

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

PROPOSED BUDGET FOR A  
FEDERAL OR STATE PROJECT  
FS-10 (03/15)

RCSD Fund/Subclass 2022-2023 Title I, Part D

E 0281 - 0298, selected

Local Agency Information

<b>Funding Source:</b>	Title I, Part D		
<b>Report Prepared By:</b>	Glendine Miller, Director of Financial Management, Carrie Pecor, Executive Director of Grants & Program Accountability		
<b>Agency Name:</b>	Rochester City School District		
<b>Mailing Address:</b>	131 West Broad Street		
	Street		
	Rochester	NY	14614
	City	State	Zip Code
<b>Telephone # of Report Preparer:</b>	585-262-8309 / 585-262-8483		<b>County:</b> Monroe
<b>E-mail Address:</b>	glendine.miller@rcsdk12.org / carrie.pecor@rcsdk12.org		
<b>Project Funding Dates:</b>	9/1/2022		8/31/2023
	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			\$148,248
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
<b><u>Monroe County Children's Center</u></b>			
Teacher Hourly Pay for Supplemental Academic Support & Enrichment	4 tchrs X ~248 hours	\$41	\$40,672
Math Intervention Teacher - Additional Support & Supplemental Instruction	0.60	\$76,167	\$45,700
Literacy Specialist - Additional Support & Supplemental Instruction	0.50	\$75,000	\$37,500
<b><u>Monroe County Jail</u></b>			
Literacy Specialist	0.25	\$83,652	\$20,913
<b><u>Villa of Hope</u></b>			
Teacher Hourly Pay/Tutoring for Additional Academic Supports for At-Risk Students	~84.45 hours	\$41	\$3,463

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$0
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
			\$0



PURCHASED SERVICES			
Subtotal - Code 40			\$254,075
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
<b><u>Hillside Children's Center</u></b>			
Professional services (Teachers, Supervisor of Instructional & Behavior Support) for 61 students	RCSD	~\$4165.164 X 61 students	\$254,075

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$0
Description of Item	Quantity	Unit Cost	Proposed Expenditure
			\$0

TRAVEL EXPENSES			
Subtotal - Code 46			\$0
Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
			\$0

Employee Benefits				
Subtotal - Code 80		\$51,679	2022-2023 Benefits Rates	
Benefit		Proposed Expenditure		
Social Security		\$11,341	15	16
Retirement	New York State Teachers	\$15,254	7.65%	7.65%
	New York State Employees	\$0	10.29%	14.70%
	Other - Pension			
Health Insurance		\$21,600	16,000	16,000
Worker's Compensation		\$2,372	1.60%	1.60%
Unemployment Insurance		\$1,112	0.75%	0.75%
Other(Identify)			20.29%	24.70%
Civil Service Life Insurance		\$0	10.56 per FTE	



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) <b>**Manual Entry</b>	\$224,928
B.	Approved Restricted Indirect Cost Rate	0.00%
C.	Subtotal - Code 90	\$0

For your information, maximum direct cost base = \$454,003

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.

Contracts in Excess of \$25,000 Total		\$229,075.00
Hillside	254,075.00	\$229,075.00



PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$0
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
			\$0

MINOR REMODELING		
Subtotal - Code 30		\$0
Description of Work to be Performed	Calculation of Cost	Proposed Expenditure

EQUIPMENT			
Subtotal - Code 20			\$0
Description of Item	Quantity	Unit Cost	Proposed Expenditure



### BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	148,248
Support Staff Salaries	16	0
Purchased Services	40	254,075
Supplies and Materials	45	0
Travel Expenses	46	0
Employee Benefits	80	51,679
Indirect Cost	90	0
BOCES Services	49	0
Minor Remodeling	30	0
Equipment	20	0
Grand Total		454,003

Agency Code:

261600010000

Project #:

0016231395

Contract #:

Agency Name:

Rochester City School District

#### FOR DEPARTMENT USE ONLY

Funding Dates:

From

To

Program Approval:

Date:

#### 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).*

9/9/22

Date

Linda L. Camusis

Signature

Carmine Peluso, Interim Superintendent of Schools

Name and Title of Chief Administrative Officer

Fiscal Year

First Payment

Line #

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Voucher #

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First Payment

Finance: Logged \_\_\_\_\_

Approved \_\_\_\_\_

MIR \_\_\_\_\_