

Preparing the Budget with Carryover

Title IV, Part B – Nita M. Lowey
21st Century Community
Learning Centers



OKLAHOMA
Education





Overview

- Logistics for Non-District Grantees
 - Unique Entity Identifier (UEI)
 - Oklahoma Cost Accounting System (OCAS)
- Planning the Budget with Carryover
- Creating a Budget in the Grants Management System (GMS)
- GMS Tips and Next Steps



Logistics

Unique Entity Identifier (UEI)

- The UEI is a twelve character unique number registering your organization to receive federal funds
- Used by the federal government to track how federal money is allocated
- Plan ahead, GMS will require the UEI
- Budgets cannot be approved and claims cannot be paid without a **current** UEI



Logistics

Oklahoma Cost Accounting System

- All expenditures reported using the Oklahoma Cost Accounting System (OCAS)
- Established to provide a method of standardized financial reporting to increase accountability of tax dollars
- Verify funds are used to optimize student education
- <https://oklahoma.gov/education/resources/school-finance/financial-accounting.html>
- Quick Coding Reference
- Joint Federal Programs Claims Procedures
- Budget codes – use of rounded versus bold codes



Logistics

Oklahoma Cost Accounting System (OCAS) Codes

- **Function Codes** – describe the activity performed
 - 1000 – Instruction
 - 2000 – Support Services
 - 5000 – Other Uses
- **Object Codes** – describe the services or goods obtained
 - 100 – Personnel
 - 200 – Benefits
 - 300 – Contracts
 - 500 – Other Purchased Services
 - 600 – Supplies
 - 700 – Property
 - 800 – Other Objects
 - 900 – Other Uses of Funds



Planning the Budget

Step 1 – Review the original competitive grant application

Step 2 – Meet with your team to plan programming, identify staffing needs, and outline budget priorities for the fiscal year

Step 3 – Review the Oklahoma Cost Accounting System (OCAS) Manual, Quick Coding Reference sheet, **and** grant guidance related to allowable and non-allowable expenditures



Planning the Budget

GMS, Access, and Authorized Official

- All budgets, claims, and supporting documentation will only be accepted through the Grants Management System (GMS)
- Grant Lead/Program Director will, at minimum, require view-only access within the GMS to view budgets, claims, and the original competitive grant application
- All budgets, budget amendments, and claims must be submitted by the **authorized official** (usually the superintendent or authorized official of a community-based organization)



Planning the Budget Expenditures

- Must be reasonable, necessary, allocable, and properly documented
 - Costs must be directly linked to the size and scope of the program
- Must be afterschool and summer learning specific
- Pre-approval from the OSDE prior to purchasing any single item exceeding \$1,000 or any total exceeding \$2,500 is **required**
 - Items contained within the approved budget application do not need further approval



Planning the Budget

Staff Salaries and Benefits (Codes 100 and 200)

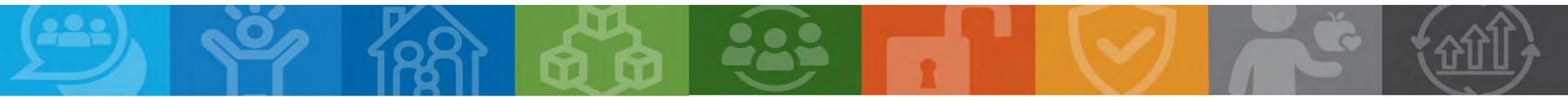
- Student attendance should drive program staffing levels
- The primary purpose of these specific funds is to provide direct student service
- Show details in the description by indicating:
 - # of staff x hours per day x rate of pay x number of program days
 - Include staff names for all lead and permanent program staff positions



Planning the Budget

Staff Salaries and Benefits (Codes 100 and 200)

- Function and Object Codes
 - Instructional Staff are coded to 1000-100s
 - Parent/Family Engagement staff are coded to 2194-100s
 - Program Lead/Director/Coordinator(s) are coded to 2212-100s
 - State and Federal Relations personnel are coded to 2330-100s
 - Bus Drivers are coded to 2720-100s
- All 100s must have 200s



Planning the Budget

Contracted Services (Code 300)

- For services provided by personnel not on payroll, including outside instructors, presenters, and staffing/transportation contractors
- Contracts provide adequate details to determine reasonable and necessary
- Contracts must be uploaded into the GMS



Planning the Budget

Out-of-State/Overnight Travel (Codes 500 and 800)

- Program leaders shall participate in afterschool specific learning opportunities annually
 - Instructional staff (1000 & 2212) will be coded to 2213
 - Non-instructional staff (2330 & 2194) will be coded to 2573
- Staff Travel expenses (500): Airline, hotel, transportation, meals/per diem
- Staff registration fees (800)
- All school district/organization travel policies and IRS statutes for travel apply



Planning the Budget

In-State Travel (Codes 500 and 800)

- Local mileage for program director (2330) and site coordinator (2212) related to development and preparation of program activities may be reimbursable under the associated code 2330 or 2212-580
- Meal reimbursement during in-state day-only travel (non-overnight status) must be coded as income



Planning the Budget

Program Supplies and Equipment (Code 600)

- Object Code 600 is for a single item under \$5,000 regardless of the total invoice amount
- Be as descriptive as possible
- Bus fuel for student transportation is coded 2740-623/625
- Fuel expenditures should be calculated based on the formula below:
 - Total route miles \div miles to the gallon x average price per gallon =



Planning the Budget

Program Supplies and Equipment (Code 700)

