

Indicate any **increases** in a line item subtotal with **GREEN** text subtotal.  
 Indicate and **decreases** in a line item with **RED** text in the subtotal.

School Improvement Grant (1003g)  
 Section II -- BUDGET  
 Revised Budget Year 3  
 School Year 2015-2016

Note: The total amount of funding per year must total **no less than \$50,000** and **no greater than \$2,000,000** per year.  
 The original approved allocation amount cannot be increased through an amendment.

Corporation Name: 5385  
 Corporation Number: Indianapolis Public Schools  
 School Name: RAYMOND F. BRANDES

ACCOUNT NO.	FTE	Cert.	Noncert.	EXPENDITURE DESCRIPTION	SUBTOTAL	LINE ITEM TOTAL
<b>1. PERSONNEL (include positions and names)</b>						
Interventionist	1.00	X			\$ 51,000.00	
Dean of Students	1.00	X	X		\$ 50,000.00	
Class-Size Reduction Teacher	1.00	X		Teacher to reduce class size in 4th grade	\$ 56,498.00	
Extended Time Learning		X	X	2 hours per day, 4 days per week for 30 weeks	\$ 30,000.00	
Intercession		X	X	10 Days, 5 hours per day	\$ 20,000.00	
PD Stipends		X	X		\$ 6,000.00	
Staff Incentives		X	X		\$ 25,000.00	
Leadership Incentives		X			\$ 10,000.00	
Supplemental Teacher(s)		X		Retired teachers will work 20 hours per week to assist with instruction in ELA and Math	\$ 40,000.00	
	3.00	<b>TOTAL SALARIES</b>				\$ 288,498.00
<b>2. Benefits: Benefits should be based on actual known costs or an established formula. Fixed charges/benefits below are for the personnel listed under PERSONNEL above and only for the percentage of time devoted to this project.</b>						
		<b>TOTAL FIXED CHARGES / FRINGE BENEFITS</b>				\$ 71,120.00
<b>3. TRAVEL: (differentiate in-state and out-of-state)</b>						
		out-of-state				
		out-of-state				
		out-of-state		TRAVEL COST OF OUT-OF STATE PROFESSIONAL DEVELOPMENT FOR STAFF	\$ 15,000.00	
		in-state		REGISTRATIONS FEES FOR IN-STATE CONFERENCES	\$ 3,300.00	
		<b>TOTAL TRAVEL</b>				\$ 18,300.00
<b>4. CONTRACTED SERVICES: (List the type of contracted services to be provided, including the vendor's name, if applicable.)</b>						
Lead Partner		Scholastic Achievement Partners			\$ 298,395.00	
Instruction		Smekens - Literacy			\$ 3,078.00	
Instruction		Responsive Classroom			\$ 10,000.00	
Parent Involvement		Family Leadership, Inc.			\$ 4,000.00	
Instruction		Lexia - Literacy			\$ 6,000.00	
Instruction		Read Naturally			\$ 2,500.00	
Instruction		Mountain Math			\$ 3,500.00	
		<b>TOTAL CONTRACTED SERVICES</b>				\$ 327,473.00
<b>5. SUPPLIES: Enter the total amount of materials and supplies. Provide a list of supplies on a separate sheet. (Include the total amount to be used to purchase testing, programmatic and/or office supplies.)</b>						
		<b>TOTAL SUPPLIES</b>				\$ 41,852.74
<b>6. EQUIPMENT AND TECHNOLOGY: Enter the total amount of equipment and technology purchases. Provide a list of equipment and technology on a separate sheet. Equipment is defined as "tangible, non-expendable/non-consumable personal property having a useful lifespan of more than one year".</b>						
		<b>TOTAL EQUIPMENT AND TECHNOLOGY</b>				\$ 80,000.00
<b>7. OTHER SERVICES: (Include a specific description of services.)</b>						
		<b>TOTAL OTHER SERVICES</b>				\$ 0.00
		<b>INDIRECT COST (2.07%)</b>				\$ 15,169.05
<b>TOTAL ANTICIPATED EXPENDITURES (SUM OF SECTIONS 1-7 OF THIS FORM).</b>						\$ 842,412.79
					<b>ORIGINAL BUDGET AMOUNT</b>	\$ 842,412.79
					<b>CARRYOVER AMOUNT</b>	\$ -
					<b>REVISED BUDGET AMOUNT</b>	\$ 842,412.79
					<b>AMOUNT AVAILABLE TO SPEND</b>	\$ (0.00)

