	Cost Reimbursement	Cost Reimbursement	ONE WAY TRIP
OA3B	TRANSPORTATION	Fixed Fee/Unit Rate	\$69.97	ONE WAY TRIP
OA3B	TRANSPORTATION - GROUP	Fixed Fee/Unit Rate	\$69.97	ONE WAY TRIP
OA3B	TRANSPORTATION TO MEAL SITE FOR MANAGED LONG-TERM CARE CLIENTS	Fixed Fee/Unit Rate	\$69.97	ONE WAY TRIP
O3C1	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$44.00	EPISODE
O3C1	CONGREGATE MEALS	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE HOLIDAY/EMERGENCY SHELF MEALS	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS (SCREENING)	Fixed Fee/Unit Rate	\$71.60	MEAL
O3C1	CONGREGATE MEALS BREAKFAST	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS FOR MANAGED LONG-TERM CARE CLIENTS	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS FOR MANAGED LONG-TERM CARE CLIENTS BREAKFAST	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS -GRAB AND GO	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS GUEST	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	CONGREGATE MEALS VOLUNTEERS	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C1	EMERGENCY HOME DELIVERED SHELF MEALS	Fixed Fee/Unit Rate	\$13.00	MEAL
O3C1	NUTRITION COUNSELING - INDIVIDUAL	Fixed Fee/Unit Rate	\$105.60	HOURL
O3C1	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$18.05	EPISODE
O3C1	OUTREACH	Fixed Fee/Unit Rate	\$79.85	EPISODE
O3C1	SHOPPING ASSISTANCE	Fixed Fee/Unit Rate	\$54.33	ONE WAY TRIP
O3C2	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$44.00	EPISODE
O3C2	EMERGENCY HOME DELIVERED SHELF MEALS	Fixed Fee/Unit Rate	\$21.36	MEAL
O3C2	HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	HOME DELIVERED MEALS BREAKFAST	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	HOME DELIVERED MEALS - FROZEN	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	HOME DELIVERED MEALS -GRAB AND GO	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	HOME DELIVERED MEALS - GUEST	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	HOME DELIVERED MEALS - HOT	Fixed Fee/Unit Rate	\$21.83	MEAL
O3C2	NUTRITION COUNSELING - INDIVIDUAL	Fixed Fee/Unit Rate	\$105.60	HOURL
O3C2	NUTRITION EDUCATION	Fixed Fee/Unit Rate	\$19.69	EPISODE
O3C2	OUTREACH	Fixed Fee/Unit Rate	\$79.85	EPISODE
O3C2	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$103.95	HOURL

