



Grants Finance, Room 610W, Education Building, Albany, NY 12234
 Tel. (518) 474-4815 Fax (518) 486-4898
 Email: GRANTSWEB@NYSED.GOV

REVISED
 Correction to Final Report Due
 Date - 2/24/22 SEM

ESSER 3

Grant Award Recipient SUPERINTENDENT MONTAUK UFSD 50 S DORSET DR MONTAUK, NY 11954-5067	Date 02/10/22 Project Number 6880213065 Agency Code 580306020000
Funding Source ARP ESSER 3	DUNS Number 094818614
CFDA Index Number 84426U	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* \$589,558 *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 \$58,955 Final Report (FS-10-F Long Form) Due 10/30/24
SED Fiscal Contact SARAH MARTIN/SABRINA MCGINTY (518)474-4816	SED Program Contact ERICA MEAKER CARESACT@NYSED.GOV (518)473-0296
<p>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.</p> <p>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.</p>	

*Final from SED
2/3/22*

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
(see instructions for mailing address)

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

Local Agency Information

Funding Source: ARP-ESSER (rev)

Report Prepared By: J. Philip Perna

Agency Name: Montauk UFSD

Mailing Address: 50 South Dorset Drive

Street		
<u>Montauk</u>	<u>NY</u>	<u>11954</u>
City	State	Zip Code

Telephone #: 631-668-2474 County: Suffolk

E-Mail Address: jperna@montaukschool.org

Project Operation Dates: 9/01/21 8/31/22
Start End

INSTRUCTIONS

- ❖ Submit the original 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 the Grants Finance.
- ❖ Enter whole dollar amounts only.
- ❖ Prior approval by means of an approved budget (FS-10) or budget amendment (FS-10-A) is required for:
 - 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.
- ❖ Certification on page 8 must be signed by Chief Administrative Officer or properly authorized designee.
- ❖ High quality computer generated reproductions of this form may be used.
- ❖ For further information on budgeting, please refer to the Fiscal Guidelines for Federal and State Aided Grants which may be accessed at www.oms.nysed.gov/caf/ or call Grants Finance at (518) 474-4815.

SALARIES FOR PROFESSIONAL STAFF: Code 15

Include only staff that are employees of the agency. Do not include consultants or per diem staff. Do not include central administrative staff that are considered to be indirect costs, e.g., business office staff. One full-time equivalent (FTE) equals one person working an entire week each week of the project. Express partial FTE's in decimals, e.g., a teacher working one day per week equals .2 FTE.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Nurse 2020-2021	1.0	4,000.00	4,000 ✓
Nurse 2021-2022	1.0	2,500.00	2,500 ✓
SummerSchool Teachers	10	600.00	6,000 ✓
Summer School Mentors	10	800.00	8,000 ✓
Special Ed Summer School	4	2,500.00	10,000 ✓
Substitutes- Remote Learners	10	150.00	1,500 ✓
Subtotal - Code 15			32,000

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SALARIES FOR SUPPORT STAFF: Code 16

Include salaries for teacher aides, secretarial and clerical assistance, and for personnel in pupil transportation and building operation and maintenance. Do not include central administrative staff that are considered to be indirect costs, e.g., account clerks.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Custodian 2020-2021	1.0	32,000	32,000 ✓
Custodian 2021-2022	1.0	32,000	32,000 ✓
Custodian 2022-2023	1.0	32,000	32,000 ✓
Subtotal - Code 16			96,000

PURCHASED SERVICES: Code 40

Include consultants (indicate per diem rate), rentals, tuition, and other contractual services. Copies of contracts may be requested by the State Education Department. Purchased Services from a BOCES, if other than applicant agency, should be budgeted under Purchased Services with BOCES, Code 49.

Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Curriculum Related Materials *20% LL	Teachers Pay Teachers, <i>Teachers Supply</i>	7,100.00	7,100 ✓
Social Work Services	Family Service League	5,000	5,000 ✓
Social Emotional Learning Program	Yale RULER	10,000	10,000 ✓
Medical staffing for testing/ vaccination clinics	Montauk Medical	328 x 39.96	13,108 ✓
Subtotal - Code 40			35,208

SUPPLIES AND MATERIALS: Code 45

Beginning with the 2005-06 year include computer software, library books and equipment items under \$5,000 per unit.

