Initial Budget X Amendment (No) X Revised Initial Budget X ARRA Regular	EA Comprehensive udget	ILLINOIS STATE BOARD OF EDUCATION Innovation and Improvement Division 100 North First Street, N-242		PROGRAM APPROVAL	DATE AND INITIALS
FISCAL SOURCE OF -11 REGION, COUNTY, DISTRICT, TYI YEAR FUNDS CODE -12 13 -13	CODE SUBMISSION DATEAQ { BaaD^^^	Springfield, Illinois 62777-0001	ΟΝΓΥ	TOTAL FUNDS	
DISTRICT NAME AND NUMBER		FY 2013 School Improvement Grant - Section 1003(g) Budget Summary	USE	CARRYOVER FUNDS	
CONTACT PERSON TELEPHONE NUME	(Include Area Code)	Use whole dollars only. Omit Commas and Decimal Places, e.g., 2536	ISBE	CURRENT FUNDS	
E-MAIL ADDRESS FAX NUMBER (Inclu	Area Code)	Projected Budget – 2012-2013		BEGIN DATE	END DATE 08/31/2013

Directions: Prior to preparing this Budget Summary and Payment Schedule request, please refer to the "State and Federal Grant Administration Policy and Fiscal Requirements and Procedures" handbook that can be accessed at http://www.isbe.net/funding/pdf/fiscal_procedure_handbk.pdf. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

LINE	FUNCTION NUMBER (1)	EXPENDITURE ACCOUNT (2)	SALARIES (3)	EMPLOYEE BENEFITS (4)	PURCHASED SERVICES (5)	SUPPLIES AND MATERIALS (6)	CAPITAL OUTLAY** (7)	OTHER OBJECTS (8)	NON- CAPITALIZED EQUIPMENT** (9)	TOTAL (11)
1	1000	Instruction	(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
<u> </u>										
2	2110	Attendance & Social Work Services								
3	2120	Guidance Services							L	
7	2210	Improvement of Instruction Services								
8	2220	Educational Media Services								
9	2230	Assessment & Testing								
10	2300	General Administration								
11	2400	School Administration								
13	2520	Fiscal Services*								
15	2540	Operation & Maintenance of Plant Services								
16	2550	Pupil Transportation Services								
18	2570	Internal Services*								
19	2610	Direcction of Central Support Services								
20	2620	Planning, Research, Development & Evaluation Services								
21	2630	Information Services								
22	2640	Staff Services*								
23	2660	Data Processing Services*								
24	2900	Other Support Services								
25	3000	Community Services								
26	4000	Payments to Other Districts or Government Units								
28	Total Direct C	osts								
30	TOTAL BUDG	ET								

* If expenditures are shown, the indirect costs rate cannot be used.

** Not applicable to all grants, and in no instances can Capital Outlay and Non-Capitalized Equipment or Facilities Acquisition & Construction Services be included in the indirect costs application.

Date

Date

Initial Budget X Amendment (No)	X LEA Budget	ILLINOIS STATE BOARD OF EDUCATION	Ĩ	PROGRAM APPROVAL	DATE AND INITIALS
Revised Initial Budget X ARRA Regular		Innovation and Improvement Division 100 North First Street, N-242			
FISCAL SOURCE OF 11 REGION, COUNTY, DISTRICT, YEAR FUNDS CODE 12	TYPE CODE SUBMISSION DATE (mm/dd/yyyy)	Springfield, Illinois 62777-0001	NLY	TOTAL FUNDS	
13 DISTRICT NAME AND NUMBER		FY 2013	—	CARRYOVER FUNDS	
		School Improvement Grant - Section 1003(g)	NS		
CONTACT PERSON TELEPHONE NU	JMBER (Include Area Code)	Budget Summary Use whole dollars only. Omit Commas and Decimal Places, e.g., 2536	ISBE	CURRENT FUNDS	
E-MAIL ADDRESS FAX NUMBER (In	nclude Area Code)	Projected Budget – 2012-2013		BEGIN DATE	END DATE 08/31/2013
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1	1000	Instruction	(Obj. 100s)	(ODJ. 2008)	(ODJ. 3008)	(ODJ. 4008)	(Obj. 5008)	(ODJ. 6008)	(Obj. 700s)	
2	2110	Attendance & Social Work Services								
3	2120	Guidance Services								
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Original Signature of Superintendent or Administrator