O3C2	SHOPPING ASSISTANCE	Fixed Fee/Unit Rate	\$55.98	ONE WAY TRIP
OA3D	A MATTER OF BALANCE (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$6,270.00	EPISODE
OA3D	ACTIVE LIVING EVERY DAY (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$7,768.86	EPISODE
OA3D	ARTHRITIS FOUNDATION EXERCISE PROGRAM (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$5,814.39	EPISODE
OA3D	ARTHRITIS FOUNDATION TAI CHI PROGRAM (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$8,800.00	EPISODE
OA3D	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$44.00	EPISODE
OA3D	BINGOCIZE	Fixed Fee/Unit Rate	\$4,415.79	EPISODE
OA3D	CHRONIC DISEASE SELF-MANAGEMENT PROGRAM (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$6,614.22	EPISODE
OA3D	CHRONIC PAIN SELF MANAGEMENT PROGRAM	Fixed Fee/Unit Rate	\$5,435.89	EPISODE
OA3D	DIABETES EMPOWERMENT EDUCATION PROGRAM (GROUP) (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$7,363.87	EPISODE
OA3D	DIABETES SELF-MANAGEMENT PROGRAM (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$6,270.00	EPISODE
OA3D	ENHANCE WELLNESS (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$563.89	HOURL
OA3D	ENHANCEFITNESS (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$4,400.00	HOURL
OA3D	FIT AND STRONG! (EVIDENCED-BASED PROGRAM)	Fixed Fee/Unit Rate	\$4,794.54	EPISODE
OA3D	HEALTHY EATING EVERY DAY (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$7,146.33	EPISODE
OA3D	HOMEMEDS (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$95.36	HOURL
OA3D	PEARLS (SCREENING) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (ENROLLMENT) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 1) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 2) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 3) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 4) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 5) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 6) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 7) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (SESSION 8) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	PEARLS (DISCHARGE) (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.57	EPISODE
OA3D	POWERFUL TOOLS FOR CAREGIVERS (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$7,012.50	EPISODE
OA3D	PROGRAMA DE MANEJO PERSONAL DE LA DIABETES (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$6,270.00	EPISODE
OA3D	SAVVY CAREGIVER (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$5,939.53	EPISODE
OA3D	STAY ACTIVE AND INDEPENDENT FOR LIFE (EVIDENCE-BASED)	Fixed Fee/Unit Rate	\$224.62	HOURL
OA3D	TAI CHI:MOVING FOR BETTER BALANCE (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$13,200.00	EPISODE
OA3D	TCARE*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3D	TECHNOLOGY*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3D	TECHNOLOGY - EQUIPMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3D	TECHNOLOGY - INSTALL*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3D	TECHNOLOGY - STAFF SUPPORT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3D	TOMANDO CONTROL DE SU SALUD (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$8,800.00	EPISODE
OA3D	UN ASUNTO DE EQUILIBRIO (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$6,270.00	EPISODE
OA3D	WALK WITH EASE (EVIDENCE-BASED PROGRAM)	Fixed Fee/Unit Rate	\$5,746.05	EPISODE
OA3E	ADULT DAY CARE	Fixed Fee/Unit Rate	\$220.00	DAYS
OA3E	ADULT DAY HEALTH CARE	Fixed Fee/Unit Rate	\$209.00	DAYS
OA3E	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$44.00	EPISODE
OA3E	CAREGIVER SUPPORT GROUPS	Fixed Fee/Unit Rate	\$900.72	EPISODE
OA3E	CAREGIVER TRAINING/SUPPORT (GROUP)	Fixed Fee/Unit Rate	\$874.22	HOURL