For earlier years include computer software, library books and equipment items under 1,000 per unit.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Sanitizing/Cleaning supplies:masks, gloves, table wipes, air freshener, disinfectant, desk dividers	328	30.48	10,000 ✓
RtI materials – 20* LL	328	67.05	21,995 ✓
Broadworks- 20* LL	328	77.39	10,000 ✓
Chromebooks	30	533.00	16,000 ✓
Desktop computers	10	1,027.00	10,271 ✓
Piano Keyboards	30	125.00	3,770 ✓
Guitars,	30	40.00	1,200 ✓
Ukuleles,	30	40.00	1,200 ✓
Saxophones,	15	1,500.00	22,500 ✓
Clarinets,	15	800.00	12,000 ✓
Flutes.	30	80.00	24,000 ✓
Summer Baseball camp	30	56.66	1,700 ✓
Summer Drama	30	40.76	1,223 ✓
Materials associated with SEL Yale Ruler Program- 20% LL	328	30.48	10,000 ✓
Summer School Learning Materials- 20% LL	328	21.34	7,000 ✓
ESL Learning Materials – 20% LL	328	21.34	7,000 ✓
Special Education Learning Materials	328	33.84	11,000 ✓
Subtotal - Code 45			170,859

TRAVEL EXPENSES: Code 46

Include pupil transportation, conference costs and travel of staff between instructional sites. Specify agency approved mileage rate for travel by personal car or school-owned vehicle.

Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
Special Education Summer School Transportation	Montauk	3,333 x 3	10,000 ✓
Subtotal - Code 46			10,000

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EMPLOYEE BENEFITS: Code 80

Rates used for project personnel must be the same as those used for other agency personnel.

Benefit		Proposed Expenditure
Social Security		
Retirement	New York State Teachers	
	New York State Employees	
	Other	
Health Insurance		
Worker's Compensation		
Unemployment Insurance		7,000
Other (Identify)		
Subtotal - Code 80		7,000

INDIRECT COST: Code 90

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)

\$		(A)
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B. Approved Restricted Indirect Cost Rate

%		(B)
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C. (A) x (B) = Total Indirect Cost

Subtotal – Code 90

\$

(C)

PURCHASED SERVICES WITH BOCES: Code 49

Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Professional Development	Eastern Suffolk BOCES	7,500 x 1 + 4,000x 2	\$15,500
Subtotal – Code 49			15,500

7500
Speaker 03/14/23

MINOR REMODELING: Code 30

Allowable costs include salaries, associated employee benefits, purchased services, and supplies and materials related to alterations to existing sites.

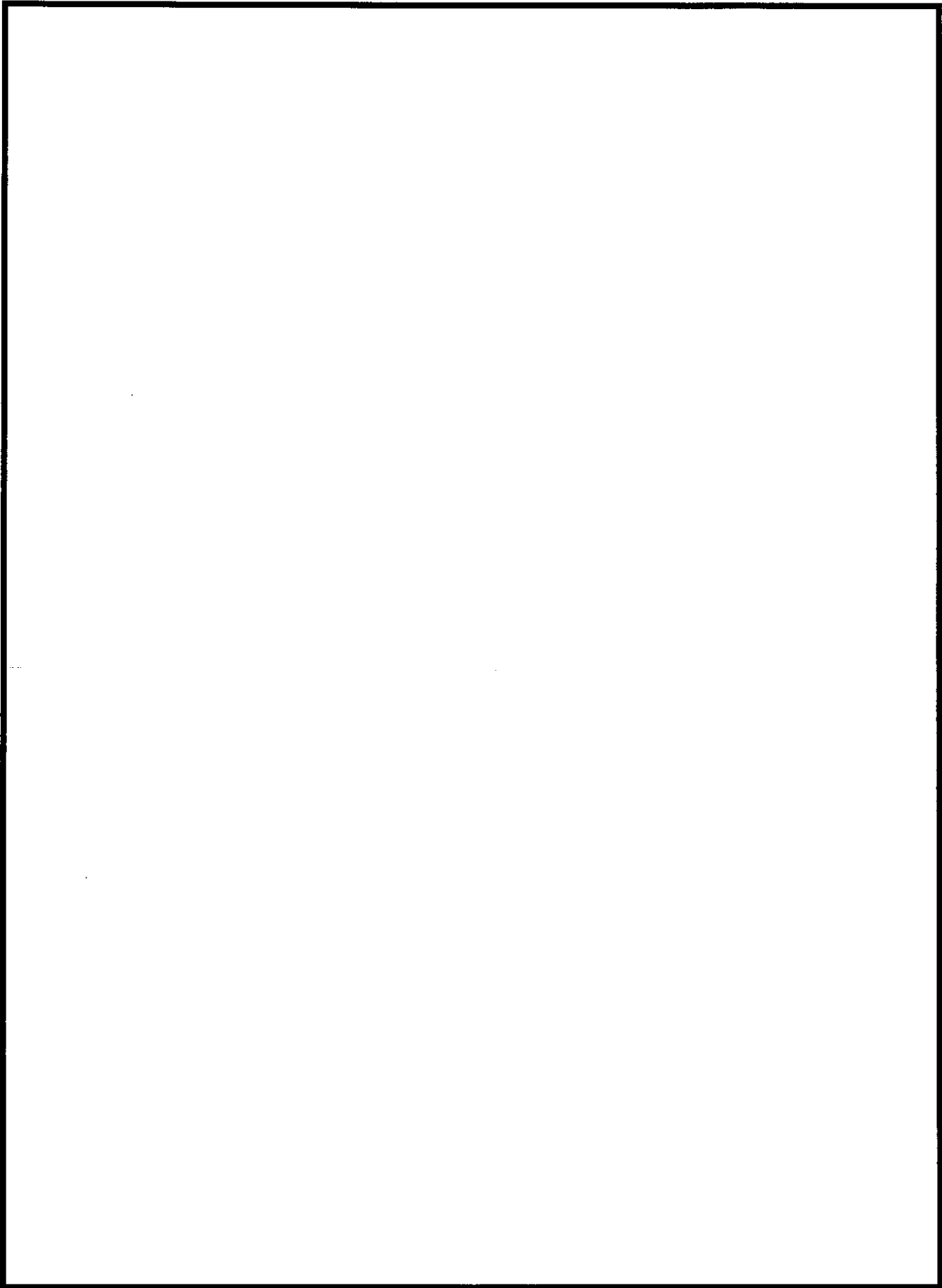
Description of Work To be Performed	Calculation of Cost	Proposed Expenditure
Sidewalks for outdoor Learning Space- Celtic Masonry	40,000 PO 417, 245, 153. 29,000	03/14/2023 40,000 FS-25
Outdoor classroom spaces- Celtic Masonry	PO 187 - 12500 - check # 20467. 30,000 PO 155 check # 18977 27,300	30,000
Air filtration- Medify Air	10,000	10,000
Air conditioning- Action Air	70,848 = PO 191	70,848
Window lintels- Celtic Masonry	16,500	16,500
Windows- Kelly Windows	20,000	20,000
Subtotal – Code 30		187,348 ✓

