

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/>.

 = Required Field

Local Agency Information		
Funding Source:	ARP-ESSER LEA Base 90% Funds	
Report Prepared By:	Shannon Hillman	
Agency Name:	Genesee Community Charter School	
Mailing Address:	657 East Avenue Street Rochester NY 14607 City State Zip Code	
Telephone # of Report Preparer:	585-697-1960	County: Monroe
E-mail Address:	shillman@gccschool.org	
Project Funding Dates:	3/13/2020 Start	9/30/2024 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

SALARIES FOR SUPPORT STAFF

PURCHASED SERVICES			
Subtotal - Code 40			\$112,913
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Teaching Assistant Substitutes for the 2021-22 School Year	TES Staffing	137.09 per day for 59 days	\$8,088
After School Programming for the 2021-22 School Year (Pilot Program)	EarthWorks by Center For Youth	2 hours a week for 40 weeks	\$13,950
After School Programming for the 2022-23 School Year	EarthWorks by Center For Youth	6 hours a week for 40 weeks	\$40,325
Behavior Specialist Consultant	Jennifer Wick	100 hours at \$100 per hour	\$10,000
Emotion Regulation and Sensory Integration Consultant for the 2021-22 School Year	Jennifer Elahi	9 on-site days + 10 consultant hours	\$5,000
Emotion Regulation and Sensory Integration Consultant for the 2022-23 School Year	Jennifer Elahi	18 on-site days + 11 consultant hours	\$9,550
Anti-Racist and Implicit Bias Training and Consultant Services	See3	8 2.5 hour workshops + 10 consultant hours	\$26,000

SUPPLIES AND MATERIALS

TRAVEL EXPENSES

Employee Benefits		
Benefit		Proposed Expenditure
Social Security		
Retirement	New York State Teachers	
	New York State Employees	
	Other - Pension	
Health Insurance		
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		
Math Intervention Specialist Benefits 21-22 (.5 FTE)		\$9,191
Social Worker Benefits 21-22 (.75 FTE)		\$14,340

INDIRECT COST		
A.	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 = \$280,508.00

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

MINOR REMODELING

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$144,064
Support Staff Salaries	16	
Purchased Services	40	\$112,913
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$23,531
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	\$67,823
Grand Total		\$348,331

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).

Name and Title of Chief Administrative Officer

Agency Code:	261600860826
Project #:	5880-21-
Contract #:	
Agency Name:	Genesee Community Charter School

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

Fiscal Year	First Payment	Line #
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Finance: Logged

Approved _____

MIR _____