

**Instructions for Indirect Cost Recovery Verification
Attachment K**

Purpose To certify to DOA that the agency's total General and Special Revenue Fund Indirect Cost Recovery balances agree in total to those recorded in the Federal Fund (10000) and the applicable COVID-19 Funds.

Applicable Agencies All agencies are required to complete and submit this attachment except as noted below:

Agencies that did **not** record indirect cost recoveries in Cardinal Account Codes 4009070, 4009071, 4009088 and 4009089 are **not** required to submit this attachment.

Institutions of Higher Education that record indirect cost recoveries in the Higher Education Fund 03XXX and are not subject to Cardinal CAPP Topic Section 20705, "Indirect Cost Recovery." Indirect cost recoveries recorded according to this CAPP Section are reconciled in Attachment K.

Tier III Institutions are **not** required to complete this attachment.

Due Date Must be **RECEIVED** at DOA by 5:00 p.m. on **Thursday, July 16, 2020**.

Form Instructions Be sure to complete the agency code and contact information on Part A of the workbook **and** all applicable shaded areas on all worksheets.

Please note that each attachment page is on an individual worksheet within the workbook. Using the "Tab" key will allow easy navigation between all required fields.

Procedures **Part A:** Certify the Account (4009070, 4009071, 4009088 and 4009089) balances for each fund. This includes reconciling the Account balances for 4009070, 4009071, 4009088 and 4009089 from the agency's internal records to the balances in Cardinal.

Part B: Accounts must be individually reconciled, with reconciling items identified. If the agency has any outstanding reconciling items, the agency should prepare journal entries to adjust balances. The totals for all funds per the agency's records must agree with the Cardinal final close reports.

If additional entries are required, please insert rows to the spreadsheet. To do this, go to the cell where the row will be inserted, then, on the menu bar, click **Home**, then click **Insert**, then click **Rows**.

Submission Requirements After downloading the files, rename the spreadsheet using the agency number followed by Att K. For example, agency 997 should rename the Attachment K.xls as 997AttK.xls.

In the prepared by and approved by fields, complete the appropriate blanks for the name, title, and date. This certifies that the information contained in the attachment is accurate and correct to the best of the knowledge of the signatories.

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Submission Requirements (Cont.) The Fiscal Officer must review and approve the information contained in the attachment prior to submitting it to DOA.

Submit the workbook **electronically** to **asim.wilson@doa.virginia.gov**.

DOA Contact Asim Wilson
Reporting Compliance Analyst
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Email: **asim.wilson@doa.virginia.gov**