- Object Code 700 is for a single item \$5,000 or more and a life span greater than one year
- Be as descriptive as possible



Planning the Budget

Other Object Codes

- Student entrance fees for educational field trips are coded to 1000-800
- Student registrations for educational competitions are coded to 1000-800
- Other Common Codes:
 - Advertisement for employment is coded 2571-500
 - Background checks for employees are coded 2571-800



Planning the Budget

Indirect Costs (Code 900)

- Allowance to offset district/organization overhead cost is coded 5400-970
- Indirect costs must still be reasonable, necessary, and allowable based on guidelines for the specific funding source



Planning the Budget

Quality Improvement (Code 2544)

- Contracted External Assessors are coded to 2544-300 for grantees in years 3 and 4
- Quality Kits are coded to 2544-600 for all grantees



Creating a New Budget

- All budgets, claims, and supporting documentation will be accepted only through the Grants Management System (GMS).
 - Log into Single Sign-On
 - Select Grants Management and Expenditure Reporting
 - Select GMS Access / Select

- Home / Applications
- About This Site
- Links And Docs
- Sign In

Welcome to the new Single Sign On system. If you have an existing username and password for the previous Single Sign On system you may use that here. If you do not have an account you may create one now using the link below.

If you are having trouble signing in please click the link below to recover your username or password. If you need assistance please contact the OMES Help Desk at (405) 521-2444 or at (866) 521-2444.

Username:

Password:

[Sign In](#)

- Are you a New User? Click here to create an account.
- Username problems? Click here to recover your username.
- Password problems? Click here to recover your password.

Log into Single Sign-On

<https://sdeweb01.sde.ok.gov/SSO2/Signin.aspx>

OKLAHOMA
State Department of Education

Welcome **Single Sign On**

Home / Applications

Your Account

About This Site

Links And Docs

Sign Out

Home / Applications

Applications

These are your current applications

- Accountability (A-F Report Cards)
SDEAdmin - SDE Administrators
- Allocation Notices System
SDE View Only
- Grants Management and Expenditure Reporting**
SDE View Only
- Oklahoma Educator Credentialing System
DOEREAD - OSDE Read Only
- School Personnel Records - FY 2009
SDE View Only

Click/Select
Grants Management and Expenditure Reporting



Menu List

Select GMS Access/Select for Grant Applications

Administrative

[21st Century Monitoring](#)

[Special Education Compliance](#)

[GMS Access / Select](#)

[Funded Applications](#)

[Non-Funded Data Collections](#)

**Click/Select
GMS Access / Select**



To report an error or for technical assistance with GMS, contact:

Federal Programs - Email: Nancy.Hughes@sde.ok.gov

Special Education - Email: Karen.Howard@sde.ok.gov

School Support - Email: Zada.Sery@sde.ok.gov

21st Century - Email: Sonia.Johnson@sde.ok.gov

Competitive - Email: Shelly.Perkins@sde.ok.gov

GMS Access Select

Select Fiscal Year:

[Click to view Funding Summary](#)

Allocati

This is the first screen you will see. This list may look different, depending on which funding streams your district/organization receives.

Created

Consolidated Plan

| Application Name | Revision | Status | Date | Actions | | |
|------------------|-------------|----------------------|----------|---------|-------|--------|
| Assurances | Amendment 1 | Returned for Changes | 2/8/2022 | Open | Amend | Review |

Continuous Improvement Plan

Expanded Learning

| Application Name | Revision | Status | Date | Actions | | |
|---|----------|--------|------|---------|--|--|
| 21st Century Competitive | | | | | | |
| ESSER Afterschool and Summer Learning Competitive | | | | | | |

Scroll Down



IDEA

| Application Name | Revision | Status | Date | Actions | | | | |
|---|----------------------|----------------------|------------|---------|-------|--------|----------|----------------|
| IDEA Consolidated Application | Amendment 1 | Final Approved | 2/8/2022 | Open | Amend | Review | Payments | Delete Applica |
| LEA Agreement | Amendment 1 | Returned for Changes | 2/21/2022 | Open | Amend | Review | | Delete Applica |
| Spec Ed PD District - Proj 615 | Amendment 2 | Final Approved | 12/14/2021 | Open | Amend | Review | Payments | Delete Applica |
| School Based Services Participation Agreement | Original Application | Final Approved | 9/13/2021 | Open | Amend | Review | | Delete Applica |
| ARP IDEA Consolidated | Amendment 1 | Final Approved | 2/8/2022 | Open | Amend | Review | Payments | Delete Applica |

Federal Programs

Note: Select correct Fiscal Year

Fiscal Year: 2025



[Click to view Funding Summary](#)

[Allocation Notices](#)

Plan

There currently aren't any Consolidated Plan applications created.

21st Century

| Application Name | Revision | Status | Date | Actions | | | | |
|-----------------------------------|----------------------|---------------|------|---------|-------|--------|----------|--------------------|
| 21st Century Funded 1 Project 553 | Original Application | Not Submitted | | Open | Amend | Review | Payments | Delete Application |

IDEA

There currently aren't any IDEA applications created.

Federal Programs

There currently aren't any Federal Programs applications created.

School Support

There currently aren't any School Support applications created.

Student Support

There currently aren't any Student Support applications created.

