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:	KIPP Bronx III Charter School	Bronx						
Mailing Address:	501 Gerard Ave 5th Floor	County -						
	Bronx, NY 10451	-						
Agency Code:	321000861151	Amendment #: 001						
Project Number:	588-021-5520							
Contract #:								
Contact Person:	Lisandro Florencio	Tel: 21	2-991-2610					
E-mail Address:	LiFlorencio@kippnyc.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, nun	• •							
Equipment items having a unit value of \$5,000 or more, number and type Minor remodeling.								
 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. Amondment # at ten of this rage must be completed.								
 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. 								
	OURE ADMINISTRATIONS OFFI	FIGATION						
By signing this report I ce	CHIEF ADMINISTRATOR'S CERTIL dify to the best of my knowledge and belief that the ren		accurate & the					
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 penaltiesfor fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and								
Title 31, Sections 3729-37		or otherwise. (0.6. 600	o ring ro, goodon root and					
	0119173	,s 3						
Date:	<u>8/18/23</u> Signature:	*.						
		,						
	FOR DEPARTMENT USE OF	NLY						
Program Approval:		Date:						
Finance:								
	Logged Approved							
	EXPLANATION (Provide	SUBTOTAL	SUBTOTAL					
SUBTOTAL	same detall as required in FS-10 Budget)	INCREASE	DECREASE					

	, , , , , , , , , , , , , , , , , , , ,				
15 - Professional Salaries	Decrease of \$458,740 to reflect changes other categories. We will also be funding pathe salaries for the Manager of Middle Sch Career Counseling and part of the salary of Director of Mental Health. Part of the salar for the principal, assistant principal for teach and learning, assistant principal of studen director of humanities, and director of teach and learning are covered for academic are operational support.	rt of ool the ies ning ts, ning	,		\$458,740.00
16 - Support Staff Salaries	Increase of \$593,058 to cover instructional supporting learning loss and part of the sale of staff addressing health and safety sta	ries	\$593,058,00		
40 - Purchased Services	Decrease of \$220,248 to reflect changes other categories	in			\$220,248
45 - Supplies & Materials	Increase of \$24,430 reflects purchases of chromebooks for students	of	\$24,430.00		
46 - Travel Expenses	For Increase: Travel Expenses for two stat Accounting convention	f to	\$430		
80 - Employee Benefits	Increase of \$236,073 to reflect the additionstaff being funded by ESSER	nal	\$236,073.00		
90 - Indirect Cost	Decrease of \$175,003 to reflect changes other categories	in			\$175,003
49 - Boces Services 30 - Minor Remodeling					
ov - willor recificualing					
20 - Equipment					
	Total Increase or Decrease:	(+)\$	853,991	(-)\$	853,991
	Net Increase or Decrease:	\$			0
ENTER BUDGET >	Previous Budget Total:	\$			2,612,236
	Proposed Amended Total:	\$			2,612,237