

MAY 22 2023

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

PROPOSED AMENDMENT FOR A MCSD Business Office  
FEDERAL OR STATE PROJECT  
FS-10-A (03/15)

☐ = Required Field

Agency Name:	Millbrook	Dutchess
Mailing Address:	PO Box AA	County
	Millbrook, NY 12545	

Agency Code:	132201040000	Amendment #:	001
Project Number:	5891210710	CRRSA	
Contract #:			
Contact Person:	Caroline Hernandez Pidala	Tel:	845 - 674200x1100
E-mail Address:	caroline.hernandez-pidala@millbrookcsd.org		

## 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

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, & accurate, & the expenditures, disbursements, & cash receipts are for the purposes & objectives set forth in the terms & 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).

Date: 3/21/23


Signature: 

### FOR DEPARTMENT USE ONLY

Program Approval: 

Date: 5/10/23

Finance: 5/15/23

 5/15/23

RECEIVED

MAY 12 2023

GRANTS FINANCE

Logged

Approved

SUBTOTAL	EXPLANATION (Provide same detail as required in IFS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
15 Professional Salaries	<b>DECREASE</b> salary for psychologist \$112,549  <b>INCREASE</b> salary for Pre K teacher <b>\$69,315(AC) / Special education Teaching assistant \$29,864 (AC)/ Special Education Teacher \$65,677 (MKB)/</b>	\$52,307	
16 Support Staff Salaries	<b>DECREASE</b> salary for custodial worker \$73,150  <b>INCREASE</b> Special education teacher aide \$21,484 (AS)		\$51,666
40 Purchased Services			
45 Supplies & Materials			
46 Travel Expenses			
80 Employee Benefits	<b>DECREASE</b> employee benefit \$72,788		\$72,788
90 Indirect Costs			
49 Buses Services			
30 Minor Remodeling			

20 - Equipment	<b>INCREASE</b> Purchase technology equipment to support instructional support 34 Promethean boards @ \$2122 including a buy one get one discount		\$72,147		
	Total Increase or Decrease:	(+) \$	124,454	(-) \$	124,454
	Net Increase or Decrease:	\$ 0			
	Previous Budget Total:	\$ 377,517 349,402			
	Proposed Amended Total:	\$ 377,517 349,402			

ENTER BUDGET >

The University of the State of New York  
**THE STATE EDUCATION DEPARTMENT**  
 Grants Finance, Rm. 510W EB  
 Albany, New York 12234

**FINAL EXPENDITURE REPORT FOR A  
 FEDERAL OR STATE PROJECT  
 FS-10-F Long Form (03/15)**

☐ = Required Field

**Local Agency Information**

Funding Source:	CRRSA - ESSER 2		COPY
Report Prepared By:	ASHLEY BURHANS		
Agency Name:	MILLBROOK CENTRAL SCHOOL DISTRICT		
Mailing Address:	PO BOX AA		
	Street		
	MILLBROOK	NY	12545
	City	State	Zip Code
Telephone # of Report Preparer:	845 677 4200 X1103		County: DUTCHESS
E-mail Address:	ASHLEY.BURHANS@MILLBROOKCSD.ORG		

**INSTRUCTIONS**

- For State grants, final expenditure reports are generally due within 30 days after the grant's end date. Reports for federal projects are generally due within 90 days after the grant's end date. See the Grant Award Notice to verify the due date. However, the Department program office may impose an earlier due date.
- Agencies should use only the FS-10-F Long Form to report actual project expenditures.
- Agencies must maintain complete and accurate records and may be requested to provide additional detail to support reported expenditures.
- All encumbrances must have taken place within the grant's approved funding dates, which can be found on the FS-10 or FS-20 budget form and on the Grant Award Notice.
- The Chief Administrator's Certification on the Final Summary page must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- Submit one report with original signature and one copy directly to Grants Finance, New York State Education Department, Room 510W EB, Albany, NY 12234.
- For special legislative projects, submit one report with original signature and two copies, along with a final program narrative report.
- For additional information, please refer to Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.





SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$264,969
Name	Position Title	Beginning and End Dates of Work	Salary Paid
BARNETT, MARYKATE	TEACHER	9/1/2022 - 6/30/2023	\$65,677
QUATTRONE, MICHELLE	PSYCHOLOGIST	3/9/2022 - 6/30/2022	\$28,114
QUATTRONE, MICHELLE	PSYCHOLOGIST	2/25/2023 - 6/30/2023	\$35,876
CLARKE, ALTHEA	TEACHER ASSISTANT	9/1/2022 - 6/30/2023	\$29,863
CLEVELAND, ALISSA	TEACHER	9/1/2022 - 6/30/2023	\$69,315
STEINER, BRENDA	PSYCHOLOGIST	9/8/2022 - 2/21/2023	\$36,124

# SALARIES FOR SUPPORT STAFF

Subtotal - Code 16			\$40,400
Name	Position Title	Beginning and End Dates of Work	Salary Paid
BALTHAZAR, STANLEY	CUSTODIAN	11/23/22 - 6/23/23	\$5,078
DAVIDSON, DENNIS	CUSTODIAN	1/31/23 - 6/30/23	\$13,838
MOFFITT, KIM	TEACHER AID	9/1/22 - 6/30/23	\$1,125
SHEPLEY, AMANDA	TEACHER AID	9/1/22 - 6/30/23	\$20,359

EQUIPMENT			
Subtotal - Code 20			\$72,147
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
5/23/23	STS EDUCATION	8017	\$72,147



SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$264,969
Support Staff Salaries	16	\$40,400
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	\$72,147
Grand Total		\$377,516

### LOCAL AGENCY INFORMATION

Agency Code: 132201040000

Project #: 5891-21-0710

Contract #:

Agency Name: MILLBROOK CENTRAL SCHOOL DISTRICT

Funding Dates:	3/13/2020	TO	9/30/2023
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Approved Budget Total:	\$ 377,517
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### CHIEF ADMINISTRATOR'S CERTIFICATION

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7/20/23

Date \_\_\_\_\_

*Signature*

Caroline Hernandez Pidal

Name and Title of Chief Administrative Officer

**FOR DEPARTMENT USE ONLY**

<u>Fiscal Year</u>	<u>Amt Expended</u>	<u>Final Payment</u>	<u>Line #</u>
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Voucher #

### Final Payment

**Finance:** Logged\_\_\_\_\_ Approved\_\_\_\_\_ MIR\_\_\_\_\_

## BUDGET NARRATIVE

<b>LEA: Millbrook Central School District</b>	<b>FOR TITLE: CRRSA (ESSER2)</b>
<b>BEDSCODE: 132201040000</b>	

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**\*\* MUST BE SUBMITTED WITH EACH BUDGET IN THE CONSOLIDATED APPLICATION**

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**If using Transferability, please indicate on the Budget Narrative and FS-10 the amount of funds to be included under transferability in the budget categories where funds will be used. Example: In the Title IIA budget under Code 15 – Transferability - Title I Reading Teacher – FTE.35 - \$15,000.**

<b>CODE/ BUDGET CATEGORY</b>	<b>EXPLANATION OF EXPENDITURES IN THIS CATEGORY (as it relates to the program narrative for this title)</b>
<b>Code 15</b> <i>Professional Salaries</i>  \$212,663	<i>This will cover the salary for a new, professional elementary intervention staff member to assist our students with the social/emotional development over a 3-year period.</i>
<b>Code 16</b> <i>Support Staff Salaries</i>  \$92,066	<i>This will cover the salary for a new custodian in order to keep up with increased cleaning and disinfection over a 3-year period.</i>
<b>Code 40</b> <i>Purchased Services</i>	
<b>Code 45</b> <i>Supplies and Materials</i>	
<b>Code 46</b> <i>Travel Expenses</i>	