Available

Consolidated Plan

Assurances

▶ Continuous Improvement Plan

Expanded Learning

▶ 21st Century

Submissions due by

| | | |
|-----------------------------------|--------------------|---------------|
| 21st Century Funded 2 Project 554 | Submissions due by | Create |
|-----------------------------------|--------------------|---------------|

Click/Select Create

Create



Create

ESSER Afterschool and Summer

Submissions due by

GMS Access Select

Select Fiscal Year: 2025

[Click to view Funding Summary](#)

[Allocation Notices](#)

Created

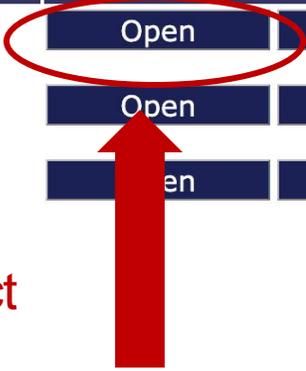
Consolidated Plan

There currently aren't any Consolidated Plan applications created.

Expanded Learning

| Application Name | Revision | Status | Date | Actions | | | | |
|---------------------------------------|---|---------------|------|-------------|-------|--------|----------|--------------------|
| 21st Century Funded 1 Project 553 | Original Application <input type="button" value="v"/> | Not Submitted | | Open | Amend | Review | Payments | Delete Application |
| 21st Century Funded 2 Project 554 | Original Application <input type="button" value="v"/> | Not Submitted | | Open | Amend | Review | Payments | Delete Application |
| ESSER Afterschool and Summer Learning | Original Application <input type="button" value="v"/> | Not Submitted | | Open | Amend | Review | Payments | Delete Application |

Click/Select
Open



Navigation tabs will guide you through the application.
 Additional tabs may appear beneath them when selected.
 Click each tab to become familiar with the application.

Application:
 Application Cycle:
 Application Due Date:

21st Century FPO 553 ▾

Project Period:

[Printer-Friendly](#)
[Click to Return to GMS Access/Select Page](#)
[Click to Return to Menu List / Sign Out](#)

- Overview
- Program Information
- Site Information
- Special Conditions
- SAM UEI Number
- Equitable Share
- Supporting Documentation
- Budget
- Assurances
- Submit
- Application History
- Application Print

Title IV, Part B – Nita M. Lowery 21stCCLC – Funded Projects

Program: Title IV, Part B – Nita M. Lowery 21stCCLC – Funded Projects

Purpose: This application is completed annually by organizations awarded funds through the Title IV, Part B – Nita M. Lowery 21stCCLC competitive application process. Applicants must provide an annual budget plan consistent with the Budget Summary presented in the competitive application that resulted in the award.

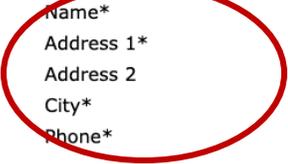
Funding Period: July 1, 2023 through June 30, 2024.

OSDE Contact: Family and Community Engagement/21st CCLC (405)522-6225

Original Grant Award:

Program Information

Superintendent / Authorized Representative



* Next to an item denotes required fields

Name*

Address 1*

Address 2

City*

Phone* Extension

Street Address

State* Zip+4* 7625

Email*

Program Director/Coordinator:

Last Name* First Name*

Daytime Position/Title*

Phone* Extension Email*

Co-Program Director/Coordinator:

Last Name First Name

Daytime Position/Title

Phone Extension Email

Fiscal/Claims Contact:

Last Name* First Name*

Daytime Position/Title*

Phone* Extension Email*

Alternate Phone: Extension

Family Engagement Contact:

Last Name First Name

Daytime Position/Title

Phone Extension Email

Alternate Phone Extension

Data Collection Contact:

Last Name* First Name*

Daytime Position/Title*

Phone* Extension Email*

Alternate Phone Extension

Primary Community Partner Contact:

| | | | |
|-------------------------|---|-----------------|---|
| Organization* | <input type="text"/> | | |
| Last Name* | <input type="text"/> | First Name* | <input type="text"/> |
| Daytime Position/Title* | <input type="text"/> | Email* | <input type="text"/> |
| Phone* | <input type="text"/> Extension <input type="text"/> | Alternate Phone | <input type="text"/> Extension <input type="text"/> |

Other Contact:

| | | | |
|------------------------|---|-----------------|---|
| Last Name | <input type="text"/> | First Name | <input type="text"/> |
| Daytime Position/Title | <input type="text"/> | Email | <input type="text"/> |
| Phone | <input type="text"/> Extension <input type="text"/> | Alternate Phone | <input type="text"/> Extension <input type="text"/> |

* Denotes required field

Application Approval / Disapproval Copy Email Addresses

- Check to add up to five (5) email addresses to receive copies of automated approval/disapproval notices. Only the Superintendent or Authorized Representative will receive an email notification and does not need to be included in this list. Any other users who should receive notification should be listed.

Add Additional Email Address

Save Page



In order for users other than the Authorized Representative to receive email notifications, add email address.