EQUIPMENT: Code 20

Beginning with the 2005-06 year all equipment to be purchased in support of this project with a unit cost of \$5,000 or more should be itemized in this category. Equipment items under \$5,000 should be budgeted under Supplies and Materials, Code 45. Repairs of equipment should be budgeted under Purchased Services, Code 40.

For earlier years the threshold for reporting equipment purchases was \$1,000 or more. Equipment items under \$1,000 should be budgeted under Supplies and Materials.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Touchless Bathroom Fixtures	125	120.00	15,000
Parking Lot Lighting	1	20,643.00	20,643
Subtotal – Code 20			35,643



BUDGET SUMMARY

Name and Title of Chief Administrative Officer

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	32,000
Support Staff Salaries	16	96,000
Purchased Services	40	35,208
Supplies and Materials	45	170,859
Travel Expenses	46	10,000
Employee Benefits	80	7,000
Indirect Cost	90	
BOCES Services	49	15,500
Minor Remodeling	30	187,348
Equipment	20	35,643
Grand Total		589,558

Agency Code:

Project #: (If pre-assigned)

Contract #:

Federal Employer ID #:

Agency Name: Montauk UFSD

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).

12/16/21
Date

Signature

J. Philip Perna, Superintendent

Fiscal Year	Amount Budgeted	First Payment
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Voucher # _____ First Payment _____

Finance:



Jack Perna <jperna@montaukschool.org>

[EXT] ARP ESSER 90% Application- approved

2 messages

Sayvanna SFabian <Sayvanna.SFabian@nysed.gov>

Thu, Feb 3, 2022 at 2:00 PM

To: "mneuschwender@montaukschool.org" <mneuschwender@montaukschool.org>, Jack Perna <jperna@montaukschool.org>

Good afternoon,

I hope this email find you well and in good spirits. Thank you for re-submitting your application. I went ahead and made the following revisions to your submission based on what was given back from Grant's Finance on the first original approval. I will update and resubmit the forms on your behalf.

The changes that were made:

- Fixed code 20 to make sure that all cost lined up with line items and equaled the correct proposed expenditure including unit cost and quantity.
- Moved positions to the correct codes and provided more detailed to line items in code 40 based on additional FS-10 provided.

Please keep this document on record should your organization need to make an amendment to the application. I appreciate your patience and teamwork and making sure we get the application complete.

Warmest Regards,

Sayvanna SFabian

Project Coordinator

Office of ESSA-Funded Programs

New York State Education Department

89 Washington Avenue

Albany, NY 12234

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 **Montauk.docx**
72K

Jack Perna <jperna@montaukschool.org>
To: Sayvanna SFabian <Sayvanna.SFabian@nysed.gov>

Thu, Feb 3, 2022 at 2:27 PM

Thank you!
[Quoted text hidden]

...Excellence, Dignity, and Pride

J. Philip Perna
Superintendent
Montauk UFSD
50 South Dorset Drive
Montauk, NY 11954

"Montauk: Where the day begins in New York State"

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