NEW YORK STATE SA-111 SUPPLEMENTAL SCHEDULES For the Period: July 1, 2015 to June 30, 2016

SCHEDULE 8B (CFR-3)					
AGENCY					
ADMINISTRATION					

AGENCY NAME:	SCHOOL CODE: (SED ONLY)	٦
AGENCY CODE:		

			AGENCY ADMIN				AGENCY ADMIN
	M DESCRIPTION	COST	TOTALS	Line		COST	TOTALS
No. PERSONAL SERVICE		CODES		No.	EQUIPMENT-PROVIDER PAID (CONTINUED)	CODES	
1 Total Personal Service	s (from CFR-4, Agency Admin.)	11998		21	Depreciation-Vehicle	15041	
2 Vacation Leave Accrua	als	12998		22	Depreciation-Equipment	15060	
				23	Interest-Vehicle	15071	
FRINGE BENEFITS				24	Other (Detail Required)	15997	
3 Mandated Fringe Bene	efits	13201		25	Total Equipment (Sum Lines 19 - 24)	15996	
4 Non-Mandated Fringe	Benefits	13301					
5 Total Fringe Benefits (S	Sum Lines 3 - 4)	13998					
					PROPERTY-PROVIDER PAID		
OTHER THAN PERSO	ONAL SERVICES (OTPS)			26	Lease/Rental-Real Property	16011	
6 Audit/Legal		14200		27	Leasehold/Leasehold Improvements	16021	
7 Utilities		14210		28	Depreciation-Building	16031	
8 Telephone		14220		29	Depreciation-Building/Land Improvements	16050	
9 Repairs and Maintenar	nce	14021		30	Mortgage Interest	16061	
10 Office Supplies and Po	ostage	14161		31	Mortgage Expenses	16071	
11 Organizational Expens	e	14230		32	Insurance-Property & Casualty	16081	
12 Interest - Working Cap	ital	14240		33	Real Estate Taxes	16091	
13 Expensed Equipment		14081		34	Maintenance in Lieu of Rent (LGU only)	16141	
14 Contracted Personal S	ervices	14151		35	Interest on Capital Indebtedness	16101	
15 Staff Travel		14251		36	Other (Detail Required)	16997	
16 Insurance - General		14261		37	Total Property (Sum Lines 26 - 36)	16996	
17 Other (Detail Required)	14997					
18 Total OTPS (Sum Line	s 6 - 17)	14996		38	Parent Agency Administration Allocation	19070	
				39	County Wide Cost Allocation (LGU Only)	19080	
EQUIPMENT-PROVID	ER PAID			40	Total Agency Administration (Sum Lines 1,2,5,18,25,37,38,39)	19090	
19 Lease/Rental-Vehicle		15011		41	Adjustments/Non-Allowable Costs (Detail Required)	19031	
20 Lease/Rental-Equipme	ent	15030		42	Net Agency Administration (Line 40 minus 41)	19998	

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NEW YORK STATE

SA-111 SUPPLEMENTAL SCHEDULES For the Period: July 1, 2015 to June 30, 2016 SCHEDULE 8B (CFR-3)

AGENCY

ADMINISTRATION

aa	e

AGENCY NAME:			SCH	SCHOOL CODE: (SED ONLY)				
AGENCY CODE:								
RATIO VALUE WORKSHEET (AGENCY-WIDE)				ADJUSTED RATIO VALUE WORKSHEET (WITHIN STATE AGENCY)				
Line No.	State Agency	Cost Codes	Amount	Line No.	State Agency	Cost Codes	Amount	
CALCULATION OF OPERATING COSTS *			CAL	CALCULATION OF ADJUSTED OPERATING COSTS ****				
43	OASAS Subtotal	19110		60	OASAS Adjusted Subtotal	19310		
44	OMH Subtotal	19120		61	OMH Adjusted Subtotal	19320		
45	OPWDD Subtotal	19130		62	OPWDD Adjusted Subtotal	19330		
46	SED Subtotal	19140		63	SED Adjusted Subtotal	19340		
47	Shared Programs Subtotal	19150		64	Shared Programs Adjusted Subtotal	19350		
48	Other Programs Subtotal**	19160		CALCULATION OF ADJUSTED RATIO VALUE FACTOR *****				
49 Total Agency Operating Costs 19170		65	OASAS Ratio Value Factor (line 53 divided by line 60)	19410				
CALCULATION OF RATIO VALUE FACTOR			66	OMH Ratio Value Factor (line 54 divided by line 61)	19420			
50	Net Agency Administration (CFR-3, Line 42)	19999		67	OPWDD Ratio Value Factor (line 55 divided by line 62)	19430		
51	Total Agency Operating Costs (CFR-3, Line 49)	19171		68	SED Ratio Value Factor (line 56 divided by line 63)	19440		
52	Ratio Value Factor (Line 50 divided by line 51)	19180		69	Shared Programs Ratio Value Factor (line 57 divided by line 64)	19450		
ALLOCATION OF AGENCY ADMINISTRATION USING RATIO VALUE ***								
53	OASAS Allocation (line 43 x line 52)	19210						
54	OMH Allocation (line 44 x line 52)	19220						
55	OPWDD Allocation (line 45 x line 52)	19230						
56	SED Allocation (line 46 x line 52)	19240						
57	Shared Programs Allocation (line 47 x line 52)	19250						
58	Other Programs Allocation (line 48 x line 52)	19260						
59	Total Agency Administration (sum lines 53 - 58)	19270						

***** The adjusted ratio value factor for each State Agency should appear in the item description column of that State Agency specific CFR-1, line 65.

CFR-3.2

Rev. 26-Sep-2016

^{*} Totals by State Agency from CFR-1, Line 64. Do not report operating costs for programs 0880 and 0890

^{**} This amount must equal the sum of lines 1 through 4 of column 7 on schedule CFR-2. These amounts are not detailed elsewhere in the CFR and, therefore, will not cross foot to CFR-

^{***} For each state agency, the sum of agency administration allocated to each program/site on CFR-1, line 65, must equal the agency administration calculated below

^{****} Totals by State Agency from CFR-1, Line 64. Do not report operating costs for programs 0880 and 0890 and programs which are exempt from agency administration For OMH (line 61), do not include operating costs for programs 0860, 0870, 0920, 1230, 1690, 1910, 2740, 2850, 2860, 2980, 6910, 6920, 8810 and programs with an "A" program code index (startup For OPWDD Specific (line 62), do not include operating costs for programs 2091, 5091 and 7091