Site Information

Site 1:

Site Name*
AM Program Hours (ex: 6:45 AM - 7:45 AM)

Grade Span of Students Served*
PM Program Hours* (ex: 3:25 PM - 6:00 PM)

Program Dates

Afterschool Start Date* (ex. 8/12/2023)
Summer Start Date (ex. 6/1/2023)

Afterschool End Date* (ex. 5/15/2023)
Summer End Date (ex. 6/30/2023)

Coordinator

Coordinator Last Name*
Daytime Position/Title*
Program Web Site or Social Media*
Phone* Extension

Coordinator First Name*
Email*
Alternate Phone Extension

Site 2:

Site Name
AM Program Hours (ex: 6:45 AM - 7:45 AM)

Grade Span of Students Served
PM Program Hours (ex: 3:25 PM - 6:00 PM)

Program Dates

Afterschool Start Date (ex. 8/12/2023)
Summer Start Date (ex. 6/1/2023)

Afterschool End Date (ex. 5/25/2023)
Summer End Date (ex. 6/30/2023)

Coordinator

Coordinator Last Name
Daytime Position/Title
Program Web Site or Social Media
Phone Extension

Coordinator First Name
Email
Alternate Phone Extension

[Save Page](#)

Allocations

When funds are allocated, the amounts will automatically be filled.

| | TitleIVB_FPO |
|----------------------------------|---------------------|
| Current Year Funds | |
| Allocation | \$103,544.80 |
| ReAllocated (+) | \$0.00 |
| Released (-) | \$0.00 |
| Total Current Year Funds | \$103,544.80 |
| Prior Year(s) Funds | |
| Rollover (+) | \$0.00 |
| ReAllocated (+) | \$15,531.72 |
| Total Prior Year(s) Funds | \$15,531.72 |
| Sub Total | \$119,076.52 |
| Multi-District | |
| Transfer In (+) | \$0.00 |
| Transfer Out (-) | \$0.00 |
| Administrative Agent | |
| Adjusted Sub Total | \$119,076.52 |

Original Allocation



Carryover Allocation
(Separate, once all
closeouts are complete)



SAM UEI Number

System for Award Management (SAM)

LEAs are required, as per OMB Section 200.32 to register the UEI number with the System for Award Management (SAM).

*A New, non-proprietary 12 character identifier number will replace the current DUNS number. Users will automatically be assigned the new UEI (Unique Entity Identifier) at the time of registration renewal. The transition from DUNS to UEI must be completed by April 3, 2022.

Follow these steps to access your Entity Overview Record.

1. Go to SAM.GOV.
2. Type in your User Name and Password.
3. Click on SEARCH RECORDS.
4. Enter your UEI# and click SEARCH.
5. Click on ENTITY DASHBOARD.
6. Click on ENTITY RECORD. This is the page that should show you your DISTRICT'S NAME, your UEI#, and your REGISTRATION EXPIRATION DATE.
7. Upload into the space provided.

*a screenshot from SAM.GOV or the confirmation e-mail from SAM.GOV can be uploaded in place of the Entity Overview Record as long as the document is clearly from SAM.GOV and includes the LEA name, UEI# and expiration date.

*SAM UEI Number

Expiration Date:



All entities should have a current Unique Entity ID (SAM)

A copy of the Entity Overview Record must be uploaded.

Choose File No file chosen

No files are currently uploaded for this page.

| | | | | | | | | | |
|-------------------------------|---------------------|-------------|-------------|--------------------------|--------------------|------------|--------|---------------------|-------------------|
| Overview | Contact Information | Allocations | DUNS Number | Supporting Documentation | Special Conditions | Assurances | Submit | Application History | Application Print |
| Required Documentation | | | | Additional Documentation | | | | | |
| Required Documentation | | | | | | | | | |

1. Is the Grantee using the Time Distribution Records template provided by OSDE? Yes No

If no, upload a sample of the Time and Effort form/system to b

Choose File No file chosen Upload

No files are currently uploaded for this page.

1 - Required and supporting documentation may be needed

2. *Identification of Grant Lead: Please provide Director or Administrator resume and related certifications or credentials.

Choose File No file chosen Upload

No files are currently uploaded for this page.

2 - Required and supporting documentation required

3. Vendor Contracts: In order for vendor services to be reimbursed, a contract outlining services to be provided, payment structure and date of service must be executed. Please upload all executed vendor contracts.

Choose File No file chosen Upload

No files are currently uploaded for this page.

3 - Executed contracts may be provided in an amendment

4. Conflict of Interest: Uniform Grant Guidance, 2 C.F.R. §200.318(c)(1) discusses real and apparent conflicts of interest when working with federal funds. Please upload documentation that will disclose any potential conflict of interest within staff or contracted services to be paid under these funds and how the grantee plans to address the issue.

Choose File No file chosen Upload

No files are currently uploaded for this page.

4 and 5 - May require uploads

5. Authorized Signature: All claims for reimbursement must be signed by the authorized representative for the grantee organization. If the authorized representative is someone other than the district Superintendent or the agency Executive Director, a signed letter indicating board approval for this authority must be uploaded.

Budget Detail

Itemize and explain each expenditure amount that appears on the Budget Summary.

| | | | | | | | | | | |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------|
| Paid to Date Amounts | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | Indirect Cos |
| | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Current Budgeted Amounts by Object Code | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

Notes: The District Level Budget page is identified by '000'

Site:

Total Allocation Available for Budgeting

To obtain additional detail lines, fill in all blank lines, and click Save Page. Three (3) more blank lines will then be added at the bottom.

| Function Code | Object Code | Expenditure Description and Itemization | Afterschool_ESSER Funds | Delete Row |
|----------------------|----------------------|---|-----------------------------------|--------------------------|
| <input type="text"/> | <input type="text"/> | | <input type="text" value="0.00"/> | <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | | <input type="text" value="0.00"/> | <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | | <input type="text" value="0.00"/> | <input type="checkbox"/> |

Working from your original competitive application, make sure this budget aligns to what was detailed in the competitive grant application.

Total Displayed:

To obtain additional detail lines, fill in all blank lines, and click Save Page. Three (3) more blank lines will then be added at the bottom.

