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THE STATE EDUCATION DEPARTMENT/ THE UNIVERSITY OF THE STATE OF NEW YORK/ALBANY, NY 12234

Grants Finance, Room 510W, Education Building, Albany, NY 12234
Tel. (518) 474-4815 Fax (518) 486-4899
Email: GRANTSWEB@NYSED.GOV

REVISED
Updated Final Due Date
3/18/22 SEM

Grant Award Recipient SUPERINTENDENT KINDERHOOK CSD 2910 RT 9 VALATIE, NY 12184-5452	Date 03/10/22
	Project Number 5883210545
	Agency Code 101401040000
Funding Source ARP SLR COMPREHENSIVE AFTER SCHOOL	DUNS Number 095250544
CFDA Index Number 84425U	Law PL 117-2 N/A ARP OF 2021
Federal Award Identification Number (FAIN) S425U210022 THE PROJECT MAY BE PAID FROM OTHER AWARDS WITH DIFFERENT FAINS DEPENDING ON PERIOD OF AVAILABILITY OF FEDERAL FUNDS AND THE APPROVED PROJECT PERIOD.	Regulations EDGAR&2CFR AS APPLICABLE
	Commissioner's Regulations NA
Federal Award Date 03/24/21 THIS FEDERAL AWARD IS NOT FOR RESEARCH AND DEVELOPMENT.	Maximum Indirect Cost Rate SUB-RECIPIENT HAS AN ANNUAL NEGOTIATED INDIRECT COST RATE W/NYSED (THE PASS THROUGH ENTITY)
Federal Awarding Agency US DEPT OF ED.	Funding Dates/Period of Performance 03/13/20-09/30/24
Approved Budget Total* \$100,352 *IF THE SUB-AWARD IS \$25,000 OR MORE, IT IS SUBJECT TO REPORTING REQUIREMENTS UNDER FEDERAL FUNDING AND TRANSPARENCY ACT (FFATA) OF 2006.	First Payment \$20,070
	Final Report (FS-10-F Long Form) Due 10/30/24
SED Fiscal Contact SARAH MARTIN (518)474-4815	SED Program Contact ERICA MEAKER (518)473-0295

It is the sub-recipient's responsibility to conduct activities in accordance with applicable statutes, regulations, policies, terms, conditions and assurances. All grants are subject to further review, monitoring and audit to ensure compliance. The Department has the right to recoup funds if the approved activities are not performed and/or the funds are expended inappropriately.

In accordance with Section 41 of the State Finance Law, the State shall have no liability under this grant to the grantee or to anyone else beyond funds appropriated and available for this grant. The approved budget (FS-10) will be sent under separate cover. Please retain this document with your files.

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

PROPOSED BUDGET FOR A
FEDERAL OR STATE PROJECT
FS-10 (6/3/15)

= Required Field

Local Agency Information		
Funding Source:	ARP-ESSER State-Level Reserve After School	Received JAN 18 2022
Report Prepared By:	Lucas Christensen	Office of Accountability
Agency Name:	Kinderhook CSD	
Mailing Address:	2910 Rte 9	
	Street	
	Valatie NY 12184	
	City State Zip Code	
Telephone # of Report Preparer:	518.758.7575 x3009	County: Columbia
E-mail Address:	lchristensen@ichabodcrane.org	
Project Funding Dates:	3/13/2020 Start	9/30/2024 End

INSTRUCTIONS
<ul style="list-style-type: none"> 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			\$100,352
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
High Dosage/Hi Intensity Tutors for before and after school	2951.52	\$34/hour	\$100,352

