Bridges to Career Opportunities: Time & Effort Reporting

Social Innovation Fund

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Today

- ► SIF Accounting Requirements
- Federal Guidelines on Time & Effort Reporting
- Recommendations for Timesheets
- Sample Timesheets

SIF Accounting Requirements

The Grantee must establish accounting codes to distinguish between the three sources as follows:

- For federal SIF funds provided by LISC;
- 2. For non-federal funds provided by LISC; and
- For funds used to meet the Grantee match requirement.

Federal Regulations - Timesheets

2 CFR 200.430 - Allowable Cost Principles

► OMB Circular A-133 - Audits

Why so much attention to timesheets?

- Salaries are often largest part of budget
- Shows distribution of effort based on which projects have benefited
- Area of disallowed costs

► Time & Effort mentioned in the A-133

Cost Allowability

- Reasonable
- Necessary for Program
- Adequately Documented
- Consistent with Organizational Policies
- GAAP
- Allocable

General Standards for Timesheets

After the fact preparation

Completed by someone with "first hand knowledge" of the work

Credible endorsement/signature

General Standards for Timesheets

Disclosure of full workload

Reasonable estimate of time worked

Timely completion and adjustment

Non-Profit Standards for Timesheets

- Budget estimates do not qualify
- Total activity
- Signed by employee
- Prepared at least monthly to correspond to one or more pay periods

Recommended Practices

- Record on a daily or weekly basis
- Effort reporting is part of employee's job
- Reporting follows effort not availability of funds

Common Problems

- Time is recorded based on budget
- Timesheet ≠ General Ledger
- Timesheets not signed by employee & supervisor

Sample Timesheets

TRANSITIONAL HOUSING TIME SHEET

NAME:			v	Vomen's C	Communi	ty Develo	pment Or	g. PAY	PERIOD to
	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL	Trainings attended:
DATE								†	
TIME IN	T	+		1					
TIME OUT						-			Total Hours WORKED:
Personal Time				<u> </u>					Total Hours Paid for:
Total Hours Worked				-	 		-		Total flours I ald for:
TH Program	 			1					Holiday Hours Taken:
Sheila's Place						1	 		Vacation Hours Taken: Sick Hours Taken:
CDBG Transitional Housing Program									Funeral Leave:
Other Program									
TOTAL HOURS									CDBG Holiday: CDBG Vacation:
Accounting Distrib	oution:								CDBG Vacation:
11 (womens)	_ 51 (S	heila's)							
									APPROVAL
EMPLOYEE SIGNATURE:							DATE:	PROGRAM: ADMIN:	

SAMPLE TIMESHEET												/								
Employee Name:									Period	l Ending):									
Division/Departmen t Name:																				
		(Non-			Hours Fundi									Fundin	ng Sources					
		Exe	emp t/ urly nly)									Fundin g Source Name	Funding Source Name	Funding Source Name	Fundin g Source Name	Fundin g Source Name	Fundin g Source Name			
D	ay	l n	O u t	R e g	0 T	Ho lid ay	V a c	Si ck	P er s.	Mi sc	0112- 16 3452 6	0112- 16 3452 6	0112- 16 34526	0110- 96 07- 37892	9856- 16 06- 33136 6	2256- 18 07- 33536 6				To tal
1	16																			
2	17																			
3	18																			
	31																			
Totals:																				
Payroll Use Only:																				
Employee signature: Date:									Supervis	sor signatu	ıre:									
Title:																				

Employee Name	Account Number	Project Code	Project Name	%	1	2	3	4	Total
John Smith	01-40xx-xxxx-X00			100.0%					170.0
John Smith	01-40xx-xxxx-X00			0.0%					-
John Smith	01-40xx-xxxx-X00			0.0%					-
John Smith	01-40xx-xxxx-X00			0.0%					-
John Smith	01-40xx-xxxx-X00			0.0%					-
John Smith	01-40xx-xxxx-X00			0.0%					-
	Subtotal			100.0%					170.0
John Smith	01-4024-105X-X00	0FUS	Sick	0.0%					-
John Smith	01-4024-105X-X00	0FUS	Vacation	0.0%					-
John Smith	01-4024-105X-X00	0FUS	Other (Specify)	0.0%					-
	Subtotal			0.0%			-		-
Apply to Program	N/A	N/A	Holiday	0.0%					-
Apply to Program	N/A	N/A	Personal	0.0%					-
Apply to Program	N/A	N/A	Other	0.0%					10.5
	Subtotal			0.0%	-		-	-	10.5
	Total			100.0%					180.5

Questions??