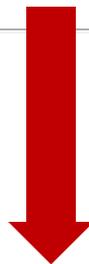
| Function Code | Object Code | Expenditure Description and Itemization | TitleIVB_FPO Funds | Delete Row |
|----------------------|----------------------|---|--------------------|--------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 0.00 | <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 0.00 | <input type="checkbox"/> |
| | | | \$0.00 | |

Fill in the first 3 rows,
Click/Select
Calculate Totals, then Save Page

The screen will refresh and 3 more lines will appear.

The maximum amount of Indirect Costs that may be taken and
Determining Maximum Indirect Cost allowed

| | | | |
|--|--------|----------------------------|--------|
| (A) Total Allocation Available for Budgeting | \$0.00 | (F) Total budgeted | \$0.00 |
| (B) Property Costs | \$0.00 | (G) Budgeted Indirect Cost | 0.00 |
| (C) Allowable Direct Costs (A-B) | \$0.00 | (H) Total Budget (F+G) | \$0.00 |
| (D) Indirect Cost Rate % | 3.5800 | | |
| (E) Maximum Indirect Cost (C*(D/1+D)) | \$0.00 | Remaining (A-H) | \$0.00 |



To expedite claims, clearly detail ALL items in the expenditure description and itemization column.

| Function Code | Object Code | Expenditure Description and Itemization | TitleIVB_SpecProj Funds | Delete Row |
|---------------|-------------|---|-------------------------|--------------------------|
| 1000 | 100 | Instructional Salary Total: \$130,000 8 certified teachers x \$00. x # hours/week x 36 weeks = \$90,000 10 non-certified teachers x \$00 x # hours/week x 36 weeks = \$40,000 | 30000.00 | <input type="checkbox"/> |
| 1000 | 100 | Carryover \$100,000 | 0.00 | <input type="checkbox"/> |
| 2212 | 100 | Director Salary: \$17,000 John Hancock .5 FTE - \$34,000 \$20/hr x 5 hrs x 5 days/week x 34 weeks = \$17,000 | 10000.00 | <input type="checkbox"/> |
| 2212 | 100 | Carryover \$7,000 | 0.00 | <input type="checkbox"/> |
| 1000 | 200 | Instructional Benefits Total: \$32,500 Benefits 130,000 x 0% = \$32,500 | 25000.00 | <input type="checkbox"/> |
| 1000 | 200 | Carryover \$7,500 | 0.00 | <input type="checkbox"/> |
| 2212 | 200 | Program Director Benefits \$32,500 x 0% = \$11,000 | 0.00 | <input type="checkbox"/> |
| 2212 | 200 | Carryover \$2,000 | 0.00 | <input type="checkbox"/> |
| 1000 | 600 | Instructional Supply Total: \$1,700 STEM Supply Total: \$1,200 Consumables = \$1,000 2 drones @ \$100 = \$200 Art Supply Total: \$325 Consumables = \$200 5 Easels @ \$25 = \$125 Cont'd | 1000.00 | <input type="checkbox"/> |
| 1000 | 600 | Cont'd Physical Fitness Total: \$175 10 jump ropes @ \$15 = \$150 5 basketball @ \$5 = \$25 | 0.00 | <input type="checkbox"/> |
| 1000 | 600 | Carryover \$700 | 0.00 | <input type="checkbox"/> |

If multiple lines are needed for a single function/object code description, only budget funds in the first cell and record the other cells as \$0.00.



| Function Code | Object Code | Expenditure Description and Itemization | TitleIVB_SpecProj Funds | Delete Row |
|---------------|-------------|---|-------------------------|------------------------------------|
| 1000 | 100 | Instructional Salary Total: \$130,000 8 certified teachers x \$00. x # hours/week x 36 weeks = \$90,000 10 non-certified teachers x \$00 x # hours/week x 36 weeks = \$40,000 | 30000.00 | <input type="checkbox"/> |
| 1000 | 100 | Carryover \$100,000 | 0.00 | <input type="checkbox"/> |
| 2212 | 100 | Director Salary: \$17,000 John Hancock .5 FTE - \$34,000 \$20/hr x 5 hrs x 5 days/week x 34 weeks = \$17,000 | 10000 | <input type="checkbox"/> |
| 2212 | 100 | Carryover \$7,000 | 0.00 | <input type="checkbox"/> |
| 1000 | 200 | Instructional Benefits Total: \$32,500 Benefits 130,000 x 0% = \$32,500 | 25000.00 | <input type="checkbox"/> |
| 1000 | 200 | Carryover \$7,500 | 0.00 | <input type="checkbox"/> |
| 2212 | 200 | Program Director Benefits \$32,500 x 0% = \$11,000 | 0.00 | <input type="checkbox"/> |
| 2212 | 200 | Carryover \$2,000 | 0.00 | <input type="checkbox"/> |
| 1000 | 600 | C. Instructional Supply Total: \$1,700 STEM Supply total: \$1,200 Consumables = \$1,000 2 drones @ \$100 = \$200 Art Supply Total: \$325 Consumables = \$200 5 Easels @ \$25 = \$125 Cont'd | 1000.00 | B. <input type="checkbox"/> |
| 1000 | 600 | Cont'd Physical Fitness Total: \$175 10 jump ropes @ \$15 = \$150 5 basketball @ \$5 = \$25 | 0.00 | <input type="checkbox"/> |
| 1000 | 600 | A. Carryover \$700 | 0.00 | <input type="checkbox"/> |

The description total (C) must equal the carryover amount (A) plus the budgeted amount (B).

$$A+B=C$$

To calculate carryover, refer to the Preparing the Closeout Report.