F56 - 2110 - 150 - 56 - 0545

CF121

ENTRY DATE 03/16/22
PROJECT 5883210545
SED CODE 101401040000
NYC DOC #

GRANTS FINANCE
PROJECT STATUS REPORT RUN DATE 03/16/22
ARP SLR COMPREHENSIVE AFTER SCHOOL
KINDERHOOK CSD

BUDGET DETAIL INFORMATION

PROF SALARY	15	100,352.00	BEGIN DATE	03/13/20
NON PROF SALARY	16	0.00	END DATE	09/30/24
PURCH SERVICES	40	0.00	AMENDMENT #	
SUPP & MATERIAL	45	0.00	CONTRACT #	
TRAVEL EXPENSE	46	0.00	STOP DATE	
EMP BENEFITS	80	0.00	REFUND CHECK #	
INDIRECT COST	90	0.00	IND COST RATE	10.6
BOCES SERVICES	49	0.00	INT ELIG	N
REMODELING	30	0.00		
EQUIPMENT	20	0.00		

BUDGET SUMMARY INFORMATION

FUNDYEAR	BUDGET SPLITS	PAID TO DATE	OUTSTANDING ENC
588321	100,352.00	20,070.00	80,282.00
588320	0.00	0.00	0.00
588319	0.00	0.00	0.00
	0.00	0.00	0.00
	0.00	0.00	0.00
TOTAL	100,352.00	20,070.00	80,282.00

LOG AND CONTRACT DATES

BUDGET	RECEIVED	ENTERED	CONTRACT	APPROVED
INTERIM	03/08/22	03/10/22		
FINAL				

CASH DETAIL

ENTRY	DOC #	TRANS	ENC	RPT	LINE	AMOUNT	FUNDYR	MIR	PD DT	STAT
031622	566324F	INIT	000	03/22	01	20,070.00	588321	030822		ENT

THIS BUDGET HAS BEEN PROCESSED BY THE NEW YORK STATE EDUCATION DEPARTMENT. THIS SUMMARY REPLACES THE SIGNED COPY.

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

PROPOSED AMENDMENT FOR A
FEDERAL OR STATE PROJECT
FS-10-A (11/09)

#310

F 56

Received
MAY 13 2022
Office of Accountability

= Required Field

Agency Name:	Kinderhook Central School District	Columbia
Mailing Address:	PO Box 820	County
	Valatie, NY 12184	

Agency Code:

Amendment #:

Project Number:

Contract #:

Contact Person:

Tel:

E-mail Address:

INSTRUCTIONS

- Submit the original and two copies directly to the same State Education Department office where budget was mailed. DO NOT submit this form to Grants Finance.
- This form need only be submitted for budget changes that require prior approval as follows:
 - Personnel positions, number and type
 - Equipment items having a unit value of \$5,000 or more, number and type
 - Minor remodeling
 - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent or \$1,000, whichever is greater
 - Any increase in the total budget amount.
- Amendment # at top of this page must be completed.
- If extra room is needed for explanations, expand the rows using the row breaks on the left.
- Do not use the FS-10-A for requesting a project extension.

CHIEF ADMINISTRATOR'S CERTIFICATION

I hereby certify that the requested budget changes are necessary for the implementation of this project.

Date: 5/5/2022

Signature: *[Handwritten Signature]*

FOR DEPARTMENT USE ONLY

Program Approval: *[Handwritten Signature]*

Date: 5/23/22

Finance:
Logged

Approved

RECEIVED

MAY 24 2022

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
15 - Professional Salaries	Move salaries to purchased service for tutoring service		\$25,000
16 - Support Staff Salaries			
40 - Purchased Services	Purchase Tutoring Services from fev Tutor <i>approx 926 hrs @ \$27/hr. JLE</i>	\$25,000	
45 - Supplies & Materials			
46 - Travel Expenses			
80 - Employee Benefits			
90 - Indirect Cost			
49 - Boces Services			
30 - Minor Remodeling			
20 - Equipment			
Total Increase or Decrease:		(+) \$ 25,000	(-) \$ 25,000
Net Increase or Decrease:		\$ 0	
ENTER BUDGET >	Previous Budget Total:	\$	\$ 100,352 JLE
	Proposed Amended Total:	\$	\$ 100,352 JLE