

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:	CARES Act		
Report Prepared By:	Bill Brinkman		
Agency Name:	NYC Charter HS for Arch, Eng & Construction Industries		
Mailing Address:	838 Brook Avenue - 4th Floor		
	Street		
	Bronx	NY	10454
	City	State	Zip Code
Telephone # of Report Preparer:	518-852-7004	County:	Bronx
E-mail Address:	bill@billbrinkman.com		
Project Funding Dates:	3/13/2020	9/30/2022	
	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/>.

7912

SALARIES FOR PROFESSIONAL STAFF	
1. Chief of Police	\$120,000
2. Deputy Chief of Police	\$85,000
3. Police Captain	\$75,000
4. Police Sergeant	\$65,000
5. Police Officer	\$55,000
6. Police Officer	\$55,000
7. Police Officer	\$55,000
8. Police Officer	\$55,000
9. Police Officer	\$55,000
10. Police Officer	\$55,000
11. Police Officer	\$55,000
12. Police Officer	\$55,000
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95. Police Officer	\$55,000
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98. Police Officer	\$55,000
99. Police Officer	\$55,000
100. Police Officer	\$55,000

	Subtotal - Code 15
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[illegible]

SALARIES FOR SUPPORT STAFF

	Subtotal - Code 16
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[illegible]

[illegible]

	Subtotal - Code 40
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	\$2,500
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Description of Item

Provider of Services

Calculation of Cost

Proposed Expenditure

CARES Act Grant Management and Compliance

Center for Educational
Funding

per contract

	\$2,500
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[illegible]

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[illegible]

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 =		\$262,743.00
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
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[illegible]

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[illegible]

Subtotal - Code 30	
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[illegible]

Calculation of Cost

Proposed Expenditure	Actual Expenditure	Percentage of Actual Expenditure
1. Salaries and Wages		
2. Social Security		
3. Health Insurance		
4. Life Insurance		
5. Pension		
6. Other		
7. Total		

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EQUIPMENT

Subtotal - Code 20

[illegible]

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BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	
Support Staff Salaries	16	
Purchased Services	40	\$2,500
Supplies and Materials	45	\$260,243
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$262,743

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).

8/8/20 

Date

Signature

Colin Healy - Principal

Name and Title of Chief Administrative Officer

Agency Code:

320700860926

Project #:

____ - ____ -4445

Contract #:

Agency Name:

NYC Charter HS for Arch, Eng & Construction Industries

FOR DEPARTMENT USE ONLY

Funding Dates:

From

To

Program Approval:

Date:

Fiscal Year

First Payment

Line #

Voucher #

First Payment

1

[illegible]

Finance: Logged _____ Approved _____ MIR _____