| Function Code | Object Code | Expenditure Description and Itemization | TitleIVB_SpecProj Funds | Delete Row |
|---------------|-------------|---|-------------------------|--------------------------|
| 1000 ▾ | 100 ▾ | Instructional Salary Total: \$130,000 8 certified teachers x \$00. x # hours/week x 36 weeks = \$80,000 10 non-certified teachers x \$00 x # hours/week x 36 weeks = \$50,000 | 30000.00 | <input type="checkbox"/> |
| 1000 ▾ | 100 ▾ | Carryover \$100,000 | 0.00 | <input type="checkbox"/> |

Each 100 Object Code must have a 200 Object Code

| | | | | |
|--------|-------|--|----------|--------------------------|
| 1000 ▾ | 200 ▾ | Instructional Benefits Total: \$32,500 Benefits 130,000 x 0% = \$32,500 | 25000.00 | <input type="checkbox"/> |
| 1000 ▾ | 200 ▾ | Carryover \$7,500 | 0.00 | <input type="checkbox"/> |

Lead staff (coded in function codes 2000) should be identified by name in the budget application.

| | | | | |
|--------|-------|---|------------------------------------|--------------------------|
| 2212 ▾ | 100 ▾ | Director Salary: \$17,000 John Hancock .5 FTE - \$34,000 $\$20/\text{hr} \times 5 \text{ hrs} \times 5 \text{ days/week} \times 34 \text{ weeks} = \$17,000$ | <input type="text" value="10000"/> | <input type="checkbox"/> |
| 2212 ▾ | 100 ▾ | Carryover \$7,000 | <input type="text" value="0.00"/> | <input type="checkbox"/> |

- Function/object code 1000-600 provides an overview of the materials and supplies necessary to carry out the grant objectives.
- During budget and claim reviews, it is important for this section to have clear details that include any large purchases such as technology, curriculum, or program supplies to give the reviewer an understanding of what the program offerings will include.
- When preparing this section grantees may choose to round for ease and clarity.

| | | | | |
|--------|-------|---|---------|--------------------------|
| 1000 ▾ | 600 ▾ | Instructional Supply Total: \$1,700 STEM Supply Total: \$1,200 Consumables = \$1,000 2 drones @ \$100 = \$200 Art Supply Total: \$325 Consumables = \$200 5 Easels @ \$25 = \$125 Cont'd | 1000.00 | <input type="checkbox"/> |
| 1000 ▾ | 600 ▾ | Cont'd Physical Fitness Total: \$175 10 jump ropes @ \$15 = \$150 5 basketball @ \$5 = \$25 | 0.00 | <input type="checkbox"/> |
| 1000 ▾ | 600 ▾ | Carryover \$700 | 0.00 | <input type="checkbox"/> |

To obtain additional detail lines, fill in all blank lines, and click Save Page. Three (3) more blank lines will then be added at the bottom.

| Function Code | Object Code | Expenditure Description and Itemization | TitleIVB_FPO Funds | Delete Row |
|---------------|-------------|---|--------------------|--------------------------|
| 1000 ▾ | 100 ▾ | Salary Total: \$100,000 | 100000.00 | <input type="checkbox"/> |
| 2212 ▾ | 100 ▾ | 1 full time grant coordinator (name) at \$00,000 annual salary based on current salary schedule for organization. | 0.00 | <input type="checkbox"/> |
| 1000 ▾ | 200 ▾ | Instructional Benefits Total: \$20,000 | 20000.00 | <input type="checkbox"/> |
| 2212 ▾ | 200 ▾ | Benefits for 1 full time grant coordinator (name) calculated at 00% = \$00,000 | 0.00 | <input type="checkbox"/> |
| 1000 ▾ | 600 ▾ | Supply Total: \$25,000 | 25000.00 | <input type="checkbox"/> |
| 1000 ▾ | 600 ▾ | Art Supply Total: \$5,000 X product @ \$XXX = X,XXX | 5000.00 | <input type="checkbox"/> |
| 2213 ▾ | 800 ▾ | Total Registration Cost: \$1000 Names @ \$XXX each = XXX for Conference Name | 1000.00 | <input type="checkbox"/> |
| ▾ | ▾ | | 0.00 | <input type="checkbox"/> |
| ▾ | ▾ | | 0.00 | <input type="checkbox"/> |

Total Displayed: \$151,000.00

The maximum amount of Indirect Costs that may be taken and no Property is budgeted will be \$0.00

Determining Maximum Indirect Cost allowed

| | |
|--|--------------|
| (A) Total Allocation Available for Budgeting | \$200,000.00 |
| (B) Property Costs | \$0.00 |
| (C) Allowable Direct Costs (A-B) | \$200,000.00 |
| (D) Indirect Cost Rate % | 0.0000 |
| (E) Maximum Indirect Cost (C*(D/1+D)) | \$0.00 |

| | |
|----------------------------|--------------|
| (F) Total budgeted | \$151,000.00 |
| (G) Budgeted Indirect Cost | 0.00 |
| (H) Total Budget (F+G) | \$151,000.00 |

Remaining (A-H) \$49,000.00

**Click/Select
Calculate Totals and Save Page**



The maximum amount of Indirect Costs that may be taken and no Property is budgeted will be \$0.00

Determining Maximum Indirect Cost allowed

| | |
|--|--------------|
| (A) Total Allocation Available for Budgeting | \$200,000.00 |
| (B) Property Costs | \$0.00 |
| (C) Allowable Direct Costs (A-B) | \$200,000.00 |
| (D) Indirect Cost Rate % | 0.0000 |
| (E) Maximum Indirect Cost (C*(D/1+D)) | \$0.00 |