Date

Initial Budget	X Amendmer X ARRA	nt (No)	X LEA Budget	FY 2013 LEA BUDGET [¨] Ë [¨] SECTION 1003(g) AMENDMENT BUDGET SUMMARY BREAKDOWN	Page of _
SCHOOL NAME			DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE	

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

JNCTION IUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)		I	

Initial Budget	X Amendmer X ARRA	nt (No)	⊠ LEA Budget	FY 2013 LEA BUDGET – SECTION 1003(g) AMENDMENT BUDGET SUMMARY BREAKDOWN	Page	of _
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Initial Budget X Amendment (No) X Indivi Revised Initial Budget X ARRA Regular Budget	ual School t	ILLINOIS STATE BOARD OF EDUCATION		PROGRAM APPROVAL	DATE AND INITIALS
FISCAL SOURCE OF -11 REGION, COUNTY, DISTRICT, TYPE CODE YEAR FUNDS CODE -12	SUBMISSION DATEÁÇ { ĐảĐ^^^D	100 North First Street, N-242 Springfield, Illinois 62777-0001	ΟΝΓΥ	TOTAL FUNDS	
13 □-13 DISTRICT NAME AND NUMBER		FY 2013 School Improvement Grant - Section 1003(g)	USE (CARRYOVER FUNDS	
CONTACT PERSON TELEPHONE NUMBER (Inclu	le Area Code)	Budget Summary Use whole dollars only. OMIT COMMAS AND DECIMAL PLACES, e.g., 2536	ISBE	CURRENT FUNDS	
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ILLINOIS STATE BOARD OF EDUCATION

Innovation and Improvement Division 100 North First Street, N-242 Springfield, Illinois 62777-0001

FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)

DISTRICT NAME AND NUMBER/AGENCY/INSTITUTION NAME			REGION, COUNTY, DISTRICT, TYPE CODE
FISCAL YEAR	SOURCE OF FUNDS CODE	DUNS (9 digit number)**	PROGRAM NAME
13	4855		

The Federal Funding Accountability and Transparency Act (P.L. 109-282, as amended by section 6202(a) of P.L. 110-252) requires a Prime Awardee, such as a State agency, to report an award of \$25,000 or more made to a subrecipient as of October 1, 2010.

To fulfill reporting requirements, provide a brief but succinct description of how the funding you receive will support your activities and actions to meet the purpose and goals of your Federal grant. If there are multiple funding actions, please provide a description for each funding action.

Example of project description: Funds will be used for professional development to train teachers in the use of technology to improve instruction and make Adequate Yearly Progress. In addition, funds will be used to recruit and retain highly-qualified teachers.

Project Description*: (255 maximum characters used)

Agency's Annual Gross Revenues*:

Yes No In the previous fiscal year, did your organization (including parent organizations, all branches, and all affiliates worldwide) receive (1) 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements; **AND** (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, loans, grants, subgrants, and/or cooperative agreements? Please select the Yes check box only if both (1) and (2) are answered affirmatively.

Please provide the names and the total compensation package (using the preceding fiscal year's compensations of the top 5 highest paid individuals within your organization, regardless of the funding source*). <u>ftp://help.isbe.net/webapps/eGMS/2011/FFATA_Fed_Regis_7_8_2010.pdf</u>

	NAME	TOTAL COMPENSATION
1.		
2.		
3.		
4.		
5.		
* Required Field	** If you do not have a DUNS number, please contact Dun & Bradstreet at fedgov.dnb.com/webform	·

ISBE 54-25 FFATA (3/12)