

= Required Field

Local Agency Information			
Funding Source:	CRRSA Act Combined Funding Application / ESSER II		
Report Prepared By:	Brett Gallini		
Agency Name:	Great Oaks Charter School - New York City		
Mailing Address:	38 Delancey Street		
	Street		
	New York	NY	10002
	City	State	Zip Code
Telephone # of Report Preparer:	(646) 279-2616	County: Manhattan	
E-mail Address:	bgallini@greatoakscharter.org		
Project Funding Dates:	March 13, 2020 to September 30, 2023		
	Start	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			\$228,200
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Chief Data Analytics Officer	50%	\$112,000	\$56,000
Lead Social Worker	90%	\$85,000	\$76,500
Social Worker	90%	\$68,000	\$61,200
Summer Stipends for Teachers (9x\$3,000 / 1x\$7,500)			\$34,500

SALARIES FOR SUPPORT STAFF

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

PURCHASED SERVICES			
Subtotal - Code 40			\$54,306
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Help to build staff and school capacity beyond the contract period.	Lavinia		\$54,306

Reply requested regarding calculation of cost: The contract between Great Oaks Charter School - New York City and Lavinia, existing between May 2021-June 2022, provides a rate of \$2,500 per day for 24 days. The cost of consulting for 24 days is \$60,000, of which we ask New York State through the funding of ESSER to cover \$54,523 (including the additional \$217 provided through the revision of funding).

Reply requested regarding additional funding through revision:

As you are likely aware, the original CRRSA allocations that were provided have been revised. Please see the amount below that has been added to your original allocation.

The CRRSA Act requires states to return to the United States Department of Education (USDE) any GEER 2 and ESSER 2 funds that a state does not award within (1) year of the state's receipt of such funds. If an LEA does not apply for the entirety of its allocation within the required timeframe, the difference between the approved budget and allocation amount may be returned to USDE.

Original Allocation \$330,931
 REVISED Allocation \$331,148
 Additional Funding Received \$217

Please advise where you would like to include your additional funding. I will hand correct this on your mailed in hard copies.

"Please include the additional \$217 funding in Code-40, Lavinia consulting, to total \$54,523. Thank you."

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		
Subtotal - Code 80		\$48,425
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)		
Fringe benefits (25% of FTE salary)		\$48,425

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 = **\$330,931.00**

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			
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

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$228,200
Support Staff Salaries	16	
Purchased Services	40	\$54,306
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$48,425
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$330,931

Agency Code:	310100861055
Project #:	5891-21-4985
Contract #:	
Agency Name:	Great Oaks Charter School - New York City

<u>FOR DEPARTMENT USE ONLY</u>		
Funding Dates:	_____	_____
	From	To
Program Approval:	_____	Date: _____
Fiscal Year	First Payment	Line #

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).

6/14/21

Date	Signature
Brett Gallini	
Name and Title of Chief Administrative Officer	

Voucher #	First Payment

Finance: Logged _____ Approved _____ MIR _____