INSTRUCTIONS

- This budget tool contains 12 worksheets 1 for agency information, 1 for each of the 10 budget categories, and 1 for the budget summary. To go to the other worksheets, click on the tabs below.
- Complete all of the green-shaded fields on the Agency Information page and the Budget Summary pages. It is very important that the agency name, agency code and the project number, if available, are accurate.
- To enter budget information for a particular category, select that tab and enter the required data. Dollar amounts in the Project Salary/Proposed Expenditure columns of the worksheets will be automatically subtotaled on the worksheets, and the subtotals will be carried over to the Budget Summary worksheet. Dollar amounts will be rounded automatically to the closest whole number. The subtotals and the Budget Summary will automatically be recalculated if the dollar amounts are changed or new information is added.
- Large amounts of text in the description boxes may not be completely visible. To
 accommodate extra text, expand the row height by dragging the line below the row
 number until the row is at the appropriate height.
- On the indirect cost category worksheet, the Maximum Direct Cost Base listed below
 the chart is the total of codes 15, 16, 40, 45, 46 and 80. To compute the amount in row
 A. Modified Direct Cost Base, subtract the portion of each subcontract exceeding
 \$25,000 and any flow through funds from the Maximum Direct Cost Base. Enter the
 agency's indirect cost rate as a whole number plus one decimal (2.1%, for example).
- To save the completed budget, select File / Save As, rename the file, select the appropriate location on your computer, and click OK.
- To preview a completed budget, select File / Print and then click the Preview button.
- To print a completed budget, select File / Print and then click OK. Only completed budget pages will print.
- The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- Submit a budget with original signature, copies of the signed budget as specified in the grant application instructions, and grant application materials to the State Education Department office listed in the grant application instructions. Do not submit budgets or grant applications to Grants Finance.
- For additional information about preparing budgets, please refer to Fiscal Guidelines for Federal and State Grants at http://www.oms.nysed.gov/cafe/guidance/.

The University of the State of New York THE STATE EDUCATION DEPARTMENT

PROPOSED BUDGET FOR A FEDERAL OR STATE PROJECT FS-10 (03/15)

Local Agency Information						
						İ
Fundin	a Source:	ARP Reserve - Lost Ir	structional	Time		
	g	71111 11000110 200111	THE PRODUCT ESSENTIAL CONTROL OF THE PRODUCT OF THE			
Report Pre	pared By:	Ashraf Allam				
•						
Agen	cy Name:	Little Falls City SD				
Mailing	Address:	15 Petrie St.				ĺ
			St	reet		
		Little Falls City SD	NY		13365	
		City	State	2	Zip Code	l
-			Г			i
Telephone # of		470	County:	1112		
Report Preparer:	3158231	470		Herkimer		
E mail Addraga	aallam@	lfood org				
E-mail Address: aallam@lfcsd.org						
Project Funding Dates:		3/13/2020		9/3	0/2024	
	·	Start			End	

INSTRUCTIONS

- Submit the original FS-10 Budget and the required number of copies along with the
 completed application directly to the appropriate State Education Department office as
 indicated in the application instructions for the grant program for which you are applying.
 DO NOT submit this form to Grants Finance.
- The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- An approved copy of the FS-10 Budget will be returned to the contact person noted above. A window envelope will be used; please make sure that the contact information is accurate and confined to the address field without altering the formatting.
- For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at http://www.oms.nysed.gov/cafe/guidance/.

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$392,883
Specific Position Title Full-Time Annualized Rate of Equivalent Pay			Project Salary
Curriculum Facilitator	1.00	\$73,278	\$73,278
HS Content Support	1.00	\$68,617	\$68,617
MS Content Support	2.00	\$46,575	\$93,150
Elem Content Support	3.00	\$46,575	\$139,725
Elem Math Specialist	0.50	\$36,226	\$18,113

SALARIES FOR SUPPORT STAFF				
	Subtotal - Code 16			
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary	

PURCHASED SERVICES			
		Subtotal - Code 40	\$107,113
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Family School Navigator (Ready4K)	United Way of Mohawk Valley	1.0 FTE x \$56,647/Year	\$56,647
Professional Development - Teach Like a Champion	Uncommon Schools	\$4830.20/Worksho p X 5	\$24,151
Professional Development - Restorative Practices	International Institute for Resporative Practices (IIRP)	106 Teachers x \$248.25 Each	\$26,315

SUPPLIES AND MATERIALS				
Subtotal - Code 45				
Description of Item Quantity Unit Cost			Proposed Expenditure	

TRAVEL EXPENSES				
	Subtotal - Code 46			
Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures	

Employee Benefits		
	_	
Subtotal - Code 8		
Benefit	Proposed Expenditure	
New York State Teachers		
New York State Employees		
Other - Pension		
Worker's Compensation		
Other(Identify)		
	New York State Teachers New York State Employees	

	INDIRECT COST	
	Modified Direct Cost Base Sum of all preceding subtotals(codes 15, 16, 40, 45, 46, and 80 and excludes the portion of each subcontract exceeding \$25,000 and any flow through funds) **Manual Entry	
B.	Approved Restricted Indirect Cost Rate	
C.	Subtotal - Code 90	

For your information, maximum direct cost base =

\$499,996.00

To calculate Modified Direct Cost Base, reduce maximum direct cost base by the portion of each subcontract exceeding \$25,000 and any flow through funds.

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure

MINOR REMODELING			
Subtotal - Code 30			
Description of Work to be Performed	Calculation of Cost	Proposed Expenditure	

	EQUIPMENT		
	Subtotal - Code 20		
Description of Item	Quantity	Unit Cost	Proposed Expenditure

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$392,883
Support Staff Salaries	16	
Purchased Services	40	\$107,113
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$499,996

Agency Code:	210800050000	
Project #:	5884-21-0306	
Contract #:		
Agency Name:	Little Falls City SD	

CHIEF ADMINISTRATOR'S CERTIFICATION

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal (or State) award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

31, Sections 37.	29-3730 and 3601-3612).			
1 1				
Date	Signature			
Name and Title of Chief Administrative Officer				

FOR DEPARTMENT USE ONLY				
Funding Dates:	From	То		
Program Approval:	Date:			
<u>Fiscal Year</u>	First Payment	Line #		
Voucher #	ucher # First Payment			

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Finance: Logged _____ Approved ____ MIR ____