OA3E	CAREGIVER TRAINING/SUPPORT (INDIVIDUAL)	Fixed Fee/Unit Rate	\$183.36	HOURL
OA3E	CASE AIDE	Fixed Fee/Unit Rate	\$60.63	HOURL
OA3E	COUNSELING (GERONTOLOGICAL) - GROUP	Fixed Fee/Unit Rate	\$140.80	HOURL
OA3E	COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	Fixed Fee/Unit Rate	\$168.94	HOURL
OA3E	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP	Fixed Fee/Unit Rate	\$159.50	HOURL
OA3E	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	Fixed Fee/Unit Rate	\$233.22	HOURL
OA3E	DIRECT PAY RESPITE*	Cost Reimbursement	Cost Reimbursement	HOURL
OA3E	DIRECT PAY RESPITE	Fixed Fee/Unit Rate	\$21.32	HOURL
OA3E	EDUCATION/TRAINING - GROUP	Fixed Fee/Unit Rate	\$187.00	EPISODE
OA3E	EDUCATION/TRAINING - INDIVIDUAL	Fixed Fee/Unit Rate	\$102.08	EPISODE
OA3E	EMERGENCY HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$9.35	MEAL
OA3E	FINANCIAL RISK REDUCTION - (ASSESSMENT)	Fixed Fee/Unit Rate	\$135.30	HOURL
OA3E	FINANCIAL RISK REDUCTION - (MAINTENANCE)	Fixed Fee/Unit Rate	\$47.52	HOURL
OA3E	HOMEMAKER	Fixed Fee/Unit Rate	\$45.75	HOURL
OA3E	HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$21.82	MEAL
OA3E	INFORMATION	Fixed Fee/Unit Rate	\$44.00	EPISODE
OA3E	INTAKE	Fixed Fee/Unit Rate	\$79.40	HOURL
OA3E	OUTREACH	Fixed Fee/Unit Rate	\$175.79	EPISODE
OA3E	PET SUPPORT SERVICES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	POWERFUL TOOLS FOR CAREGIVERS	Fixed Fee/Unit Rate	\$7,012.50	EPISODE
OA3E	RECREATION MATERIALS*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	REFERRAL/ASSISTANCE	Fixed Fee/Unit Rate	\$104.39	EPISODE
OA3E	RESPITE IN-FACILITY	Fixed Fee/Unit Rate	\$90.05	HOURL
OA3E	RESPITE IN-HOME	Fixed Fee/Unit Rate	\$61.02	HOURL
OA3E	SAVVY CAREGIVER	Fixed Fee/Unit Rate	\$5,410.88	EPISODE
OA3E	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$111.79	HOURL
OA3E	SHOPPING ASSISTANCE	Fixed Fee/Unit Rate	\$54.33	ONE WAY TRIP
OA3E	TCARE*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	TECHNOLOGY*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	TECHNOLOGY - EQUIPMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	TECHNOLOGY - INSTALL*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	TECHNOLOGY - STAFF SUPPORT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3E	TRANSPORTATION	Fixed Fee/Unit Rate	\$44.34	ONE WAY TRIP
OA3EG	ASSURANCE (TELEPHONE AND IN-PERSON)	Fixed Fee/Unit Rate	\$28.88	EPISODE
OA3EG	CAREGIVER SUPPORT GROUPS	Fixed Fee/Unit Rate	\$156.75	EPISODE
OA3EG	CAREGIVER TRAINING/SUPPORT (GROUP)	Fixed Fee/Unit Rate	\$218.54	HOURL
OA3EG	CAREGIVER TRAINING/SUPPORT (INDIVIDUAL)	Fixed Fee/Unit Rate	\$148.50	HOURL
OA3EG	CASE AIDE	Fixed Fee/Unit Rate	\$60.63	HOURL
OA3EG	CHILD DAY CARE	Fixed Fee/Unit Rate	\$28.63	HOURL
OA3EG	COUNSELING (GERONTOLOGICAL) - GROUP	Fixed Fee/Unit Rate	\$89.65	HOURL
OA3EG	COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	Fixed Fee/Unit Rate	\$51.70	HOURL
OA3EG	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP	Fixed Fee/Unit Rate	\$159.50	HOURL
OA3EG	COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	Fixed Fee/Unit Rate	\$157.30	HOURL
OA3EG	DIRECT PAY SITTE	Fixed Fee/Unit Rate	\$49.48	HOURL
OA3EG	EDUCATION/TRAINING - GROUP	Fixed Fee/Unit Rate	\$256.92	EPISODE