<b>CODE/ BUDGET CATEGORY</b>	<b>EXPLANATION OF EXPENDITURES IN THIS CATEGORY (as it relates to the program narrative for this title)</b>
<b>Code 80</b> Employee Benefits  \$72,788	This will cover most of the cost of health insurance for the new professional elementary intervention staff member over a 3-year period.
<b>Code 90</b> Indirect Cost	
<b>Code 49</b> BOCES Services	
<b>Code 30</b> Minor Remodeling	
<b>Code 20</b> Equipment	

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THE STATE EDUCATION DEPARTMENT

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

☐ = Required Field

**Local Agency Information**

<b>Funding Source:</b>	CRRSA (ESSER 2)	
<b>Report Prepared By:</b>	Laura Mitchell	
<b>Agency Name:</b>	Millbrook Central School District	
<b>Mailing Address:</b>	43 Alden Place, PO Box AA	
	Street	
	Millbrook	NY 12545
	City	State Zip Code
<b>Telephone # of Report Preparer:</b>	845.677.4223	<b>County:</b> Dutchess
<b>E-mail Address:</b>	Laura.mitchell@millbrookcsd.org	
<b>Project Funding Dates:</b>	3/13/2020	9/30/2023
	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			<b>\$212,663</b>
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
2021 School Psychologist/Guidance	1.00	\$67,815	\$67,815
2022 School Psychologist/Guidance	1.00	\$70,888	\$70,888
2023 School Psychologist/Guidance	1.00	\$73,960	\$73,960

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$92,066
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
2021 Custodian	1.00	\$29,786.00	\$29,786
2022 Custodian	1.00	\$30,680.00	\$30,680
2023 Custodian	1.00	\$31,600.00	\$31,600

PURCHASED SERVICES			
Subtotal - Code 40			
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure



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		\$72,788
Benefit		Proposed Expenditure
Social Security		
Retirement	New York State Teachers	
	New York State Employees	
	Other - Pension	
Health Insurance		\$72,788
Worker's Compensation		
Unemployment Insurance		
<b>Other(Identify)</b>		

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 = \$377,517.00

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	\$212,663
Support Staff Salaries	16	\$92,066
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$72,788
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$377,517

**CHIEF ADMINISTRATOR'S CERTIFICATION**

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8/23/2021

Date



Signature

Laura Mitchell, Superintendent of Schools

Name and Title of Chief Administrative Officer

Agency Code: 132201040000

Project #: 5891-21-0710

Contract #:

Agency Name: Millbrook Central School District

**FOR DEPARTMENT USE ONLY**

Funding Dates: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Program Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Fiscal Year****First Payment****Line #**

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Voucher #

First Payment

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

Approved \_\_\_\_\_

MIR \_\_\_\_\_

## INSTRUCTIONS

- This long form final expenditure report tool contains 12 worksheets – 1 for agency information, 1 for each of the 10 expense categories, and 1 for the final expenditure summary. To go to the other worksheets, click on the tabs below.
- Complete all of the green-shaded fields on the Local Agency Information and Final Expenditure Summary pages. It is very important that the agency name and address, agency code and project number be accurate. For special legislative projects and grant contracts, also enter the contract number.
- To enter expenditure information for a particular category, select that tab and enter the required data. Dollar amounts in the Salary Paid/Amount Expended columns of the worksheets will be automatically subtotaled on the worksheets, and the subtotals will be carried over to the Final Expenditure Summary worksheet. Dollar amounts will be rounded automatically to the closest whole number. The subtotals and the Final Expenditure 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 report, select File / Save As, rename the file, select the appropriate location on your computer, and click OK.
- To preview a completed report, select File / Print and then click the Preview button.
- To print a completed report, select File / Print and then click OK. Only completed pages will print.
- When assembling the report, please make sure that the Final Expenditure Summary worksheet faces out.
- For additional information about preparing final expenditure reports, please refer to Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

The University of the State of New York  
**THE STATE EDUCATION DEPARTMENT**  
 Grants Finance, Rm. 510W EB  
 Albany, New York 12234

