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)

= Required Field

	Local Agency Information				
Funding Source:	ESSER ARP	SSER ARP			
Report Prepared By:	John Clemente				
Agency Name:	South Bronx Commu	unity Charter	High School		
Mailing Address:	1110 Washington Av	enue			
		Str	reet		
	Bronx	NY	1(0456	
	City	State	Zip	Code	
Telephone # of					
Report Preparer: 917-553-6	372	County:	Bronx		
E-mail Address: john.clem	ente@southbronxcon	nmunity.org			
Project Funding Dates:	Project Funding Dates: 8/16/2021 8/11/2024			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	\$1,259,313		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary		
fouth Development Specialist: Social Work (2021-22)	1.00	\$65,769.60	\$65,770	Lambright, Alexis	
fouth Development Specialist: Social Work (2021-22)	1.00	\$65,000.00	\$65,000	Meyers, Danielle	
fouth Development Specialist: Social Work (2021-22)	1.00	\$65,000.00	\$65,000	Rosen, Daniel	2021-22
earning Coach (2021-22)	1.00	\$45,000.00			5LC
earning Coach (2021-22)	1.00	\$50,000.00	\$50,000	Tuitt, Rita	1RT2LC
earning Coach (2021-22)	1.00	\$56,784.00	\$56,784	Doumbia, Bangali	3SW
earning Coach (2021-22)	1.00	\$50,000.00	\$50,000	Fernandez, Sabrina	2022-23
earning Coach (2021-22)	1.00	\$52,000.00	\$52,000	George, Glenn	2LC
Rising Teacher (2021-22)	1.00	\$51,854.40	\$51,854	Glover, Delvon	1LC
earning Coach (2021-22)	1.00	\$55,000.00	\$55,000	Harper, Keturah	3SW
earning Coach (2021-22)	1.00	\$55,000.00	\$55,000	Leys, Levar	2023-24
fouth Development Specialist: Social Work (2022-23)	1.00	\$68,400.38	\$68,400	Lambright, Alexis	2LC
fouth Development Specialist: Social Work (2022-23)	1.00	\$67,600.00	\$67,600	Meyers, Danielle	.7LC
fouth Development Specialist: Social Work (2022-23)	1.00	\$67,600.00	\$67,600	Rosen, Daniel	2SW
earning Coach (2022-23)	1.00	\$46,800.00			
earning Coach (2022-23)	1.00	\$52,000.00	\$52,000	Tuitt, Rita	
earning Coach (2022-23)	1.00	\$59,055.36		Doumbia, Bangali	
fouth Development Specialist: Social Work (2023-24)	1.00	\$70,304.00		Meyers, Danielle	
fouth Development Specialist: Social Work (2023-24)	1.00	\$70,304		Rosen, Daniel	
earning Coach (2023-24)	1.00	\$48,672			
earning Coach (2023-24)	1.00	\$54,080	\$54,080	Tuitt, Rita	
earning Coach (2023-24)	0.70	\$61,418			
··· ··· · · · · · · · · · · · · · · ·	1				

\$253,764 maximizing in perion instructional time \$161,654 Addressing the impacts of the COVID-19 pandemic on students, including the impacts of interrupted instruction and learning loss and the impacts on low-income students, chilk \$195,770 implementing evidence-based strategies to meet students' social, emotional, mental health, and academic needs.

S01140 of true \$98.800 maximizing in person instructional time \$99.055 Addressing the impacts of the COVID-19 pandemic on students, including the impacts of interrupted instruction and learning loss and the impacts on low-income students, chik \$203.600 Implementing evidence-based strategies to meet students' social, emotional, mental health, and academic needs.

\$102,752 maximizing in person instructional time

\$13,089 Addressing the impacts of the COVID-19 pandemic on students, including the impacts of interrupted instruction and learning loss and the impacts on low-income students, chik \$140,683 Implementing evidence-based strategies to meet students' social, emotional, mental health, and academic needs.

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

PURCHASED SERVICES			
		Subtotal - Code 40	
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure

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			
Benefi	t	Proposed Expenditure	
Social Security			
	New York State Teachers		
Retirement	New York State Employees		
	Other - Pension		
Health Insurance			
Worker's Compensation			
Unemployment Insurance			
Other(Identify)			

	INDIRECT COST			
Α.	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			
В.	Approved Restricted Indirect Cost Rate			
C.	Subtotal - Code 90			

For your information, maximum direct cost base = \$1,259,313.09

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.

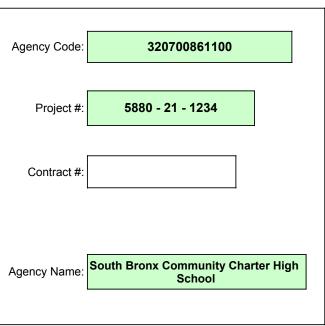
PURCHASED SERVICES WITH BOCES			
		Subtotal - Code 49	
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure

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

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$1,259,313
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$1,259,313

BUDGET SUMMARY



FOR DEPARTMENT USE ONLY Funding Dates: ____ CHIEF ADMINISTRATOR'S CERTIFICATION From То 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, Program Approval: Date: 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 Fiscal Year fact. may subject me to criminal. civil. or administrative First Payment Line # 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). 11 / 3 / 2021 Signature Date John Clemente, Executive Director Name and Title of Chief Administrative Officer First Payment Voucher # Approved _____ Finance: Logged _____ MIR _____