OA3EG	EDUCATION/TRAINING - INDIVIDUAL	Fixed Fee/Unit Rate	\$82.50	EPISODE
OA3EG	HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$21.83	MEAL
OA3EG	EMERGENCY HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$21.83	MEAL
OA3EG	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$207.56	HOURL
OA3EG	OUTREACH	Fixed Fee/Unit Rate	\$42.38	EPISODE
OA3EG	PET SUPPORT SERVICES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	RECREATION MATERIALS*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	REFERRAL/ASSISTANCE	Fixed Fee/Unit Rate	\$51.70	EPISODE
OA3EG	SCREENING & ASSESSMENT	Fixed Fee/Unit Rate	\$103.95	HOURL
OA3EG	SHOPPING ASSISTANCE	Fixed Fee/Unit Rate	\$45.38	ONE WAY TRIP
OA3EG	TECHNOLOGY*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	TECHNOLOGY - EQUIPMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	TECHNOLOGY - INSTALL*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	TECHNOLOGY - STAFF SUPPORT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3EG	TRANSPORTATION	Fixed Fee/Unit Rate	\$23.62	ONE WAY TRIP
OA3EG	TRANSPORTATION - GROUP	Fixed Fee/Unit Rate	\$9.89	ONE WAY TRIP
OA3ES	CHORE	Fixed Fee/Unit Rate	\$165.00	HOURL
OA3ES	CHORE (ENHANCED)*	Cost Reimbursement	Cost Reimbursement	HOURL
OA3ES	CHORE (ENHANCED)	Fixed Fee/Unit Rate	\$76.08	HOURL
OA3ES	DIRECT PAY HOUSING IMPROVEMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3ES	DIRECT PAY SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3ES	DIRECT PAY SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES	Fixed Fee/Unit Rate	\$1,650.00	EPISODE
OA3ES	EMERGENCY ALERT RESPONSE	Fixed Fee/Unit Rate	\$2.37	DAYS
OA3ES	HOUSING IMPROVEMENT*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3ES	HOUSING IMPROVEMENT	Fixed Fee/Unit Rate	\$1,650.00	EPISODE
OA3ES	LEGAL ASSISTANCE	Fixed Fee/Unit Rate	\$228.32	HOURL
OA3ES	MATERIAL AID*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3ES	MATERIAL AID	Fixed Fee/Unit Rate	\$1,650.00	EPISODE
OA3ES	SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES*	Cost Reimbursement	Cost Reimbursement	EPISODE
OA3ES	SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES	Fixed Fee/Unit Rate	\$1,650.00	EPISODE
OA3ES	SPECIALIZED MEDICAL EQUIPMENT, SERVICES & SUPPLIES VENDOR*	Cost Reimbursement	Cost Reimbursement	EPISODE
NSIP	CONGREGATE AND HOME DELIVERED MEALS	Fixed Fee/Unit Rate	\$0.72	MEAL

*As stipulated in contract, these services are provided on a cost reimbursement basis

(July 2023 – June 2024)

XF305

ATTACHMENT XVII
SIMPLIFIED UNIT COST METHODOLOGY RATE INCREASE REQUEST FORM

BUDGET YEAR:

RECIPIENT NAME:

PRIOR YEAR RATE:

LINE-ITEM EXPENSES	Prior Year Historical Costs	Current Rate	Requested Rate	% Change (between Contract Execution and Requested)
Wages				-
Fringe Benefits (Formula Allocated)				-
Fringe Benefits (Manual Allocation)				-
Travel				-
Education/Training				-
Communications & Postage				-
Utilities				-
Printing & Supplies				-
Advertising				-
Insurance				-
Maintenance & Repair				-
Space Costs (Rent)				-
Equipment				-
Professional fees/Legal/Audit				-
Program Supplies				-
Depreciation				-
Food & Food Supplies				-
Other				-
TOTAL ALLOWABLE COSTS	\$0.00	\$0.00	\$0.00	0.00%



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/14/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Kailey Whitney PHONE (A/C, No. Ext): (561)210-8715 E-MAIL ADDRESS: kailey@wciadvisors.com	FAX (A/C, No): (561)210-8716
Whitney Commercial Insurance Advisors LLC 102 NE 2nd St, Ste 178 Boca Raton, FL 33432	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Philadelphia Indemnity Insurance CO.	NAIC #
INSURED	INSURER B: Employers Insurance Co	10346
AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. 5300 N HIATUS ROAD SUNRISE, FL 33351	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 00001230-0

REVISION NUMBER: 24

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	PHPK2646922-014	03/08/2025	03/08/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			PHPK2646922-014	03/08/2025	03/08/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y	Y	PHUB897701-014	03/08/2025	03/08/2026	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A	EIG5627850-00	09/02/2024	09/02/2025	<input checked="" type="checkbox"/> PER STATUTE E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Professional Liab			PHPK2646922-014	03/08/2025	03/08/2026	Occur / Aggregate \$1M / \$2M

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Pompano Beach is included as Additional Insured under the General Liability policy shown above only insofar as permitted by Florida Statute 768.28 and otherwise allowed by law. Additional Insured status is provided as required by written contract and with respect to operations by or on behalf of the Named Insured.

CERTIFICATE HOLDER

CANCELLATION

City of Pompano Beach 100 West Atlantic Blvd POMPANO BEACH, FL 33060	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE (KSW)

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