**FINAL EXPENDITURE REPORT FOR A  
 FEDERAL OR STATE PROJECT  
 FS-10-F Long Form (03/15)**

= Required Field

**Local Agency Information**

Funding Source:	CRRSA - ESSER 2		
Report Prepared By:	ASHLEY BURHANS		
Agency Name:	MILLBROOK CENTRAL SCHOOL DISTRICT		
Mailing Address:	PO BOX AA		
	Street		
	MILLBROOK	NY	12545
	City	State	Zip Code
Telephone # of Report Preparer:	845 677 4200 X1103	County:	DUTCHESS
E-mail Address:	ASHLEY.BURHANS@MILLBROOKCSD.ORG		

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SHEPLEY, AMANDA	TEACHER AID	9/1/22 - 6/30/23	\$20,359



PURCHASED SERVICES			
Subtotal - Code 40			
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended

SUPPLIES AND MATERIALS			
Subtotal - Code 45			
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended

TRAVEL EXPENSES				
			Subtotal - Code 46	
Dates of Travel	Name of Traveler	Destination and Purpose	Check or Journal Entry #	Amount Expended

Employee Benefits			
Subtotal - Code 80			
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement			
Employee Retirement			
Other Retirement			
Social Security			
Worker's Compensation			
Unemployment Insurance			
Health Insurance			
<b>Other(Identify)</b>			

INDIRECT COST		
A.	Modified Direct Cost Base -- Sum of all preceding subtotals (codes 15, 16, 40, 45, 46, and 80, excluding the portion of each subcontract exceeding \$25,000 and any flow through funds)	
B.	Approved Restricted Indirect Cost Rate(%) (enter X.X)	
C.	Subtotal - Code 90	

For your information, maximum direct cost base = \$305,369.00

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			
Encumbrance Date	Name of BOCES	Check or Journal Entry #	Amount Expended

MINOR REMODELING			
Subtotal - Code 30			
Purchase Order Date Or Dates of Service	Provider of Service	Check or Journal Entry #	Amount Expended



EQUIPMENT			
Subtotal - Code 20			\$72,147
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
5/23/23	STS EDUCATION	8017	\$72,147

**FINAL EXPENDITURE SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$264,969
Support Staff Salaries	16	\$40,400
Purchased Services	40	
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\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Date* *Signature*

**Name and Title of Chief Administrative Officer**

**LOCAL AGENCY INFORMATION**

Agency Code:

**132201040000**

Project #:

**5891-21-0710**

Contract #:

Agency Name:

MILLBROOK CENTRAL SCHOOL DISTRICT

Funding Dates:

3/13/2020

TO

9/30/2023

Approved Budget Total: \$

**377,517****FOR DEPARTMENT USE ONLY**Fiscal YearAmt ExpendedFinal PaymentLine #

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Voucher #

Final Payment

**Finance:** Logged \_\_\_\_\_ Approved \_\_\_\_\_ MIR \_\_\_\_\_

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

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

☐ = Required Field

Agency Name:	MILLBROOK	City:	MILLBROOK
Mailing Address:	PO Box 441	County:	ALBANY
	MILLBROOK, NY 12545		

Agency Code:

Amendment #:

Project Number:

Contract #:

Contact Person:

Tel:

E-mail Address:

## INSTRUCTIONS

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Date: 3/21/23

Signature: 

### FOR DEPARTMENT USE ONLY

Program Approval:

Date:

Finance:

Logged

Approved

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
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16 - Support Staff Salaries	DECREASE salary for custodial worker \$73,150		\$73,150 FORSA 11/20.160
40 - Purchased Services			
45 - Supplies & Materials			
46 - Travel Expenses			
80 - Employee Benefits	DECREASE employee benefit \$72,788		\$72,788 FORSA 9060.800
90 - Indirect Cost			
49 - Boces Services			
30 - Minor Remodeling			
20 - Equipment	INCREASE Purchase technology equipment to support instructional support 34 Promethean boards @ \$2122 including a buy one get one discount	+ \$72,147 UPDATE CODE	

ENTER BUDGET >	Total Increase or Decrease:	(+) \$	145,938	(-) \$	145,938
	Net Increase or Decrease:	\$	0		
	Previous Budget Total:	\$	349,402		
	Proposed Amended Total:	\$	349,402		