All funds must be budgeted and the remaining amount must be \$0.00.



| | |
|----------------------------|--------------|
| (F) Total budgeted | \$151,000.00 |
| (G) Budgeted Indirect Cost | 0.00 |
| (H) Total Budget (F+G) | \$151,000.00 |
| Remaining (A-H) | \$49,000.00 |

Calculate Totals

Save Page

Applicant:
Application:
Cycle:
Application Due
Date:

Project Period

[Printer-Friendly](#)
[Click to Return to GMS Access/Select Page](#)
[Click to Return to Menu List / Sign Out](#)

- Overview
- Contact Information
- Allocations
- DUNS Number
- Supporting Documentation
- Special Conditions
- Assurances
- Submit

Special Conditions

There are no special conditions at this time.

- Overview
- Contact Information
- Budget
- DUNS Number
- Supporting Documentation
- Special Conditions

Special Conditions

Below are listed any special conditions that are part of the formal grant agreement to the Oklahoma State Department of Education (OSDE). These are legally binding conditions and are agreed to by the grantee by placing a checkmark in the checkbox. Failure to comply with these special conditions may result in the recovery of funds.

The district certifies that the Chief School Administrator has read and accepted the special conditions.

This is the special condition

[Save Page](#)

Special conditions may be added by the program office as necessary based on performance.

If special conditions are added, the grantee will be notified with instructions on required action in the GMS.

| | | | | | | | | | | |
|----------|---------------------|--------|----------------|--------------------|--------------------------|--------------------|------------|--------|---------------------|-------------------|
| Overview | Contact Information | Budget | SAM UEI Number | Equitable Share | Supporting Documentation | Special Conditions | Assurances | Submit | Application History | Application Print |
| | General Assurances | | | Program Assurances | | Fiscal Assurances | | | Assurance Summary | |

General Assurances

By checking this box and submitting this application to the Oklahoma State Department of Education, the applicant hereby certifies that he/she is the authorized representative of the organization and has read, understood and will comply with the assurances listed below. These assurances will also apply to any subsequent amendments of this application.

The applicant hereby assures:

1. The applicant assures the Title IV, Part B – Nita M. Lowey 21st Century Community Learning Center (21st CCLC) shall be administered in accordance will all applicable statutes, regulations, program plans and application.
2. The applicant assures proper methods for administering the Title IV, Part B – Nita M.
 - a) The enforcement of any obligations imposed by law.
 - b) The correction of deficiencies in program operations that are identified through
 - c) The adoption of written procedures for the receipt and resolution of complaints
3. The applicant assures reports to the Oklahoma State Department of Education (OSDE) their duties under the Title IV, Part B – Nita M. Lowey 21st CCLC program. The applicant reasonably require to carry out the agency’s duties
4. The applicant assures notice of intent to apply to the community and that the applicant application.
5. The applicant assures the program shall be administered in conformity with the Steve
6. The applicant assures equitable access to and equitable participation in the program’s activities shall be conducted in compliance with applicable federal civil rights laws, including Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, the Right to Privacy of Student Records (Federal Regulations, November 1975), the Age Discrimination Act of 1975, and any regulations issued thereunder, as well as applicable federal and state legislation.
7. The applicant assures compliance with the Debarment, Suspension, and Other Responsibility Matters regulation, the Single Audit Act, and the Gun Free Schools Act of 1994.
8. The applicant assures federal funds shall not be utilized to lobby Congress or any other federal or state agency.
9. The applicant assures conflict of interest policies for Federal awards shall be written and the applicant must disclose in writing any potential conflict of interest to the Oklahoma State Department of Education (OSDE).
10. The applicant assures it shall meet all applicable federal, state, and local health safety, and civil rights laws.
11. The LEA must disclose in a timely manner in writing to SDE all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the

Four assurance tabs must be completed.

Every tab has a box that MUST be clicked. This is the binding signature that the authorized agent of the organization has read and accepts ALL terms and conditions for the award.

| | | | | | | | | | | |
|--------------------|---------------------|--------------------|----------------|-----------------|--------------------------|--------------------|------------|-------------------|---------------------|-------------------|
| Overview | Contact Information | Budget | SAM UEI Number | Equitable Share | Supporting Documentation | Special Conditions | Assurances | Submit | Application History | Application Print |
| General Assurances | | Program Assurances | | | Fiscal Assurances | | | Assurance Summary | | |



Assurances are specific to Title IV – Part B

By checking this box and submitting this application to the Oklahoma State Department of Education, the applicant hereby certifies that he/she is the authorized representative of the organization and has read, understood and will comply with the assurances listed below. These assurances will also apply to any subsequent amendments of this application.

