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 Fiel	ld
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Local Agency Information						
Fundin	Funding Source: CARES Act ESSER					
Report Prepared By: Bryson Wilson						
Agency Name: Brooklyn RISE Chart		ter School]	
Mailing	Address:					
		Des aldens	Stre	et	44000	
		Brooklyn City	NY State	Ž	11220 Zip Code	1
Telephone # of Report Preparer: (917) 627-0398		County:	Kings			
E-mail Address:	-mail Address: <u>bwilson@edtec.com</u>					
Project Funding Dates:		3/13/2020	l	9/3	0/2022	_
	•	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/.

SALARIES FOR PROFESSIONAL STAFF			
		Subtotal - Code 15	\$26,419
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Social Worker	0.41	\$65,000	\$26,419

BUDGET SUMMARY

SUBTOTAL CODE PROJECT COSTS Professional Salaries 15 \$26,419 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				
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	SUBTOTAL CODE		PROJECT COSTS	
Purchased Services 40 Supplies and Materials 45 Travel Expenses 46 Employee Benefits 80 Indirect Cost 90 BOCES Services 49 Minor Remodeling 30 Equipment 20	Professional Salaries 15		\$26,419	
Supplies and Materials 45 Travel Expenses 46 Employee Benefits 80 Indirect Cost 90 BOCES Services 49 Minor Remodeling 30 Equipment 20	Support Staff Salaries	16		
Travel Expenses 46 Employee Benefits 80 Indirect Cost 90 BOCES Services 49 Minor Remodeling 30 Equipment 20	Purchased Services	40		
Employee Benefits 80 Indirect Cost 90 BOCES Services 49 Minor Remodeling 30 Equipment 20	Supplies and Materials	45		
Indirect Cost 90 BOCES Services 49 Minor Remodeling 30 Equipment 20	Travel Expenses	46		
BOCES Services 49 Minor Remodeling 30 Equipment 20	Employee Benefits	80		
Minor Remodeling 30 Equipment 20	Indirect Cost	90		
Equipment 20	BOCES Services	49		
	Minor Remodeling	30		
0 17.11	Equipment	20		
Grand Total \$26,419	Grand Total		\$26,419	

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 ,14,20 Date

Signature

CARY FINNELAN, HEAD OF SCHOOL

Name and Title of Chief Administrative Officer

Agency Code:	331500861156
Project #:	
Contract #:	
Agency Name:	Brooklyn RISE Charter School
<u>FOR</u>	DEPARTMENT USE ONLY
Funding Dates:	From To
Program Approval:	Date:
<u>Fiscal Year</u>	First Payment Line #
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