

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:	ARP- IDEA PART B SE		
Report Prepared By:	Leta Berardi-Carlson	F2115	
Agency Name:	Kingston City School District		
Mailing Address:	21 Wynkoop Place		
	Street		
	Kingston	NY	12401
	City	State	Zip Code
Telephone # of Report Preparer:	845-943-3034		County: Ulster
E-mail Address:	lberardi-carlson@kingstoncityschools.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 use 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			\$246,614
Name	Position Title	Beginning and End Dates of Work	Salary Paid
	SP ED TEACHER	9/1/22-6/30/23	\$118,418
	SP ED TEACHER	9/1/22-6/30/23	\$128,196

PURCHASED SERVICES			
Subtotal - Code 40			\$50,489
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended
4/20/23	ABILITIES FIRST, INC	23519	\$520
5/15/23	ADVANCED THERAPY	23592	\$520
4/26/23	ANDERSON	23594	\$1,300
4/18/23	ARC OF ORANGE COUNTY/GREATER HUDSON VALLEY	23520	\$260
4/26/23	ASTOR	23595	\$780
4/27/23	BROOKSIDE-ARC ULSTER GREEN	23546	\$8,580
4/26/23	CENTER FOR DISABILITY SERVICES	23552	\$260
4/18/23	CENTER FOR DISCOVERY	23525	\$780
4/27/23	CENTER FOR SPECTRUM SERVICES	23553	\$13,087
4/18/23	CHILDRENS HOME	23526	\$1,040
4/18/23	DEVEREUX FOUNDATION	23531	\$2,600
4/27/23	GREEN CHIMNEYS SCHOOL	23560	\$2,340
4/18/23	LEARNING TOGETHER	23533	\$347
4/27/23	LIBERTY RESOURCES POST, PLLC	23564	\$1,300

4/19/23	PARTNERSHIP FOR EDUCATION	23515	\$4,687
4/18/23	VANERHEYDEN HALL	23572	\$260
4/18/23	WILDWOOD SCHOOL	23643	\$780
4/18/23	WRAPAROUND SERVICES (UCP)	23540	\$8,320
1/17/23	CHILDRENS HOME ARTICLE 81	23526	\$2,728

Employee Benefits

Subtotal - Code 80			\$90,204
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement	\$246,614.00	10.29%	\$25,377
Employee Retirement			
Other Retirement			
Social Security	\$246,614.00	7.65%	\$18,866
Worker's Compensation	\$246,614.00	1.00%	\$247
Unemployment Insurance			
Health Insurance			\$45,714
Other(Identify)			

FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$246,614
Support Staff Salaries	16	
Purchased Services	40	\$50,489
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$90,204
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$387,307

LOCAL AGENCY INFORMATION

Agency Code: 620600010000

Project #: 5532-22-0990

Contract #:

Agency Name: Kingston City Schools

Funding Dates: 7/1/2021 TO 9/30/2023

Approved Budget Total: \$ 387,307

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, 7, 23

Date Signature

DR. Paul J. Padalino

Superintendent of Schools

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>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Voucher #	Final Payment		

Finance: Logged _____ Approved _____ MIR _____