The applicant hereby assures:

1. The applicant assures the Title IV, Part B – Nita M. Lowey 21st Century Community Learning Center (21st CCLC) shall be administered in accordance will all applicable statutes, regulations, program plans and application.
2. The applicant assures proper methods for administering the Title IV, Part B – Nita M. Lowey 21st CCLC program shall be adopted, including:
 - a) The enforcement of any obligations imposed by law.
 - b) The correction of deficiencies in program operations that are identified through program audits, monitoring, or evaluation; and
 - c) The adoption of written procedures for the receipt and resolution of complaints alleging violations of law in the administration of the program.
3. The applicant assures reports to the Oklahoma State Department of Education (OSDE) shall be provided as may be necessary to enable the agency and the staff to perform their duties under the Title IV, Part B – Nita M. Lowey 21st CCLC program. The applicant shall maintain such records and afford such access to the records as the OSDE may reasonably require to carry out the agency’s duties
4. The applicant assures notice of intent to apply to the community and that the application and any waiver request shall be available for public review after submission of the application.
5. The applicant assures the program shall be administered in conformity with the Stevens Amendment.
6. The applicant assures equitable access to and equitable participation in the program’s activities shall be conducted in compliance with applicable federal civil rights laws, including Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, the Right to Privacy of Student Records (Federal Regulations, November 1975), the Age Discrimination Act of 1975, and any regulations issued thereunder, as well as applicable federal and state legislation.
7. The applicant assures compliance with the Debarment, Suspension, and Other Responsibility Matters regulation, the Single Audit Act, and the Gun Free Schools Act of 1994.
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11. The LEA must disclose, in a timely manner, in writing to SDE all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the

Applicant:

Application:

Cycle: 00-
Application Due Original Application
Date: 10/16/2021

Project Period: 7/1/2021 -
6/30/2022

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[Click to Return to GMS Access/Select Page](#)

[Click to Return to Menu List / Sign Out](#)

- Overview
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- Submit
- Application History
- Application Print

Submit

The Consistency Check must be successfully processed before you can submit your application.

- Consistency Check
- Lock Application
- Unlock Application

Assurances have not been agreed to on the Assurance application
LEA Data Entry
LEA Administrator
Program Review



When the information in each tab has been completed, click/select *Consistency Check*.

This process checks all required fields for completion. If no error messages are received, complete the submit process.

GMS Access Select

Once the budget is complete, all buttons will appear to allow budget review and budget amendments, review of comments, and submit claims.

List / Sign Out

Select Fiscal Year: 2022

Click to view Funding Summary

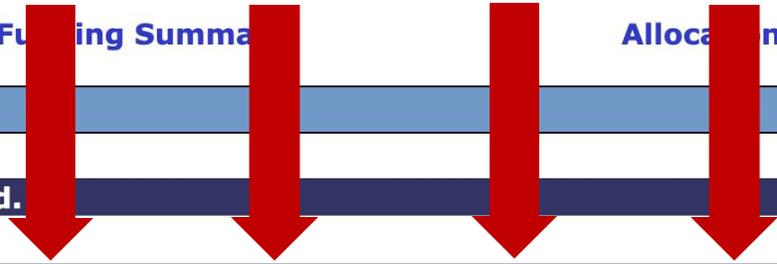
Allocation Notices

Created

Consolidated Plan
There currently aren't any Consolidated Plan applications created.

21st Century

| Application Name | Revision | Status | Date | Actions | | | | |
|---------------------------------------|----------------------|---------------|------|---------|-------|--------|----------|--------------------|
| 21st Century Funded 1 Project 553 | Original Application | Not Submitted | | Open | Amend | Review | Payments | Delete Application |
| ESSER Afterschool and Summer Learning | Original Application | Not Submitted | | Open | Amend | Review | Payments | Delete Application |





Budget Helpful Tips

- All object codes 100 must have an accompanying 200
- Function codes in 2000 (2194, 2212, 2213, 2330 and 2573) must include names
- Descriptions must equal the description total
- Carryover and budget for each function/object code must equal description total
- Remember to budget for Quality Kits and Assessors



GMS Helpful Tips

- Use the navigation buttons found in the top right corner of the GMS pages.
 - Do not use the back button to move through the application.
- Only click selections once.
 - Do not double-click or continuously click on the same item.
- Allow the system time to process the action.
 - Click slowly through GMS and allow the system to process your last action.
- Turn off pop-up blockers within your browser when working in the GMS.
 - If the budget is returned for corrections, the reviewer comments will open in a separate tab and pop-up blockers must be turned off for this tab to open.



Next Steps

- Budgets will not appear until your access has been granted
- Logistics for Non-District Grantees
 - Single Sign-On
 - Electronic Funds Transfer
 - UEI
 - Oklahoma Cost Accounting System (OCAS)
- Purchase Orders
 - Each Vendor requires its own Purchase Order Number
 - The credit card used is not the vendor



Fiscal Timelines

- **Budgets - Due two weeks after they open.**
- **November 1st** – At least one claim should be submitted
- **June 1st** – Last day to submit a clean claim to receive payment by the end of the fiscal year and record as Fiscal Year Revenue
- **June 30th** – Last day to encumber funds for the fiscal year
- **August 1st** – Deadline for **ALL** claims to be received at OSDE. Payment of late claims submitted after August 1st are subject to the approval of the State Board of Education
- **September 1st** – Deadline for the Final Fiscal Year Closeout procedures to be submitted



For Further Information

For more information, resources, tutorials, and FAQ's, please refer to:

- Oklahoma 21st CCLC website - <https://oklahoma.gov/education/services/family-community-engagement/21st-century-community-learning-centers.html>
- Grant Guidance – <https://oklahoma.gov/education/services/family-community-engagement/21st-century-community-learning-centers/grant-guidance.html>
- Financial resources - <https://oklahoma.gov/education/services/family-community-engagement/21st-century-community-learning-centers/budgets-and-claims.html>
- OCAS manual – <https://oklahoma.gov/education/resources/school-finance/financial-accounting.html#ocas>



Grant Contact Information

Oklahoma State Department of Education
21st Century Community Learning Center
2500 N. Lincoln Blvd., Suite 414
Oklahoma City, OK 73105
(405) 522-6225